A Guide for Older People

TALKING WITH YOUR DOCTOR

NATIONAL INSTITUTE ON AGING
NATIONAL INSTITUTES OF HEALTH
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How well you and your doctor talk to each other is one of the most important parts of getting good health care. But, talking to your doctor isn’t always easy. It takes time and effort on your part as well as your doctor’s.

In the past, the doctor typically took the lead and the patient followed. Today, a good patient-doctor relationship is more of a partnership. You and your doctor can work as a team, along with nurses, physician assistants, pharmacists, and other health care providers, to solve your medical problems and keep you healthy.

This means asking questions if the doctor’s explanations or instructions are unclear, bringing up problems even if the doctor doesn’t ask, and letting the doctor know if you have concerns about a particular treatment or change in your daily life. Taking an active role in your health care puts the responsibility for good communication on both you and your doctor.

All of this is true at any age. But when you’re older, it becomes even more important to talk often and comfortably with your doctor. That’s partly because you may have more health conditions and treatments to discuss. It’s also because your health has a big impact on other parts of your life, and that needs to be talked about too.
Finding a main doctor (often called your primary doctor or primary care doctor) that you feel comfortable talking to is the first step in good communication. It is also a way to ensure your good health. This doctor gets to know you and what your health is normally like. He or she can help you make medical decisions that suit your values and daily habits and can keep in touch with the other medical specialists and health care providers you may need.

If you don’t have a primary doctor or are not at ease with the one you currently see, now may be the time to find a new doctor. Whether you just moved to a new city, changed insurance providers, or had a bad experience with your doctor or medical staff, it is worthwhile to spend time finding a doctor you can trust.

People sometimes hesitate to change doctors because they worry about hurting their doctor’s feelings. But doctors understand that different people have different needs. They know it is important for everyone to have a doctor with whom they are comfortable.

Primary care doctors frequently are family practitioners, internists, or geriatricians. A geriatrician is a doctor who specializes in older people, but family practitioners and internists may also have a lot of experience with older patients.
The following suggestions can help you find a doctor who meets your needs:

**Decide what you are looking for in a doctor** — A good first step is to make a list of qualities that matter to you. Do you care if your doctor is a man or a woman? Is it important that your doctor has evening office hours, is associated with a specific hospital or medical center, or speaks your language? Do you prefer a doctor who has an individual practice or one who is part of a group so you can see one of your doctor’s partners if your doctor is not available?

After you have made your list, go back over it and decide which qualities are most important and which are nice, but not essential.

**Identify several possible doctors** — Once you have a general sense of what you are looking for, ask friends and relatives, medical specialists, and other health professionals for the names of doctors with whom they have had good experiences. Rather than just getting a name, ask about the person’s experiences. For example: say, “What do you like about Dr. Smith?” and “Does this doctor take time to answer questions?” A doctor whose name comes up often may be a strong possibility.

If you belong to a managed care plan—a health maintenance organization (HMO) or preferred provider organization (PPO)—you may be required to choose a doctor in the plan or else you may have to pay extra to see a doctor outside the network. Most managed care plans will provide information on their doctors’ backgrounds and credentials. Some plans have websites with lists of participating doctors from which you can choose.

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**What are HMOs and PPOs?**

Members of a health maintenance organization (HMO) pay a set monthly fee no matter how many (or few) times they see a doctor. Usually there are no deductibles or claims forms but you will have a co-payment for doctor visits and prescriptions. Each member chooses a primary care doctor from within the HMO network. The primary care doctor coordinates all care and, if necessary, refers members to specialists.

A preferred provider organization (PPO) is a network of doctors and other health care providers. The doctors in this network agree to provide medical services to PPO health plan members at discounted costs. Members can choose to see any doctor at any time. Choosing a non-PPO provider is called ‘going out of network’ and will cost more than seeing a member of the PPO network.
It may be helpful to develop a list of a few names you can choose from. As you find out more about the doctors on this list, you may rule out some of them. In some cases, a doctor may not be taking new patients and you may have to make another choice.

Consult reference sources — The Directory of Physicians in the United States and the Official American Board of Medical Specialties Directory of Board Certified Medical Specialists are available at many libraries. These books don’t recommend individual doctors but they do provide a list of doctors you may want to consider. MedlinePlus, a website from the National Library of Medicine, has a comprehensive list of directories (www.nlm.nih.gov/medlineplus/directories.html) which may also be helpful.

There are plenty of other Internet resources too—for example, you can find doctors through the American Medical Association’s website at www.ama-assn.org (click on “Doctor Finder”). For a list of doctors who participate in Medicare, visit www.medicare.gov (click on “Search Tools” then “Find a Doctor”). WebMD also provides a list of doctors at www.webmd.com (click on “Doctors”).

Don’t forget to call your local or State medical society to check if complaints have been filed against any of the doctors you are considering.

Learn more about the doctors you are considering — Once you have narrowed your list to two or three doctors, call their offices. The office staff is a good source of information about the doctor’s education and qualifications, office policies, and payment procedures. Pay attention to the office staff—you will have to deal with them often!

You may want to set up an appointment to meet and talk with a doctor you are considering. He or she is likely to charge you for such a visit. After the appointment, ask yourself whether this doctor is a person with whom you could work well. If you are not satisfied, schedule a visit with one of your other candidates.
When learning about a doctor, consider asking questions like:

- Do you have many older patients?
- How do you feel about involving my family in care decisions?
- Can I call or email you or your staff when I have questions? Do you charge for telephone or email time?
- What are your thoughts about complementary or alternative treatments?

When making a decision about which doctor to choose, you might want to ask yourself questions like:

- Did the doctor give me a chance to ask questions?
- Was the doctor really listening to me?
- Could I understand what the doctor was saying? Was I comfortable asking him or her to say it again?

**Make a choice** — Once you’ve chosen a doctor, make your first actual health care appointment. This visit may include a medical history and a physical exam. Be sure to bring your medical records, or have them sent from your former doctor. Bring a list of your current medicines or put the medicines in a bag and take them with you. If you haven’t already met the doctor, ask for extra time during this visit to ask any questions you have about the doctor or the practice.

**Summary: Choosing a Doctor You Can Talk To**

- Decide what you are looking for in a doctor.
- Identify several possible doctors.
- Consult reference sources, including the Internet.
- Talk to office staff to learn more about the doctors you are considering.
- Make a choice.
What Do You Need to Know About a Doctor?

Basics

- Is the doctor taking new patients?
- Is the doctor covered by my insurance plan?
- Does the doctor accept Medicare?

Qualifications and Characteristics

- Is the doctor board certified? In what field?
- Is the age, sex, race, or religion of the doctor important?
- Will language be an obstacle to communication? Is there someone in the office who speaks my language?
- Do I prefer a group practice or an individual doctor?
- Does it matter which hospital the doctor admits patients to?

