

# Questions to Ask Your Doctor

**Note: This list is designed to help you consider questions that may be helpful to ask your doctor. Some questions may not be applicable to your situation.**

ICLL Surgeon: \_\_\_\_\_ Date Seen: \_\_\_\_\_

## INITIAL QUESTIONS

1. What is my diagnosis?
2. What causes this condition?
3. What support groups are available to me?
4. What books, websites, or other materials do you suggest I read about my condition?
5. What treatment options do I have?
6. What are the risks and benefits of those various treatment options?
7. Which treatment is most common for my disease or condition?
8. What would happen if I don't have treatment or delay treatment?
9. Could surgery help now, or in the future?

## SURGERY (IF APPLICABLE)

1. What is the procedure called?
  
2. What are the benefits of this procedure in terms of pain relief, functioning/mobility? How long will those benefits last?
  
3. How much experience do you have performing this surgery?
  
4. Will my full course of treatment require more than one surgery?
  
5. How soon (or at what age) should I undergo surgery?
  
6. Do I have to schedule any special tests before the surgery can be scheduled?  Yes  No  
If yes, which tests or exams?
  
7. Will my family or I need to donate blood before the surgery?  Yes  No  
(If a blood donation should be made, please ask for the blood donation handout.)
  
8. How long is the procedure?
  
9. How long will I be in the hospital?
  
10. How long will I need to be in Baltimore after the surgery?

## THE TREATMENT PLAN

1. How often will I need to come to the ICLL for follow-up visits?

(The follow-up visits must occur at the ICLL unless the surgeon states otherwise.)

2. Will my condition be treated with an external fixator, internal lengthening device (Precice), cast, or brace?

### External Fixator or Internal Lengthening Device (Precice)

a. Type/name of device:

b. Estimated amount of time device will be lengthening/correcting:

c. How long in total will the device be in my arm or leg?

d. Will I have to adjust the device? How often?

e. If the lengthening and correction proceed as planned, this treatment can lengthen a maximum of \_\_\_\_\_ inches.

### Cast or Brace

a. Estimated duration of treatment with the cast or brace:

b. Will it be removable?

c. How far up the arm/leg/body will it go?

## PHYSICAL THERAPY

1. Will I need physical therapy (PT) after surgery?  Yes  No

If yes, please answer questions a through c:

a. How many times a week?

b. How many weeks?

c. Can I undergo PT in the city that I am from, or should I undergo it in Baltimore?

(Check with your insurance company to find out how many PT visits they allow.)

## MOBILITY & TRANSPORTATION

1. Will I be able to bear weight?  Yes  No

If yes, how much weight bearing is allowed?

2. Will I need to use crutches, a walker, or a wheelchair?

3. Will I need special transportation (e.g., wheelchair van)?

4. If applicable, will I be allowed to drive while undergoing treatment?  Yes  No

If yes, how soon after surgery?

## WORK & SCHOOL

1. Will I be able to go to school or work after surgery?  Yes  No

If yes, please answer questions a and b:

a. How soon after surgery?

b. Will I need to make any special arrangements at school or work, such as allowances for a wheelchair, leaving early for therapy, elevating the legs, etc.?  Yes  No

If yes, what type of arrangements should I make?

## NOTES