

OUTSIDE THE BOX

# Medical tests can cost you money, time and stress. How to know if it's worth it.

You need more medical care as you get older. But how can you tell if it's necessary—or a waste?

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Financial incentives that can entice specialists to order more tests and procedures.

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If you're lucky, you trust your doctors completely. You respect their expertise and follow their recommendations.

Trust is even more important for older patients. They may have more medical conditions that can be tough to treat.

The complexity of their care is challenging enough. Throw in financial incentives that can entice specialists to order more tests and procedures and it's no wonder some retirees question the necessity of it all.

It's up to you to decide if a doctors' proposed treatment is worth it. Weighing the cost—both financial and emotional—of undergoing more poking and prodding is hard if the alternative poses risks as well.

"There are times when there isn't clearly one right choice," said Ishani Ganguli, an associate professor of medicine at Harvard Medical School.

Before agreeing to accept a physician's recommendation to seek out more medical care, she suggests asking questions such as:

- 1. How will this change what we do next? How will the results inform your understanding of what's next for me?*
- 2. What else can we do instead of this test? Are there other paths I can take or options I can consider?*
- 3. What are the pros and cons of going ahead with this?*

"The best thing is to ask for specifics about how your doctor weighs risk," she said. "Worry is a subjective feeling. So try to quantify that worry with evidence-based numbers" that your doctor can cite to support the proposed treatment.

Older adults may struggle to distinguish between necessary and unnecessary medical care, even when they trust their longtime doctor's judgment. If they're conferring with a new physician, they may feel more uncertain.

Medicare patients spend about three weeks a year seeing doctors, getting medical tests and using hospitals and rehab facilities, according to a recent study by Ganguli. All that care is exhausting and sometimes a waste.

If you're torn about whether to pursue a test or treatment—and you've already asked your physician the questions above—dig to learn more on your own. Ganguli suggests checking reputable sources like the [U.S. Centers for Disease Control and Prevention](#) and the [U.S. Preventive Services Task Force](#) guidelines.

Coordinating your care when you're seeing two or more specialists can be especially tricky.

Consider what happens if you seek out heart specialists for a potential problem. You may start off by seeing a general cardiologist if you have high cholesterol or need to address other risk factors for heart disease.

From there, you might be bounced around. Some cardiologists specialize in administering a heart failure screening to assess how the heart pumps blood. Others specialize in conducting a heart arrhythmia test or electrophysiology (EP) study to check the heart's electrical system.

And it's not just cardiologists who tend to narrow their focus. Orthopedic surgeons specialize in wrists, hips, knees and other body parts.

"There's a lot of sub-specialization these days," Ganguli said.

Doctors can order unnecessary tests for a variety of reasons. Malpractice concerns top the list followed by their desire to reassure themselves, [according to one study](#).

Sometimes, fate can play a role.

For nearly 20 years, my gastroenterologist recommended that I get a colonoscopy every one to two years based on my medical history. By chance, he couldn't do my latest colonoscopy and his colleague handled it.

I was shocked when his colleague wrapped up and told me I could go five years before my next colonoscopy. When I said that my longtime gastroenterologist kept me on a 1-2 year schedule, the colleague said, "He's more conservative."

"Seeing a different doctor in the same practice can help," Ganguli said. "There can be a lot of idiosyncrasies that distinguish one doctor from the next."

Let's not overlook the greed factor: A gastroenterologist makes more money by doing more colonoscopies.

Another cause of unnecessary tests is an overreliance on electronic medical records (EMRs). As we hop from specialist to specialist, we assume they have complete access to our medical file at a glance.

"One reason we are overprescribed tests is doctors don't have time to talk to one another," said Tina Sadarangani, assistant professor of nursing and medicine at New York University. "We think EMRs solve that and all our tests live in our EMR. But EMRs are

filled with extraneous information and different [EMR] systems may not talk to each other.”

She urges patients to maintain their own medical records and bring their file to each appointment—whether it’s a new or returning appointment.

“That way, if Doctor One orders a test, you can say, ‘Doctor Two already had me get that test,’” Sadarangani said.

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## About the Author

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