Logistics

- Is the location of the doctor's office important? How far am I willing to travel to see the doctor?
- Is there parking? What does it cost? Is the office on a bus or subway line?
- Does the building have an elevator? What about ramps for a wheelchair or walker?

Office Policies

- What days/hours does the doctor see patients?
- Are there times set aside for the doctor to take phone calls? Does the doctor accept emailed questions? Is there a charge for this service?
- Does the doctor ever make house calls?
- How far in advance do I have to make appointments?
- What’s the process for urgent care? How do I reach the doctor in an emergency?
- Who takes care of patients after hours or when the doctor is away?
A basic plan can help you make the most of your appointment whether you are starting with a new doctor or continuing with the doctor you’ve seen for years. The following tips will make it easier for you and your doctor to cover everything you need to talk about.

**Make a list of your concerns and prioritize them —**
Make a list of what you want to discuss. For example, do you have a new symptom you want to ask the doctor about? Do you want to get a flu shot? Are you concerned about how a treatment is affecting your daily life? If you have more than a few items to discuss, put them in order and ask about the most important ones first. Don’t put off the things that are really on your mind until the end of your appointment—bring them up right away!

**Take information with you —** Some doctors suggest you put all your prescription drugs, over-the-counter medicines, vitamins, and herbal remedies or supplements in a bag and bring them with you. Others recommend you bring a list of everything you take. You should also take your insurance cards, names, and phone numbers of other doctors you see, and your medical records if the doctor doesn’t already have them.

**Make sure you can see and hear as well as possible —** Many older people use glasses or need aids for hearing. Remember to take your eyeglasses to the doctor’s visit. If you have a hearing aid, make sure that it is working well and wear it. Let the doctor and staff know if you have a hard time seeing or hearing. For example, you may want to say: “My hearing makes it hard to understand everything you’re saying. It helps a lot when you speak slowly.”
Resources in Spanish

If you are looking for written information in Spanish there are an increasing number of resources that can help. For example, the National Institute on Aging (NIA) has translated many of its AgePages to Spanish. AgePages (called Vivir Mejor la Tercera Edad in Spanish) are short, easy-to-read fact sheets on a wide variety of health and aging topics. To get copies of these free publications you can call 1-800-222-2225; or order them online at www.nia.nih.gov/HealthInformation or www.nia.nih.gov/Espanol.

Consider bringing a family member or friend —
Sometimes it is helpful to bring a family member or close friend with you. Let your family member or friend know in advance what you want from your visit. Your companion can remind you what you planned to discuss with the doctor if you forget, she or he can take notes for you, and can help you remember what the doctor said.

Find an interpreter if you know you’ll need one —
If the doctor you selected or were referred to doesn’t speak your language, consider bringing an interpreter with you. Sometimes community groups can help find an interpreter. Or you can call the doctor’s office ahead of time to see if one can be provided for you. Sometimes doctors ask a staff member to help with interpretation. Even though some English-speaking doctors know basic medical terms in Spanish or other languages, you may feel more comfortable speaking in your own language, especially when it comes to sensitive subjects, such as sexuality or depression.

You can also ask a family member who speaks English to go with you. This person should be someone you trust with knowing your symptoms or condition. Finally, let the doctor, your interpreter, or the staff know if you do not understand your diagnosis or the instructions the doctor gives you. Don’t let language barriers stop you from asking questions or voicing your concerns.

Plan to update the doctor —
Let your doctor know what has happened in your life since your last visit. If you have been treated in the emergency room or by a specialist, tell the doctor right away. Mention any changes you have noticed in your appetite, weight, sleep, or energy level. Also tell the doctor about any recent changes in any medications you take or the effects they have had on you. A helpful checklist is included at the back of this booklet (pg. 43).
Summary: Getting Ready for an Appointment

- Be prepared: make a list of concerns.
- Take information with you.
- Make sure you can see and hear as well as possible.
- Consider bringing a family member or friend.
- Find an interpreter if you know you'll need one.
- Plan to update the doctor on what has happened since your last visit.

Finding and Using an Interpreter

- Look for an interpreter through community or neighborhood associations, the doctor’s office staff, and your own network of friends and family.
- If possible, select someone with whom you will feel comfortable if they learn about your symptoms or condition. For example, you may not want to ask your children to interpret a conversation on sexuality.
- Consider telling your interpreter what you want to talk about with your doctor before the appointment.
- If your language is Spanish and your interpreter does not come from the same country or background as you, use universal Spanish terms to describe your symptoms.
- Make sure your interpreter understands your symptoms or condition before he or she conveys your message to the doctor. You don’t want the doctor to prescribe the wrong medication!
- Don’t be afraid to let your interpreter know if you did not understand something that was said, even if you need to ask that it be repeated several times.
Your first meeting is a good time to talk with the doctor and the office staff about some communication basics.

- **First name or last name** — When you see the doctor and office staff, introduce yourself and let them know by what name you like to be called. For example: “Hello, my name is Mrs. Jones.” or “Good morning, my name is Bob Smith. Please call me Bob.”

- **Ask how the office runs** — Learn what days are busiest and what times are best to call. Ask what to do if there is an emergency, or if you need a doctor when the office is closed.

- **Share your medical history** — Tell the doctor about your illnesses, operations, medical conditions, and other doctors you see. You may want to ask the doctor to send you a copy of the medical history form before your visit so you can fill it out at home where you have the time and information you need to complete it. If you have problems understanding how to fill out any of the forms, ask for help. Some community organizations provide this kind of help.

- **Share former doctors’ names** — Give the new doctor all of your former doctors’ names and addresses, especially if they are in a different city. This is to help your new doctor get copies of your medical records. Your doctor will ask you to sign a medical release form giving him or her permission to request your records.
Talking about your health means sharing information about how you feel physically, emotionally, and mentally. Knowing how to describe your symptoms and bring up other concerns will help you become a partner in your health care. A helpful checklist is included at the back of this booklet (pg. 40).

Share any symptoms — A symptom is evidence of a disease or disorder in the body. Examples of symptoms include pain, fever, a lump or bump, unexplained weight loss or gain, or having a hard time sleeping.

Be clear and concise when describing your symptoms. Your description helps the doctor identify the problem. A physical exam and medical tests provide valuable information, but it is your symptoms that point the doctor in the right direction.

Questions to ask yourself about your symptoms:

- What exactly are my symptoms?
- Are the symptoms constant? If not, when do I experience them?
- Does anything I do make the symptoms better? Or worse?
- Do the symptoms affect my daily activities? Which ones? How?

Your doctor will ask when your symptoms started, what time of day they happen, how long they last (seconds? days?), how often they occur, if they seem to be getting worse or better, and if they keep you from going out or doing your usual activities.
Take the time to make some notes about your symptoms before you call or visit the doctor. Worrying about your symptoms is not a sign of weakness. Being honest about what you are experiencing doesn’t mean that you are complaining. The doctor needs to know how you feel.

