


PATRICK MALONE & ASSOCIATES, P.C.

From Tragedy To Justice - Attorneys For The Injured



We win exceptional verdicts and settlements for our clients in cases of brain injury, medical malpractice, wrongful death and other severe injuries.

**In This Issue**

[Why We Hesitate to Get Second Opinions](#)

[Seven Good Things about Second Opinions](#)

[Making the Process Work Well for You](#)

[Check Out Our Previous Tips](#)

**Quick Links**

[Our firm's website](#)

[Read an excerpt from Patrick Malone's book: \*\*\*The Life You Save: Nine Steps to Finding the Best Medical Care -- and Avoiding the Worst\*\*\*](#)

*The Second Opinion: Trust, but Verify*

Dear Patrick,

Lots of health care coaches, me included, stress the importance of getting a second opinion at every significant medical crossroads. But seven out of ten of us don't do it, according to a recent survey. Everybody knows the basic idea of a second opinion, but we hesitate. Sometimes it even feels wrong. What gives with that? And what does this tension tell us about the times when our instincts can defeat us?

In this newsletter, we'll answer those questions, and explain why the second opinion should always be your first choice. Read on for more.

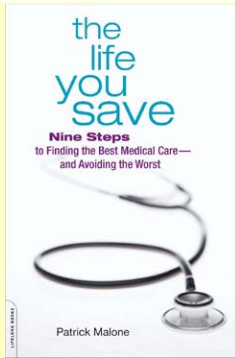
**Why We Hesitate to Get a Second Opinion**

I can prove to you logically that getting a second opinion is one of the key steps to getting better health care. In fact, I made it a whole chapter in my book, [The Life You Save](#).

So why do we not follow through? There's a simple but pretty profound reason: Trust is an essential part of health care. We form a trusting bond with the doctors and nurses who lay their hands on us. If we lack that trusting bond, we have disabled an important part of the healing process, the part that feels secure and safe and optimistic about how things will turn out.

So it's natural to feel that if we seek a second opinion, we fret that we are betraying the trust that we need to have in our caregivers. That makes us feel awkward at best when we think about getting a second opinion. And we worry that we will irritate or insult the doctor who gave us the first round of advice, and that might mess with the curative mojo between that doctor and us.

There are powerful reasons in evolutionary biology why we abandon rationality and look for an authority figure when we're under major stress, which happens with any new diagnosis of a serious disease. So be aware of how powerful this instinct can be.



## Learn More



Read our [Patient Safety Blog](#), which has news and practical advice from the frontlines of medicine for how to become a smarter, healthier patient.



Yet there is a simple answer to the dilemma about whether we should trust the first doctor who gives us a piece of bad news:

Trust -- but verify.

When we get another opinion to verify what doctor No. 1 told us, one of two things happens: We learn the first doctor was right, and that helps cement the trusting bond with that doctor, OR we learn that we may want to go in a different direction, in which case the trusting bond with that doctor loses importance. Either way, we're better off.

[More on why we need second opinions and how they benefit our health in the next piece below.](#)

## Seven Ways Second Opinions Improve Our Health Care

Here is why second opinions are so important when we face any major decision point in health care:

1. The first opinion can be plain wrong. This is often the case with surgical biopsies. It's not that the first reading was incompetent (but that happens too). It's that there are different levels of expertise, and when you seek a second opinion, you can often obtain one from someone who specializes in whatever condition you have under evaluation.
2. Sometimes neither opinion is "right" or "wrong," but getting a second or third opinion helps you realize that your own goals and values are the most important thing. Especially in an end-of-life situation, quality of life and longer life can be at odds. That helps you decide how aggressively to pursue a course of action.
3. The process of getting a second opinion helps open up the channels of communication and education. As noted in the Harvard Health Letter, "A second opinion can be helpful just because another doctor may explain things in a way that's more understandable to you."
4. The second opinion helps you trade up to a higher level of expertise for whatever treatment might be on your horizon. Even if doctor No. 1 was right about what you need, that doesn't mean he or she should do the procedure. You might learn at a second opinion that someone else has a lot more experience and a better track record of good outcomes.
5. Getting multiple opinions is a good litmus test for the doctor opinionators. Good doctors welcome the chance to see what other doctors have to say about their proposed treatment. Dr. Gregory Abel,

a blood cancer specialist at Harvard-affiliated Dana-Farber Cancer Institute, said, "If you have a doctor who would be offended by a second opinion, he or she is probably not the right doctor for you." I agree 100%.

