

Doctors visits made easier:

Getting the most out of medical appointments

By Carol Edwards, RN, GCM



At the heart of our healthcare system is the general practitioner (GP), who provides control of access to other practitioners, disciplines and services as well as continuity of information. The GP is the repository of consistent health records, diagnosis, test results and reports from others.

It is advisable to consistently have the same physician as one ages because scattered medical records can cause loss of information as conditions become increasingly complex and health decisions are dependent on accurate diagnosis. For this reason changing GPs is ill advised. Even if one becomes disenchanted with the present physician, finding another can be difficult and seeking assistance with managing the present is a better option.

Getting an appointment

This is a “chore” and can take a great deal of time and effort. Timeliness of an appointment is key; sometimes you need to be a strong

advocate with a clear reason for an urgent appointment to have a doctor’s secretary prioritize your parent. Family members should be prepared to take time off work to assist.

Organizing and maintaining records

As we age, the cumulative result of our lifetime medical history becomes increasingly important to all future health decisions, hence maintaining records to complement the GP’s is important. As our parents, brothers or sisters age, keeping their records can become an essential, albeit onerous, task. As the visits to specialists increase, it is best to record details of each visit at the time, in a book or file.

Understanding diagnosis, reactions to medications, side effects and how they alter the path of medical decisions becomes increasingly complex and making careful health care decisions cannot be overemphasized. Remember, confidentiality of records and decisions is closely guarded by privacy laws and consent for sharing of information is required from the patient.

The GP and geriatrician

The services of both a GP and a geriatrician become beneficial to our parents. Together, they assist the caregiver/power of attorney (POA) in seeking appropriate advice and making decisions that afford the best outcomes given the

Attributes of a “good physician”

- Excellent listening and interpersonal skills
- Doesn’t jump to conclusions
- Non-judgemental
- Stays within area of expertise
- Doesn’t appear to rush the visit
- Watches for “non-factual” information
- Recommends companion attendance
- Thinks “outside the box”
- Maintains continuity of information

circumstances and wishes of the elderly person.

In many parts of Canada we are privileged to have the assistance of geriatricians, who specialize in conditions of the elderly as opposed to other age groups. The GP is usually a generalist and exposed to many age groups, so having the opinion of the geriatric specialist keeps the prescribing of medications and details of many complex conditions in check. Also with the complexity comes the numerous conditions that require assessment and referral during a visit to the GP. The geriatrician's assistance can usually streamline this process, and assist with the best advice and an active plan. Especially in the presence of dementia, the geriatrician can assess the mix of medications and assist the GP with practical recommendations for daily care.

In my Geriatric Care Management practice, most of my clients are advised to seek the assistance and advice of the geriatrician. It is my observation that as a result, they actually do better and achieve more appropriate outcomes.

What physicians need to know

For each of my clients we compile a detailed care manual that contains all relevant diagnoses, test results and treatments during the latter part of their lives. Additionally, as they become frail, elderly and complex we keep day-to-day records of all bodily functions, food intake, blood pressure, pulse, weight, etc. A daily log and administration of medications is vital to monitoring, along with any changes and additions and the rationale behind all prescriptions. As a result, intelligent discussion and decisions with medical personnel in all health care settings can proceed. These records are also vital in the emergency room, during hospitalizations and at visits with other specialists.

The role of a geriatric care manager (GCM)

While this action and record keeping is challenging for the average caregiver, we feel that it is beneficial, whenever possible, for a professional to guide and assist the family caregiver and POA with discussion involving a patient's well being. Especially in the area of complex care, the GP is dependent on organized, accurate information. This

makes his/her job infinitely easier, and both the elderly client and family are more satisfied and confident with the results. Most of the physicians with whom we work look to us for assistance and factual information in order to make a diagnosis. After the visit, all care plans are implemented by our team. Of course, family assistance is welcome.

In the absence of additional support, family members would need to coordinate the same information as best they can in order to achieve optimum results. Interestingly, while the previous generation was in awe of the physician, trusting their physician's judgement and not inquiring too closely into their care, the Boomer generation is much more likely to have increased expectations and ask more probing questions of the GP.

In the absence of a family GP, try the following:

- Call your local hospital for a list of GPs on "intake"
- Visit a "walk in" clinic (not so good for continuity)
- Ask friends for a GP reference and visit
- Call CCAC
- Call local physicians and appeal

Effective advocacy

Detailed record keeping is also the cornerstone of effective advocacy. It is hard for an uninformed member of the public or caregiver to argue intelligently on their family member's behalf without facts; they will be at the mercy of the doctor's "best guess" at a diagnosis or even go "down the wrong path."

Asking awkward and probing questions is more effective when the person asking the questions is well prepared. When accurate information is received and exchanged it promotes better results. When the appointment is successful, there should be no ambiguity on behalf of the POA, and other family members can be kept informed for the purpose of timely follow up and implementation of care directives. ●



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“Aging is not ‘lost youth,’ but a new stage of opportunity and strength.”

Betty Friedan