**Give information about your medications** — It is possible for medicines to interact causing unpleasant and sometimes dangerous side effects. Your doctor needs to know about ALL of the medicines you take, including over-the-counter (nonprescription) drugs and herbal remedies or supplements, so bring everything with you to your visit—don’t forget about eye drops, vitamins, and laxatives. Tell the doctor how often you take each. Describe any drug allergies or reactions you have had. Say which medications work best for you. Be sure your doctor has the phone number of the pharmacy you use.

**Tell the doctor about your habits** — To provide the best care, your doctor must understand you as a person and know what your life is like. The doctor may ask about where you live, what you eat, how you sleep, what you do each day, what activities you enjoy, what your sex life is like, and if you smoke or drink. Be open and honest with your doctor. It will help him or her to understand your medical conditions fully and recommend the best treatment choices for you.

**Voice other concerns** — Your doctor may ask you how your life is going. This isn’t being impolite or nosy. Information about what’s happening in your life may be useful medically. Let the doctor know about any major changes or stresses in your life, such as a divorce or the death of a loved one. You don’t have to go into detail; you may want to say something like: “It might be helpful for you to know that my sister passed away since my last visit with you.” or “I recently had to sell my home and move in with my daughter.”

**Summary: Giving Information**

- Share any symptoms.
- Give information about your medications.
- Tell the doctor about your habits.
- Voice other concerns.
Making Good Use of Your Time

**Be honest** — It is tempting to say what you think the doctor wants to hear: for example, that you smoke less or eat a more balanced diet than you really do. While this is natural, it’s not in your best interest. Your doctor can suggest the best treatment only if you say what is really going on. For instance, you might say: “I have been trying to quit smoking, as you recommended, but I am not making much headway.”

**Decide what questions are most important** — Pick three or four questions or concerns that you most want to talk about with the doctor. You can tell him or her what they are at the beginning of the appointment, and then discuss each in turn. If you have time, you can then go on to other questions.

**Stick to the point** — Although your doctor might like to talk with you at length, each patient is given a limited amount of time. To make the best use of your time, stick to the point. For instance, give the doctor a brief description of the symptom, when it started, how often it happens, and if it is getting worse or better.

**Share your point of view about the visit** — Tell the doctor if you feel rushed, worried, or uncomfortable. If necessary, you can offer to return for a second visit to discuss your concerns. Try to voice your feelings in a positive way. For example, you could say something like: “I know you have many patients to see, but I’m really worried about this. I’d feel much better if we could talk about it a little more.”

**Remember, the doctor may not be able to answer all your questions** — Even the best doctor may be unable to answer some questions. Most doctors will tell you when they don’t have answers. They also may help you find the information you need or refer you to a specialist. If a doctor regularly brushes off your questions or symptoms as simply a part of aging, think about looking for another doctor.
Asking questions is key to good communication with your doctor. If you don’t ask questions, he or she may assume you already know the answer or that you don’t want more information. Don’t wait for the doctor to raise a specific question or subject because he or she may not know it’s important to you. Be proactive. Ask questions when you don’t know the meaning of a word (like aneurysm, hypertension, or infarct) or when instructions aren’t clear (for example, does taking medicine with food mean before, during, or after a meal?).

Learn about medical tests — Sometimes doctors need to do blood tests, x rays, or other procedures to find out what is wrong or to learn more about your medical condition. Some tests, such as Pap smears, mammograms, glaucoma tests, and screenings for prostate and colorectal cancer, are done regularly to check for hidden medical problems.

Before having a medical test, ask your doctor to explain why it is important, what it will show, and what it will cost. Ask what kind of things you need to do to prepare for the test. For example, you may need to have an empty stomach, or you may have to provide a urine sample. Ask how you will be notified of the test results and how long they will take to come in.

Questions to ask about medical tests:

- Why is the test being done?
- What steps does the test involve? How should I get ready?
- Are there any dangers or side effects?
- How will I find out the results? How long will it take to get the results?
- What will we know after the test?
When the results are ready, make sure the doctor tells you what they are and explains what they mean. You may want to ask your doctor for a written copy of the test results. If the test is done by a specialist, ask to have the results sent to your primary doctor.

**Discuss your diagnosis and what you can expect —**
A diagnosis identifies your disease or physical problem. The doctor makes a diagnosis based on the symptoms you are experiencing and the results of the physical exam, laboratory work, and other tests.

If you understand your medical condition, you can help make better decisions about treatment. If you know what to expect, it may be easier for you to deal with the condition.

Ask the doctor to tell you the name of the condition and why he or she thinks you have it. Ask how it may affect you and how long it might last. Some medical problems never go away completely. They can’t be cured, but they can be treated or managed.

**Questions to ask about your diagnosis:**
- What may have caused this condition? Will it be permanent?
- How is this condition treated or managed? What will be the long-term effects on my life?
- How can I learn more about my condition?

**Find out about your medications —** Your doctor may prescribe a drug for your condition. Make sure you know the name of the drug and understand why it has been prescribed for you. Ask the doctor to write down how often and for how long you should take it.

Make notes about any other special instructions. There may be foods or drinks you should avoid while you are taking the medicine. Or you may have to take the medicine with food or a whole glass of water. If you are taking other medications, make sure your doctor knows, so he or she can prevent harmful drug interactions.

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**Can I Find Information About Medical Tests Online?**

Yes—there is a lot of information on the Internet about medical tests. The National Library of Medicine’s MedlinePlus website provides links to many trustworthy resources. Visit [www.medlineplus.gov](http://www.medlineplus.gov) and enter “laboratory tests” in the search window at the top of the page. Then, select the link that applies to your situation. You can get information on preparing for lab tests, explanations of different tests, and tips on interpreting lab test results.
Sometimes medicines affect older people differently than younger people. Let the doctor know if your medicine doesn’t seem to be working or if it is causing problems. It is best not to stop taking the medicine on your own. If you want to stop taking your medicine, check with your doctor first.

If another doctor (for example, a specialist) prescribes a medication for you, call your primary doctor’s office and leave a message letting him or her know. Also call to check with your doctor’s office before taking any over-the-counter medications. You may find it helpful to keep a chart of all the medicines you take and when you take them. A sample chart is included at the back of this booklet (pg. 43).

The pharmacist is also a good source of information about your medicines. In addition to answering questions and helping you select over-the-counter medications, the pharmacist keeps records of all the prescriptions you get filled at that pharmacy. Because your pharmacist keeps these records, it is helpful to use the same store regularly. At your request, the pharmacist can fill your prescriptions in easy-to-open containers and may be able to provide large-print prescription labels.

