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Preparing for a Doctor Visit

by Susan Agrawal

Most of our children see a large team of specialist physicians, sometimes as many as ten or more. Similarly, most of us have children with long, complicated, and often bewildering medical histories. Going in to see a new specialist--and even a familiar one--can be an overwhelming experience for both the family and the doctor. There is a tremendous amount of information that needs to be exchanged and processed, and there are likely to be many questions that need to be answered. Most doctors only have a limited amount of time with patients, often less than 30 minutes, and you need to maximize this time as much as possible.

This article will provide some tips for making the most out of your doctor visits, helping to create a good relationship with your physician, and making the best use out of your limited amount of scheduled appointment time.

Before the Visit

Before you even meet a new doctor, it is wise to begin your planning. I advise preparing a medical summary and contacting the office to provide them with medical records. For both new and return visits, it is also helpful to prepare a list of questions and compile needed paperwork/prescriptions.

The Medical Summary

The first thing I recommend doing is creating a medical summary for your child. (See the accompanying article on this topic.) You can think of this as a brief medical history for your child that will provide an overview of your child's current symptoms and history. I would create two versions: a short version (two to three pages) with just the relevant highlights and a long version with all of your child's history and important test results.

Preparing the Doctor in Advance

Ideally, the new doctor, along with his/her nurse, fellow, and other staff, should have copies of the medical summary at least one week in advance of the appointment date. It is often possible to email or fax the documentation, which works well in this era of technology.

It is also wise to ask the office staff what specific medical records may be useful for the appointment. For example, when seeing the pulmonologist for the first time, it is

important to bring reports for previous chest Xrays, CTs, and bronchoscopies. When seeing a new Gastroenterologist, lab reports showing nutritional status, reports from Upper GIs and endoscopies, and height/weight charts are helpful.

It is much better to send only the relevant information instead of a huge stack of every test result and report, many of which may not even apply to the current situation. A huge pile of records is not likely to be read or even skimmed, whereas a short summary with relevant test results is much more likely to be read thoroughly.

Sometimes it can be useful if another doctor familiar with your child, such as a primary care physician or complex care doctor, contacts the specialist in advance to provide background information. This, unfortunately, does not happen often, but can be useful to all parties involved.

Setting Goals

You will most likely not be able to accomplish everything in one office visit. A new doctor will need to get to know your child and set up a plan of care that may take multiple office visits to implement. As a result, it is exceptionally important to set goals, prioritizing those things that need to be addressed immediately, and setting aside less important tasks for future visits.

I recommend setting one major goal and about two to four smaller goals per visit. These will vary widely based on the child's needs and current symptoms. Here is an example from our first visit to the pulmonologist:

Primary Goal: Set-up a "pulmonary hygiene" plan to improve breathing on a daily basis.

Secondary Goals: Assess status of lungs/progression of lung disease. Discuss medications to improve breathing. Discuss assistive devices for coughing and mucus removal.

Future Goal: Develop "sick plan" to treat respiratory issues during illnesses.

It is often useful to list out the specific symptoms and problems that have led to the creation of each goal. For example, for the primary goal above, my daughter's symptoms included an increased need for oxygen at night, multiple episodes of respiratory distress, and frequent upper and lower airway infections.

Preparing a List of Questions and Needed Items

Finally, prepare ahead of time a list of specific questions relevant to your goals. Also include a list of items you need, such as new prescriptions, refills, school forms, or equipment orders. In some cases, it may be helpful to forward the list in advance to your doctor, though this is not necessary most of the time.

During the Visit

First, remember that every second you have is precious. This includes the time spent talking to the nurse, medical student, resident, and fellow, as well as the doctor. It is very standard at teaching hospitals to see one or more individuals in training before the doctor even enters the room. You do not want to spend all of your time outlining your child's medical history to a medical student who knows nothing about your child's disease. Keep your information brief and summarized until the fellow or specialist comes in to see your child.

Ideally, the doctor, nurse, and fellow all will have familiarized themselves with your child's medical history from your summary and records. This, unfortunately, may not be the case. Be prepared to take them through the relevant points briefly and concisely before moving on to the issues at hand.

One of the most important things you can do is to make the nurse and other office personnel your friends. A few kind words of thanks can go a long way in the future. Remember that it is the nurse and office staff who have the power to get you in to see the doctor or have the doctor return phone calls. Creating a good relationship with the nurse and office staff can improve your overall experience dramatically.

Try to keep your expectations in check. Many of us go in to office visits hoping the doctor will finally "solve" a huge problem. This may never happen, or it may take multiple visits. What is most important is to develop a long-term plan of care for your child, one with a series of interventions to try and testing to help guide the plan.

Before you leave, make sure you have a clear understanding of what the plan is. It may be helpful to write it down. Information such as what medications should be given, including how and when, what testing should be done, and when you should return for the next visit is vital.

Finally, there are times when a doctor is simply not a good fit for a given family or child. Try not to get too upset if this happens. Move on to someone else who has more experience with your child's issues or a different style of doctoring.

After the Visit

Some parents find it helpful to write out a summary after each doctor's visit and file this with their child's medical information. If you see as many doctors as we do, this can become impractical. Instead, I take the relevant information gained (test results, new medications, etc.) and add it to my child's medical summary and Care Book, a summary guide to her care that I have prepared. I also jot notes in a computer file to remind myself of anything left outstanding that still needs to be scheduled or discussed. Whatever your method, try to update things while everything is still fresh in your mind.

If you forget instructions or come home only to realize you are completely confused, don't be afraid to call the doctor or his/her nurse for clarification. This is especially true if you are uncertain about how a medication should be used or a piece of equipment implemented.

Hopefully, these tips will help you to make the most out of a doctor visit and provide your child with the best care possible. Good luck!