



# Talking to Your Healthcare Provider About Irritable Bowel Syndrome (IBS)

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International Foundation for Gastrointestinal Disorders ([www.iffgd.org](http://www.iffgd.org))

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**Irritable Bowel Syndrome (IBS)** is a bowel disorder that includes the following symptoms:

- abdominal pain or discomfort
- changes in how often you need to use the bathroom (frequency)
- changes in the way your bowel movement looks (consistency)

Other symptoms may be present, and experiences vary from person to person. These three core symptoms must be present for a diagnosis of IBS. Often, people have undergone a number of tests and procedures before receiving a diagnosis of IBS. A healthcare provider can reliably diagnose IBS by taking a thorough medical history and with minimal tests.

Management of your IBS may be complex. There is no cure for IBS, and the exact cause is still unknown. We do know multiple factors can impact an individual's symptoms. Factors such as diet, hormones, stress, gut-microbiome, and your nervous system may all be important to consider. Your goals and needs for each visit with your healthcare provider may change. This depends on

- 1) the provider you are seeing,
- 2) if you are a new patient, and
- 3) how your symptoms change over time.

We know that people with IBS do better when all factors impacting their symptoms are considered. Take the time to make sure you can explain all of your symptoms. Providing a timeline of how long you have experienced each symptom can help your healthcare provider determine the best treatment.

Having a good relationship with your healthcare provider can make a huge difference. This improves disease outlook and your ability to manage your IBS. Follow the *Quick Tips* below and use the *IBS Visit Guide* to make the most out of visits with your providers.

## Quick Tips

### Before Your Visit

- Educate yourself about IBS and treatment options through trustworthy sources. Read IFFGD Fact Sheet No. 168 *Current Pharmacologic Treatments of Irritable Bowel Syndrome*, and other IBS Fact Sheets.
- Create a list of questions that you have about your IBS and treatment options and prioritize them. If you run out of time during your visit, this ensures your most important questions get addressed.
- Set goals for what you would like to get out of your visit.
- Consider bringing a friend or family member with you.
- Ask if it is possible to send your questions and goals to your provider ahead of the appointment. This allows your provider to better structure your visit. You will be given the opportunity to include questions that you may be too embarrassed to ask in person.

### At Your Visit

- Consider giving your provider the list of questions and goals (noted above) you have created.
- Explain the symptoms that you are experiencing in detail and how they affect your quality of life.

- Mention any factors (e.g., diet, stress, mood) you think may be impacting your IBS. Ask for referrals if that particular healthcare provider does not work with those symptoms.
- Mention any tests or procedures you have had completed or better yet, bring these test results.
- Tell your provider all medications, supplements, and vitamins that you are taking including dosage. This includes any changes that have been made since your last visit.

#### **After Your Visit**

- Make sure that you have received copies of referrals, prescriptions, or information either on paper or via the patient portal.
- Try to make follow-up appointments that you need before you leave.
- Follow the recommendations which you have agreed on during your visit.
- Stay in contact with your healthcare team in between visits. This can be simple updates on your health to follow-up questions regarding your treatment plan.

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#### **About IFFGD**

The International Foundation for Gastrointestinal Disorders (IFFGD) is a 501(c)(3) nonprofit education and research organization. We work to promote awareness, scientific advancement, and improved care for people affected by chronic digestive conditions. Our mission is to inform, assist, and support people affected by gastrointestinal disorders. Founded in 1991, we rely on donors to carry out our mission. Visit our websites at: [www.iffgd.org](http://www.iffgd.org), [www.aboutIBS.org](http://www.aboutIBS.org),

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## IBS VISIT GUIDE

### My goals for today's visit:

Think about what you would like to accomplish most during your visit. Many provider visits can be time limited. It is important to understand that one larger goal (such as coming up with a comprehensive treatment plan) may take up an entire visit. Three smaller goals may be achievable in one visit (such as "are there specific exercises I can do?").

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### Symptoms I have been experiencing:

Think of your symptoms over the past three months. If this is too difficult to remember, try to think of your symptoms over the last month. You may want to ask a friend or family member to help you with this section.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Abdominal pain or discomfort                             | <input type="checkbox"/> Bloating or Distension                                  | <input type="checkbox"/> Urgency to use the bathroom |
| <input type="checkbox"/> Constipation or hard stools                              | <input type="checkbox"/> Symptoms during the night                               | <input type="checkbox"/> Gas                         |
| <input type="checkbox"/> Diarrhea or soft stools                                  | <input type="checkbox"/> Fecal Incontinence                                      | <input type="checkbox"/> Other _____                 |
| <input type="checkbox"/> Changes in your bowel movements (texture or consistency) | <input type="checkbox"/> Changes in how often you go to the bathroom (frequency) | <input type="checkbox"/> Other _____                 |

### Abdominal Pain Rating:

Over the past month how would you rate your pain level (on average)?

1	2	3	4	5	6	7	8	9	10
No Pain			Moderate pain				Severe Pain		

### Treatment:

If you have seen this provider before, have you noticed any of the following changes in symptoms since your last visit?

- Better                                       No change                                       Worse

Explain:

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### Factors:

Over the past month have you noticed a change in any of the following factors? These may or may not be related to your IBS, but your doctor may want to know about them. It is also important to note that certain factors may influence your symptoms but are not a cause of your IBS. This includes your level of stress and your mood.

- |  |  |
|--|--|
| <input type="checkbox"/> Diet                      | <input type="checkbox"/> Hormonal changes (e.g., menstruation, birth control pill) |
| <input type="checkbox"/> Stress                    | <input type="checkbox"/> Recent illness or infection                               |
| <input type="checkbox"/> Mood (worried, sad, etc.) | <input type="checkbox"/> Other _____   |

**Medications:**

List any medications you are currently taking to ensure your healthcare provider has a complete list. This should include prescription, over the counter, vitamin, and supplement medications. If you have stopped any medications, include those as well.

Medication	Dosage	Frequency
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Questions I have:**

Write down any questions you have. List them from most important to least important and use the space below to write down any answers.

<b>Question:</b>	<b>Answer:</b>
<b>Question:</b>	<b>Answer:</b>
<b>Question:</b>	<b>Answer:</b>

**Notes:**

**Before I leave today's visit:**

- Do I understand everything discussed today?

- Do I know how to contact my provider in case I have follow-up questions?
- Do I have a list of prescriptions made today?
- Do I have a copy of referrals made today?
- Do I have copies of important information or documents that I need before I leave?