Questions to ask about medications:

- What are the common side effects? What should I pay attention to?
- When will the medicine begin to work?
- What should I do if I miss a dose?
- Should I take it at meals or between meals? Do I need to drink a whole glass of water with it?
- Are there foods, drugs, or activities I should avoid while taking this medicine?
- Will I need a refill? How do I arrange that?

What Are Side Effects?

“My headache prescription always makes me sleepy.”
“Aunt Sarah’s cough syrup caused a rash.”

Unwanted or unexpected symptoms or feelings that happen when you take a medicine are called side effects.

Some side effects happen just when you start taking a medicine. Some happen only once in a while and you learn how to manage them. But other side effects may make you want to stop taking the medicine. Tell your doctor if this happens. He or she may be able to prescribe a different medicine or help you deal with these side effects in other ways.
Understand your prescriptions — When the doctor writes you a prescription, it is important that you are able to read and understand the directions for taking the medication. Doctors and pharmacists often use abbreviations or terms that may not be familiar. Here is an explanation of some of the most common abbreviations you will see on the labels of your prescription medications:

- **p.r.n.** as needed
- **q.d.** every day
- **b.i.d.** twice a day
- **t.i.d.** three times a day
- **q.i.d.** four times a day
- **a.c.** before meals
- **p.c.** after meals
- **h.s.** at bedtime
- **p.o.** by mouth
- **ea.** each

If you have questions about your prescription or how you should take the medicine, ask your doctor or pharmacist. If you do not understand the directions, make sure you ask someone to explain them. It is important to take the medicine as directed by your doctor.

Keeping a record of the medications you take and the instructions for taking them can help you get the most benefit from them. A worksheet like the one at the back of this booklet can help (pg. 43).

**Summary: Getting Information**

- Learn about medical tests.
- Discuss your diagnosis and what you can expect.
- Find out about your medications.
- Understand how to take your prescriptions.
No matter what your age, it’s easy to forget a lot of what your doctor says. Even if you are comfortable talking with your doctor, you may not always understand what he or she says. So, as your doctor gives you information, it’s a good idea to check that you are following along. Ask about anything that does not seem clear. For instance, you might say: “I want to make sure I understand. Could you explain that a little more?” or “I did not understand that word. What does it mean?”

Another way to check is to repeat what you think the doctor means in your own words and ask, “Is this correct?” Here are some other ideas to help make sure you have all the information you need.

Take notes — Take along a notepad and pencil and write down the main points, or ask the doctor to write them down for you. If you can’t write while the doctor is talking to you, make notes in the waiting room after the visit. Or, bring a tape recorder along, and (with the doctor’s permission) record what is said. Recording is especially helpful if you want to share the details of the visit with others.

Get written or recorded materials — Ask if your doctor has any brochures, DVDs, CDs, cassettes, or videotapes about your health conditions or treatments. For example, if your doctor says that your blood pressure is high, he or she may give you brochures explaining what causes high blood pressure and what you can do about it. Ask the doctor to recommend other sources, such as websites, public libraries, nonprofit organizations, and government agencies that may have written or recorded information you can use.

Talk to other members of the health care team — Sometimes the doctor may want you to talk with other health professionals who can help you understand and carry out the decisions about how to manage your condition. Nurses, physician assistants, pharmacists, and occupational or physical therapists may be able to take more time with you than the doctor.

Call or email the doctor — If you are uncertain about the doctor’s instructions after you get home, call the office. A nurse or other staff member can check with the doctor and call you back. You could ask whether the doctor, or other health professional you have talked to, has an email address you can use to send questions.
Giving and getting information are two important steps in talking with your doctor. The third big step is making decisions about your care.

Ask about different treatments — You will benefit most from a treatment when you know what is happening and are involved in making decisions. Make sure you understand what your treatment involves and what it will or will not do. Have the doctor give you directions in writing and feel free to ask questions. For example: “What are the pros and cons of having surgery at this stage?” or “Do I have any other choices?”

If your doctor suggests a treatment that makes you uncomfortable, ask if there are other treatments that might work. If cost is a concern, ask the doctor if less expensive choices are available. The doctor can work with you to develop a treatment plan that meets your needs.

Here are some things to remember when deciding on a treatment:

- **Discuss choices.** There are different ways to manage many health conditions, especially chronic conditions like high blood pressure and cholesterol. Ask what your options are.

- **Discuss risks and benefits.** Once you know your options, ask about the pros and cons of each one. Find out what side effects might occur, how long the treatment would continue, and how likely it is that the treatment will work for you.
Talking About Exercise

Exercise is often “just what the doctor ordered!” Exercise can:

• Help you have more energy to do the things you want to do.
• Help maintain and improve your physical strength and fitness.
• Help improve mood and relieve depression.
• Help manage and prevent diseases like heart disease, diabetes, some types of cancer, osteoporosis, and disabilities as people grow older.
• Help improve your balance.

Many doctors now recommend that older people try to make physical activity a part of everyday life. When you are making your list of things to talk about with your doctor, add exercise. Ask how exercise would benefit you, if there are any activities you should avoid, and whether your doctor can recommend any specific kinds of exercise.

• Consider your own values and circumstances. When thinking about the pros and cons of a treatment, don’t forget to consider its impact on your overall life. For instance, will one of the side effects interfere with a regular activity that means a lot to you? Is one treatment choice expensive and not covered by your insurance? Doctors need to know about these practical matters and can work with you to develop a treatment plan that meets your needs.

Ask about prevention — Doctors and other health professionals may suggest you change your diet, activity level, or other aspects of your life to help you deal with medical conditions. Research has shown that these changes, particularly an increase in exercise, have positive effects on overall health.

Until recently, preventing disease in older people received little attention. But things are changing. We now know that it’s never too late to stop smoking, improve your diet, or start exercising. Getting regular checkups and seeing other health professionals such as dentists and eye specialists helps promote good health. Even people who have chronic diseases, like arthritis or diabetes, can prevent further disability and, in some cases, control the progress of the disease.

If a certain disease or health condition runs in your family, ask your doctor if there are steps you can take to help prevent it. If you have a chronic condition, ask how you can manage it and if there are things you can do to prevent it from getting worse. If you want to discuss health and disease prevention with your doctor, say so when you make your next appointment. This lets the doctor plan to spend more time with you.
It is just as important to talk with your doctor about lifestyle changes as it is to talk about treatment. For example: “I know that you’ve told me to eat more dairy products, but they really disagree with me. Is there something else I could eat instead?” or “Maybe an exercise class would help, but I have no way to get to the senior center. Is there something else you could suggest?”

Just as with treatments, consider all the alternatives, look at pros and cons, and remember to take into account your own point of view. Tell your doctor if you feel his or her suggestions won’t work for you and explain why. Keep talking with your doctor to come up with a plan that works.

