



QUICK TIPS: When Getting Medical Tests

Doctors order blood tests, x-rays, and other tests to help diagnose medical problems. Perhaps you do not know why you need a particular test or you don't understand how it will help you. Here are some questions to ask:

How is the test done?

- + What kind of information will the test provide?
- + Is this test the only way to find out that information?
- + What are the benefits and risks of having this test?
- + How accurate is the test?
- + What do I need to do to prepare for the test? (What you do or don't do may affect the accuracy of the test results.)
- + Will the test be uncomfortable?
- + How long will it take to get the results, and how will I get them?
- + What's the next step after the test?
- + One study found that anywhere from 10 percent to 30 percent of Pap smear test results that were called "normal" were not. Errors such as this can lead to a wrong or delayed diagnosis. You want your tests to be done the right way, and you want accurate results.

What can you do?

- + For tests your doctor sends to a lab, ask which lab he or she uses, and why. You may want to know that the doctor chooses a certain lab because he or she has business ties to it. Or, the health plan may require that the tests go there.
- + Check to see that the lab is accredited by a group such as the College of American Pathologists (800-323-4040) or the Joint Commission on Accreditation of Healthcare Organizations (telephone, 630-792-5800; Web site, www.jcabo.org).
- + If you need a mammogram, make sure the facility is approved by the Food and Drug Administration. You can find out by checking the certificate in the facility. Or, call 800-4-CANCER 9:00 a.m.-4:30 p.m. EST to find out the names and locations of certified facilities near you.

What about the test results?

- + Do not assume that no news is good news. If you do not hear from your doctor, call to get your test results.
- + If you and your doctor think the test results may not be right, have the test done again.
- + Remember, quality matters, especially when it comes to your health. For more information on health care quality and materials to help you make health care decisions, visit the link below.

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<http://www.abrq.gov/consumer/quicktips/tiptests.htm>

What's Up, Doc?

Research has shown that patients who have good relationships with their doctors tend to be more satisfied with their care—and to have better results. Here are some tips to help you and your doctor become partners in improving your health care.

Give Information.

Don't Wait to Be Asked!

- >> You know important things about your symptoms and your health history. Tell your doctor what you think he or she needs to know.
- >> It is important to tell your doctor personal information— even if it makes you feel embarrassed or uncomfortable.
- >> Bring a "health history" list with you, and keep it up to date. You might want to make a copy of the form for each member of your family.
- >> Always bring any medicines you are taking, or a list of those medicines (include when and how often you take them) and what strength. Talk about any allergies or reactions you have had to your medicines.
- >> Tell your doctor about any herbal products you use or alternative medicines or treatments you receive.
- >> Bring other medical info, such as x-ray films, test results, and medical records.

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To Your HEALTH



WELCOA'S ONLINE GENERAL WELLNESS BULLETIN

Lifestyle Changes

Many times, GERD can be managed through simple and straightforward lifestyle modifications. Here are the most common lifestyle suggestions for addressing GERD:

- If you smoke, stop.
- Do not drink alcohol.
- Lose weight if needed.
- Eat small meals.
- Wear loose-fitting clothes.
- Avoid lying down for 3 hours after a meal.
- Raise the head of your bed 6 to 8 inches by putting blocks of wood under the bedposts—just using extra pillows will not help.

Source: <http://digestive.niddk.nih.gov/ddiseases/pubs/gerd/index.htm>

got gerd?

Gastroesophageal reflux disease, or GERD, occurs when the lower esophageal sphincter (LES) does not close properly and stomach contents leak back, or reflux, into the esophagus.

The LES is a ring of muscle at the bottom of the esophagus that acts like a valve between the esophagus and stomach. The esophagus carries food from the mouth to the stomach.

When refluxed stomach acid touches the lining of the esophagus, it causes a burning sensation in the chest or throat called heartburn. The fluid may even be tasted in the back of the mouth, and this is called acid indigestion. Occasional heartburn is common but does not necessarily mean one has GERD. Heartburn that occurs more than twice a week may be considered GERD, and it can eventually lead to more serious health problems.

Anyone, including infants, children, and pregnant women, can have GERD.

What are the symptoms of GERD?

The main symptoms are persistent heartburn and acid regurgitation. Some people have GERD without heartburn. Instead, they experience pain in the chest, hoarseness in the morning, or trouble swallowing. You may feel like you have food stuck in your throat or like you are choking or your throat is tight. GERD can also cause a dry cough and bad breath.

What causes GERD?

No one knows why people get GERD. A hiatal hernia may contribute. A hiatal hernia occurs when the upper part of the stomach is above the diaphragm, the muscle wall that separates the stomach from the chest. The diaphragm helps the LES keep acid from coming up into the esophagus. When a hiatal hernia is present, it is easier for the acid to come up. In this way, a hiatal hernia can cause reflux. A hiatal hernia can happen in people of any age; many otherwise healthy people over 50 have a small one.

How is GERD treated?

If you have had heartburn or any of the other symptoms for a while, you should see your doctor. You may want to visit an internist, a doctor who specializes in internal medicine, or a gastroenterologist, a doctor who treats diseases of the stomach and intestines. Depending on how severe your GERD is, treatment may involve making lifestyle changes, taking medications or having surgery.

What are the long-term complications of GERD?

Sometimes GERD can cause serious complications. Inflammation of the esophagus from stomach acid causes bleeding or ulcers. In addition, scars from tissue damage can narrow the esophagus and make swallowing difficult. Some people develop Barrett's esophagus, where cells in the esophageal lining take on an abnormal shape and color, which over time can lead to cancer.

Also, studies have shown that asthma, chronic cough, and pulmonary fibrosis may be aggravated or even caused by GERD.

Source: <http://digestive.niddk.nih.gov/ddiseases/pubs/gerd/index.htm>