**Summary: Making Decisions With Your Doctor**

Ask about different treatments:
- Are there any risks associated with the treatment?
- How soon should treatment start? How long will it last?
- Are there other treatments available?
- How much will the treatment cost? Will my insurance cover it?

Ask about prevention:
- Is there any way to prevent a condition that runs in my family—before it affects me?
- Are there ways to keep my condition from getting worse?
- How will making a change in my habits help me?
- Are there any risks in making this change?
- Are there support groups or community services that might help me?
Many people search the Internet to find information about medical problems and health issues. However, not all health information on the web is of equal quality. How do you find websites that are accurate and reliable? The following questions may be useful to consider when you look at a health-related website.

- **Who is responsible for the content?** Is it a government agency, national nonprofit organization, or professional association? An individual? A commercial organization?
- **If you are reading a particular article, what are the author’s credentials?** Is the author affiliated with any major medical institutions?
- **Who reviews the material?** Is there a medical advisory board that reads the medical content before it is made available to the public?
- **Are sources cited for the statistical information?** For example, it’s easy enough to say “4 out of 5 doctors agree...” but where did that statistic come from?
- **Is the purpose and goal of the sponsoring organization clearly stated?**
- **Is there a way to contact the sponsor for more information or to verify information presented?**
- **Is the site supported by public funds or donations?** If it includes advertisements, are they separate from content?
- **Because health information gets outdated so quickly, does the website post the source and date for the information?**
- **If you have to register, is it clear how your personal information will be used?** Does the site have a clear privacy policy?
- **Is the website trying to sell you something?**

Don't forget to talk with your doctor about what you’ve learned online.
ASKING MORE QUESTIONS:

Talking to Doctors in Special Situations

Your doctor may send you to a specialist for further evaluation, or you may request to see a specialist yourself. It’s likely that your insurance plan will require you to have a referral from your primary doctor.

A visit to the specialist may be short. Often, the specialist already has seen your medical records or test results and is familiar with your case. If you are unclear about what the specialist tells you, ask questions.

For example, if the specialist says that you have a medical condition that you aren’t familiar with, you may want to say something like: “I don’t know very much about that condition. Could you explain what it is and how it might affect me?” or “I’ve heard that is a painful problem. What can be done to prevent or manage the pain?”

You also may ask for written materials to read, or you can call your primary doctor to clarify anything you haven’t understood.

Ask the specialist to send information about any further diagnosis or treatment to your primary doctor. This allows your primary doctor to keep track of your medical care. You also should let your primary doctor know at your next visit how well any treatments or medications the specialist recommended are working.

Questions to ask your specialist:

• What is your diagnosis?
• What treatment do you recommend? How soon do I need to begin the new treatment?
• Will you discuss my care with my primary doctor?
If you need to have surgery — In some cases, surgery may be the best treatment for your condition. If so, your doctor will refer you to a surgeon. Knowing more about the operation will help you make an informed decision about how to proceed. It also will help you get ready for the surgery, which makes for a better recovery.

Ask the surgeon to explain what will be done during the operation and what reading material, videotapes, or websites you can look at before the operation.

Find out if you will have to stay overnight in the hospital or if the surgery can be done on an outpatient basis. Will you need someone to drive you home? Minor surgeries that don't require an overnight stay can sometimes be done at medical centers called ambulatory surgical centers.

Questions to ask your surgeon:

• What is the success rate of the operation? How many of these operations have you done successfully?

• What problems occur with this surgery? What kind of pain or discomfort can I expect?

• What kind of anesthesia will I have? Are there any risks associated with it for older people?

• Will I have to stay in the hospital overnight? How long is recovery expected to take? What does it involve? When can I get back to my normal routine?
If you are hospitalized — If you have to go to the hospital, some extra guidelines may help you. First, most hospitals have a daily schedule. Knowing the hospital routine can make your stay more comfortable. Find out how much choice you have about your daily routine and express any preferences you have about your schedule. Doctors generally visit patients during specific times each day. Find out when the doctor is likely to visit so you can have your questions ready.

In the hospital, your primary doctor and various medical specialists, as well as nurses and other health professionals, may examine you. If you are in a teaching hospital, doctors-in-training known as medical students, interns, residents, or fellows, also may examine you. Many of these doctors-in-training already have a lot of knowledge and experience. They may be able to take more time to talk with you than other staff. Nurses also can be an important source of information, especially since you will see them often.

Questions to ask medical staff in the hospital:
• How long can I expect to be in the hospital?
• When will I see my doctor? What doctors and health professionals will I see?
• What is the daily routine in this part of the hospital?

If you go to the emergency room — A visit to the emergency room can be stressful. It may go more smoothly if you can take along the following items:

• Your health insurance card or policy number.
• A list of your medications.
• A list of your medical problems.
• The names and phone numbers of your doctor and one or two family members or close friends.

Some people find it helpful to keep this information on a card in their wallet or purse at all times.

Seeking a Second Opinion

When surgery is recommended, patients often seek a second opinion. Hearing the views of two different doctors can help you decide what’s best for you. In fact, your insurance plan may require it. Doctors are used to this practice, and most will not be insulted by your request for a second opinion. Your doctor may even be able to suggest other doctors who can review your case.

Always remember to check with your insurance provider in advance to find out whether a second opinion is covered under your policy, if there are restrictions to which doctors you can see, and if you need a referral form from your primary doctor.
Depending on the problem, you may have a long wait in the emergency room. Consider taking things to make the wait more comfortable, such as something to read or a sweater in case the room is cold.

While in the emergency room, ask questions if you don’t understand tests or procedures that are being done. Before leaving, make sure you understand what the doctor told you or ask for written instructions. For example, if you have bandages that need changing, be sure you understand how and when it should be done. Tell your primary doctor as soon as possible about your visit to the emergency room.

Questions to ask medical staff in the emergency room:

- Will you talk to my primary doctor about my care?
- Do I need to arrange any further care?
- May I get instructions for further care in writing?
- Is there someone here who speaks my language and can explain the instructions?

Summary: Talking to Doctors in Special Situations

- Ask questions if you are unclear.
- Try to write down as much information as possible.
- Tell your primary care doctor if you see a specialist, need surgery, or have gone to the emergency room.
It helps the doctor—and you—if he or she knows about the non-medical parts of your life. Where you live, how you get around, what activities are important to you: these are all things that can make a difference in decisions about your health care. The following are some examples of practical matters you might want to discuss with your doctor. For more information and resources on these topics, see the section on additional resources included at the end of this booklet.

Planning for care in the event of a serious illness — You may have some concerns or wishes about your care if you become seriously ill. If you have questions about what choices you have, ask your doctor. You can specify your desires through documents called advance directives, such as a living will or health care proxy (pg. 29). One way to bring up the subject is to say: “I’m worried about what would happen in the hospital if I were very sick and not likely to get better. Can you tell me what generally happens in that case?”

In general, the best time to talk with your doctor about these issues is when you are still relatively healthy. If you are admitted to the hospital or a nursing home, a nurse or other staff member may ask if you have any advance directives.

Driving — Driving is an important part of everyday life for many people and making the decision to stop driving can be very difficult. Tell your doctor if you or people close to you are concerned about your driving and why. He or she can go over your medical conditions and medications to see if there are treatable problems that may be contributing to driving difficulties. Vision and memory tests are important. The doctor also may be able to suggest a driver’s education refresher class designed for older drivers.
Moving to assisted living — Another hard decision that many older people face is whether or not to move to a place where they can have more help—often an assisted living facility. If you are considering such a move, your doctor can help you weigh the pros and cons based on your health and other circumstances. He or she may be able to refer you to a social worker or a local agency that can help in finding an assisted living facility.

Paying for medications — Don’t hesitate to ask the doctor about the cost of your medications. If they are too expensive for you, the doctor may be able to suggest less expensive alternatives. If the doctor does not know the cost, ask the pharmacist before filling the prescription. Then call your doctor and ask if there is a generic or other less expensive choice. You could say, for instance: “It turns out that this medicine is too expensive for me. Is there another one or a generic drug that would cost less?”

Your doctor may also be able to refer you to a medical assistance program that can help with drug costs.

**Summary:** Practical Matters

- Don’t hesitate to bring up concerns, even if they don’t seem directly related to a medical condition.
- You and your doctor can make better decisions together if the doctor knows about your troubling non-medical concerns.
- If the doctor can’t help solve your non-medical problems, he or she may be able to refer you to other resources that can help.
Advance directives are written instructions letting others know the type of care you want if you are seriously ill or dying. There are two main kinds:

**Living wills** — A living will records your end-of-life wishes for medical treatment in case you are no longer able to speak for yourself. Living wills typically refer only to life-prolonging treatment when you are close to death.

**Health care proxies** — A health care proxy is named through a “durable power of attorney for health care.” Sometimes this person may be referred to as a representative, surrogate, agent, or attorney-in-fact. A health care proxy is helpful if you do not want to be specific about your end-of-life treatment—you would rather let the health care proxy evaluate each situation or treatment option independently. This type of advance directive is also important if you want your health care proxy to be someone who is not a legal member of your family.

Make sure your doctor and family understand your advance directives and your views about end-of-life care. That will help them make the decisions you would want. Sometimes people change their mind as they get older or after they become ill. Review the choices in your advance care directives from time to time and make changes as needed.

Advance care directives are legally valid everywhere in the United States, but laws concerning them vary from state to state. Forms approved for the state you live in are available from many different health care organizations and institutions. Make sure that the form you choose is legal in your home state and any other state that you may live in for part of the year.
Much of the communication between doctor and patient is personal. To have a good partnership with your doctor, it is important to talk about sensitive subjects, like sex or memory problems, even if you are embarrassed or uncomfortable. Most doctors are used to talking about personal matters and will try to ease your discomfort. Keep in mind that these topics concern many older people. For more information, see the section on additional resources at the end of this booklet (pg. 35). You might find that using booklets from these organizations can help you bring up sensitive subjects when talking with your doctor.

It is important to understand that problems with memory, depression, sexual function, and incontinence are not necessarily normal parts of aging. A good doctor will take your concerns about these topics seriously and not brush them off as being “normal.” If you think your doctor isn’t taking your concerns seriously, talk to him or her about your feelings or consider looking for a new doctor.

**Alcohol** — Anyone at any age can have a drinking problem. Alcohol can have a greater effect as a person grows older because the aging process affects how the body handles alcohol. Someone whose drinking habits haven’t changed may find over time that he or she has a problem. People can also develop a drinking problem later in life due to major life changes like the death of loved ones. In fact, depression in older adults often goes along with alcohol misuse. Talk to your doctor if you think you may be developing a drinking problem. You could say: “Lately I’ve been wanting to have a drink earlier and earlier in the afternoon and I find it’s getting harder to stop after just one or two. What kind of treatments could help with this?”

**Falling and fear of falling** — A fall can be a serious event, often leading to injury and loss of independence, at least for a while. For this reason, many older people develop a fear of falling.
Studies show that fear of falling can keep people from going about their normal activities, and as a result they may become frailer, which actually increases their risk of falling again. If fear of falling is affecting your day-to-day life, let your doctor know. He or she may be able to recommend some things to do to reduce your chances of falling. Exercises can help you improve your balance and strengthen your muscles, at any age.

**Feeling unhappy with your doctor** — Misunderstandings can come up in any relationship, including between a patient and doctor or the doctor’s staff. If you feel uncomfortable with something your doctor or his or her staff has said or done, be direct. For example, if the doctor does not return your telephone calls, you may want to say something like this: “I realize that you care for a lot of patients and are very busy, but I feel frustrated when I have to wait for days for you to return my call. Is there a way we can work together to improve this?”

Being honest is much better for your health than avoiding the doctor. If you have a long-standing relationship with your doctor, working out the problem may be more useful than looking for a new doctor.

**Grief, mourning, and depression** — As people grow older, they may lose significant people in their lives, including spouses and cherished friends. Or they may have to move away from home or give up favorite activities. A doctor who knows about your losses is better able to understand how you are feeling. He or she can make suggestions that may be helpful to you.

Although it is normal to mourn when you have a loss, later life does not have to be a time of ongoing sadness. If you feel sad all the time or for more than a few weeks, let your doctor know. Also tell your doctor about symptoms such as lack of energy, poor appetite,
Talking with Your Doctor: Common Concerns

Trouble sleeping, or little interest in life. These could be signs of depression, which is a medical condition.

Depression may be common, especially when people experience losses, but it is also treatable. It should not be considered “normal” at any age. Let your doctor know about your feelings and ask about treatment.

HIV/AIDS — The death of a spouse, divorce, or separation can lead some older people to find themselves dating again and possibly having sex with a new partner. It’s a good idea to talk to your doctor about how safe sex can reduce your risk of sexually transmitted diseases such as HIV/AIDS. It’s important to practice safe sex, no matter what your age.

Incontinence — Older people sometimes have problems controlling their bladder. This is called urinary incontinence and it can often be treated. Depending on the type of incontinence you have, the doctor may recommend exercises, suggest helpful ways to change your habits, prescribe useful medications, or advise surgery. If you have trouble controlling your bladder or bowels, it is important to let the doctor know. To bring up the topic, you could say something like: “Since my last visit there have been several times that I couldn’t control my bladder.”

Memory problems — Many older people worry about their ability to think and remember. For most older adults, thinking and memory remain relatively intact in later years. However, if you or your family notice that you are having problems remembering recent events or thinking clearly, let your doctor know. Be specific about the changes you’ve noticed; for example, you could say: “I’ve always been able to balance my checkbook without any problems, but lately I’m very confused.” Your doctor will probably want you to have a thorough checkup to see what might be causing your symptoms. In many cases, memory problems are caused by conditions such as depression or infection, or they may be a side effect of medication. Sometimes the problem is a type of dementia, such as Alzheimer’s disease. With a careful
history, physical exam, medical tests, and tests of memory and problem solving, specialists can diagnose Alzheimer’s with a high degree of accuracy. Determining the cause of memory problems is important to help the doctor, patient, and family choose the best plan of care. Although there is no cure for Alzheimer’s, medicines can help for a while, especially in the early stages of the disease. Medications also can ease serious behavioral symptoms such as agitation, anxiety, and depression. Support groups and education are important and can help patients and caregivers.

**Problems with family** — Even strong and loving families can have problems, especially under the stress of illness. Although family problems can be painful to discuss, talking about them can help your doctor help you. Your doctor may be able to suggest steps to improve the situation for you and other family members.

If you feel that a family member or caregiver is taking advantage of you or mistreating you, let your doctor know. Some older people are subjected to abuse by family members or others. Abuse can be physical, verbal, psychological, or even financial in nature. Your doctor may be able to provide resources or referrals to other services that can help if you are being mistreated.

**Sexuality** — Most health professionals now understand that sexuality remains important in later life. If you are not satisfied with your sex life, don’t just assume it’s due to your age. In addition to talking about age-related changes, you can ask your doctor about the effects of an illness or a disability on sexual function. Also, ask your doctor about the influence medications or surgery may have on your sex life. If you aren’t sure how to bring the topic up, try saying: “I have a personal question I would like to ask you...” or “I understand that this condition or medication can affect my body in many ways. Will it affect my sex life at all?”

**Summary: Discussing Sensitive Subjects**

- Don’t hesitate to discuss sensitive subjects with your doctor.
- Use brochures or booklets as props to introduce topics you may feel awkward discussing.
- If you feel the doctor doesn’t take your concerns seriously, it might be time to think about changing doctors.
WHO ELSE WILL HELP?

Involving Your Family and Friends

It can be helpful to take a family member or friend with you when you go to the doctor’s office. You may feel more confident if someone else is with you. Also, a relative or friend can help remind you about things you planned to tell or ask the doctor. He or she also can help you remember what the doctor says.

Don’t let your companion take too strong a role. The visit is between you and the doctor. You may want some time alone with the doctor to discuss personal matters. If you are alone with the doctor during or right after the physical exam, this might be a good time to raise private concerns. Or, you could ask your family member or friend to stay in the waiting room for part of the appointment. For best results, let your companion know in advance how he or she can be most helpful.

If a relative or friend helps with your care at home, bringing that person along when you visit the doctor may be useful. In addition to the questions you have, your caregiver may have concerns he or she wants to discuss with the doctor. Some things caregivers may find especially helpful to discuss are: what to expect in the future, sources of information and support, community services, and ways they can maintain their own well-being.

Even if a family member or friend can’t go with you to your appointment, he or she can still help. For example, the person can serve as your sounding board, helping you practice what you want to say to the doctor before the visit. And after the visit, talking about what the doctor said can remind you of the important points and help you come up with questions to ask next time.
You can make the most of your time with your doctor by being informed. This often includes drawing on other sources of health information such as the Internet, home medical guides, books and articles available at libraries, national organizations or associations, other institutes within the National Institutes of Health, and self-help groups.

NIA has free information in English and Spanish. Call the NIA Information Center at 1-800-222-2225 or TTY at 1-800-222-4225 to order publications or request a publications catalog. Publications can be ordered online by visiting www.nia.nih.gov/HealthInformation; you can also sign up for email alerts about new NIA publications at this website. Spanish-language publications are also available at www.nia.nih.gov/Espanol. Publications from NIA are available in bulk—for example, you may want to encourage your doctor to order copies of this publication for his or her office.

For free fact sheets and other publications about Alzheimer’s disease, contact the NIA’s Alzheimer’s Disease Education and Referral (ADEAR) Center at 1-800-438-4380. The ADEAR Center website is www.nia.nih.gov/Alzheimers.

Good health care depends on good communication with your doctor and other health care professionals. Let the ideas in this booklet help you take a more active role in your health care. The organizations on the next pages are a sampling of other resources that may also be useful.
General Resources

NIA Information Center
P.O. Box 8057
Gaithersburg, MD 20898-8057
1-800-222-2225
1-800-222-4225 (TTY)
www.nia.nih.gov/HealthInformation
www.nihseniorhealth.gov
www.nia.nih.gov/Espanol

National Institutes of Health
9000 Rockville Pike
Bethesda, MD 20892
1-301-496-4000
1-301-402-9612 (TTY)
www.nih.gov

MedlinePlus
c/o National Library of Medicine
8600 Rockville Pike
Bethesda, MD 20894
1-888-FIND-NLM (1-888-346-3656)
1-800-735-2258 (TDD)
www.medlineplus.gov

Medicare
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850
1-800-MEDICARE (1-800-633-4227)
1-877-486-2048 (TTY)
www.medicare.gov

AARP (formerly the American Association of Retired Persons)
601 E Street, NW
Washington, DC 20049
1-888-OUR-AARP (1-888-687-2277)
1-877-434-7598 (TTY)
www.aarp.org

Advance Directives

Patient Education Forum: Advance Directives
The American Geriatrics Society
The Empire State Building
350 Fifth Avenue, Suite 801
New York, NY 10118
1-800-563-4916
www.healthinaging.org/public_education/pef/advance_directives.php

Alcohol

National Institute on Alcohol Abuse and Alcoholism
5635 Fishers Lane, MSC 9304
Bethesda, MD 20892-9304
1-301-443-3860
www.niaaa.nih.gov

Substance Abuse and Mental Health Services Administration
P.O. Box 2345
Rockville, MD 20847-2345
1-877-SAMHSA-7 (1-877-726-4727)
1-800-487-4889 (TTY)
www.samhsa.gov

Assisted Living

Assisted Living Federation of America
1650 King Street, Suite 602
Alexandria, VA 22314-2747
1-703-894-1805
www.alfa.org
National Center for Assisted Living
1201 L Street, NW
Washington, DC 20005
1-202-842-4444
www.ncal.org

Housing Choices
AARP
601 E Street, NW
Washington, DC 20049
1-888-OUR-AARP (1-888-687-2277)
1-877-434-7598 (TTY)
www.aarp.org/home-garden/housing/

Care in the Event of a Terminal Illness

National Hospice and Palliative Care Organization
1731 King Street, Suite 100
Alexandria, VA 22314
1-800-658-8898
1-877-658-8896 (multilingual)
www.nhpco.org

Driving

SeniorDrivers.org
AAA Foundation for Traffic Safety
Administrative Office
607 14th Street, NW, Suite 201
Washington, DC 20005-2000
1-202-638-5944
www.seniordrivers.org

AARP Driver Safety Program
601 E Street, NW
Washington, DC 20049
1-888-OUR-AARP (1-888-687-2277)
1-877-434-7598 (TTY)
www.aarp.org/home-garden/transportation/driver_safety/

Patient Education Forum: Safe Driving for Seniors
The American Geriatrics Society
The Empire State Building
350 Fifth Avenue, Suite 801
New York, NY 10118
1-800-563-4916
www.healthinaging.org/public_education/pef/safe_driving_forSeniors.php

Exercise

American College of Sports Medicine
P.O. Box 1440
Indianapolis, IN 46206-1440
1-317-637-9200
www.acsm.org

The President’s Council on Physical Fitness and Sports
Department W
Tower Building, Suite 560
1101 Wootton Parkway
Rockville, MD 20852
1-240-276-9567
www.fitness.gov

Grief, Mourning, and Depression

National Institute of Mental Health
6001 Executive Boulevard
Room 8184, MSC 9663
Bethesda, MD 20892-9663
1-866-615-6464
1-866-415-8051 (TTY)
www.nimh.nih.gov
**HIV/AIDS**

National Association on HIV Over Fifty
23 Miner Street
Ground Level
Boston, MA 02215-3319
1-617-233-7107
www.hivoverfifty.org

**Incontinence**

National Association for Continence
P.O. Box 1019
Charleston, SC 29402-1019
1-800-BLADDER (1-800-252-3337)
www.nafc.org

The Simon Foundation for Continence
P.O. Box 815
Wilmette, IL 60091
1-800-23-SIMON (1-800-237-4666)
www.simonfoundation.org

**Medication**

Center for Drug Evaluation and Research
U.S. Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD 20993
1-888-INFO-FDA (1-888-463-6332)
www.fda.gov/AboutFDA/CentersOffices/CDER/default.htm

Medicare
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850
1-800-MEDICARE (1-800-633-4227)
1-877-486-2048 (TTY)
www.medicare.gov

**Memory Problems**

Alzheimer’s Disease Education and Referral Center
P.O. Box 8250
Silver Spring, MD 20907
1-800-438-4380
www.nia.nih.gov/Alzheimers

Alzheimer’s Association
225 North Michigan Avenue, Floor 17
Chicago, IL 60601-7633
1-800-272-3900
1-866-403-3073 (TDD)
www.alz.org

**Problems With Family/Caregiving**

Children of Aging Parents
P.O. Box 167
Richboro, PA 18954-0167
1-800-227-7294
www.caps4caregivers.org

Eldercare Locator Service
1-800-677-1116 (bilingual)
www.eldercare.gov

National Center on Elder Abuse
U.S. Administration on Aging
c/o University of Delaware
297 Graham Hall
Newark, DE 19716
1-302-831-3525
www.ncea.aoa.gov

**Sexuality**

Sexuality Information and Education Council of the United States
1706 R Street, NW
Washington, DC 20009
1-202-265-2405
www.siecus.org
For Your Convenience:

WORK SHEETS
Worksheet

**Changes to Discuss**

Your doctor may want to know about any changes in your life since your last appointment. It is useful to consider what you should say before you see the doctor. The list below can help. Of course, all the things on this list won’t apply at every visit! Make a copy of the blank list so you will always have a clean copy to use. Then take a minute to think about each of these possible topics. You may want to jot down when you first noticed each change. You can use the last column to note any additional information that may be helpful for the doctor to know.

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<thead>
<tr>
<th>TOPIC</th>
<th>DATE</th>
<th>NOTES</th>
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<tbody>
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<td><strong>Your diet, medication, and lifestyle</strong></td>
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<td>Alcohol use</td>
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<td>Appetite changes</td>
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<td>Diet/nutrition</td>
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<td>Medicines</td>
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<td>Tobacco use</td>
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<td>Weight changes</td>
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<td><strong>Your health</strong></td>
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<td>Bone/joint pain or stiffness</td>
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<td>Bowel problems</td>
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<td>Chest pain</td>
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<td>Feeling dizzy or lightheaded</td>
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<td>Headaches</td>
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<td>Recent hospitalizations or emergencies</td>
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<td>Shortness of breath</td>
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<td>Skin changes</td>
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<td>Vision changes</td>
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<td><strong>Your thoughts and feelings</strong></td>
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<td>Feeling lonely or isolated</td>
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<td>Feeling sad, down, or blue</td>
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<td>Intimacy or sexual activity</td>
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<td>Problems with memory or thinking</td>
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<td>Problems with sleep or changes in sleep patterns</td>
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<td><strong>Everyday living</strong></td>
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<td>Accidents, injuries, or falls</td>
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<td>Advance directives</td>
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<td>Daily activities</td>
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<td>Driving/transportation/mobility</td>
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<td>Exercise</td>
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<td>Living situation</td>
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Worksheet 2

**Concerns**

At each visit your doctor will likely ask about your concerns. It’s a good idea to think about what you’d like to talk about before the actual visit. This form can help you organize your thoughts. Make a copy of the blank form so you will always have a clean copy to use. Then, after you make an appointment, take a minute to write down the name of the doctor and the appointment details (for example – the date, the time, the address). Use the form to make a list (in order, from most important to least important) of the concerns you want to discuss.

<table>
<thead>
<tr>
<th>DOCTOR:</th>
<th>APPT. DATE:</th>
<th>TIME:</th>
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<tbody>
<tr>
<td>ADDRESS:</td>
<td>PHONE:</td>
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**APPOINTMENT DETAILS (MOST IMPORTANT TO LEAST IMPORTANT)**

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**NOTES**
Medications

You may be taking many different medicines as well as numerous vitamins and over-the-counter drugs. It can be confusing to keep track of everything! This form can help. Because your medication regimen may change over time, make a copy of the blank form so you will always have a clean copy to use. Try to bring a completed and updated copy of this form to every doctor appointment.

<table>
<thead>
<tr>
<th>Name of Drug</th>
<th>What It’s For</th>
<th>Date Started</th>
<th>Doctor</th>
<th>Color/Shape</th>
<th>Dose</th>
<th>Instructions</th>
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ANY SUGGESTIONS?

Closing Thoughts

If you have suggestions to add to future editions of this publication or other ideas for making it more helpful, please contact Freddi Karp, Editor, National Institute on Aging, Office of Communications and Public Liaison, Building 31, Room 5C27, 31 Center Drive MSC 2292, Bethesda, MD 20892-2292; karpf@nia.nih.gov.