6. Second opinions can save you money by advising against unneeded tests, procedures or drugs. Remember that our health care system is rife with over treatment.

7. Second opinions can save your life. Whether the second opinion steers you away from a reassuring but wrong "nothing's the matter" opinion, or steers you in the opposite direction away from aggressive care that is unlikely to help you, your health will be better off for it.

## Making the Second Opinion More Productive

Some tips to make the process work well for you:

- Ask your doctor, nurses and family and friends for referrals. Many hospitals also offer second-opinion services.
- Check with your health insurance plan to see if the second opinion is covered. It should be.
- Prepare for the consultation. The second doctor will want to see your lab work, imaging studies and possibly other pieces of your medical record before offering an opinion. Before your appointment, contact the doctor's office to find out what you should bring or have sent.
- Discuss what matters to you. Take a list of questions. One study of breast cancer patients found that they were more likely than providers to focus on possible side effects from chemotherapy and hormone therapy.
- At the appointment, take notes or bring someone with you to do it. See [our newsletter on "Helping Your Doctor Make the Right Diagnosis."](#) for more on this, including the importance of bringing an ally with you to the meeting.
- Consider asking the second doctor to give his or her advice before knowing what the first doctor's advice was. (Some second opinionators tend to adjust their thoughts to conform with what the first doctor said, which defeats the whole process.) But don't conceal what the first doctor said if doctor No. 2 really wants to know that first. The point of the process is open and honest communication.
- Getting a second opinion on a surgical biopsy is easy. I explain more in the patient safety tips on my website; [click here](#).

### Past issues of this newsletter:

Here is a quick [index of past issues of our Better Health Care newsletter](#), most recent first.

This is issue No. 23. Issue No. 22 tried to provide a painless [introduction to an important medical statistic: The Number Needed to Treat](#). It will open your eyes once you understand how the pros and cons of many medical tests and procedures can be boiled down to how many people it takes to treat in order for a single person to benefit.

The [truth about TV journalist doctors](#) -- MDs who have given up medicine to sit in front of a camera and digest health news for the rest of us -- was the focus of our Issue No. 21. We found a lot of shortcomings in their advice, which trended toward the sensational and the new rather than tried and true.

Issue No. 20 of this [newsletter](#) focused on [helping your doctor get to the right diagnosis](#) or finding the right doctor to get there.

Issue No. 19 offered [tips on finding the right hospital](#).

[Issue No. 18 focused on rules of thumb for better health care](#), and the fascinating social science research that shows why intuitive, "gut" decisions often are based on quite rational reasons.

In the issues just before that, we had a three-part conversation about health care conversations. We started with the core idea of medicine: that [every patient can and should exercise the right to decide what happens with his or her own body](#). It's called "informed consent," and it's all about having a good conversation with the doctor or other provider, to help us form a bond and get the best care. Part two discussed how [good questions to the doctor can prevent misdiagnosis](#). These are conversations that can truly save a life: yours or a loved one's. [Part three concerned who speaks for you when you cannot speak for yourself](#). [Living wills and health care powers of attorney](#) are the tools to ensure that what happens to you in this all-too-common circumstance -- in an ICU or hospice -- follows your desires and dreams.

So those were issues 15, 16 and 17. Moving backwards: No. 13 and 14 focused on doing your own health care research on the Internet. No. 13 opened the discussion of "separating fact from hype" in health care advice with a piece on HealthNewsReview, plus articles on the five most overrated prescription medicines and the Miranda warning you see on a lot of so-called natural health products. Read No. 13 [here](#).

No. 14 featured a short list of reliable web sites for health care information. We also did a short expose of a very popular website that one writer memorably called "a hypochondriac time suck." As a bonus, one more click will give you an excellent food pyramid for a healthy diet. Read [No. 14 here](#).

Here's a rundown of our newsletters in 2010:

Our first newsletter focused on the problem of conflicts of interest in medicine -- what you need to know in general, and how to find out if your doctor has a conflict that might affect the quality of your care. [Click here](#) to see that newsletter again.

Newsletter No. 2 expanded the discussion into the related topic of why experience counts -- especially when choosing a surgeon. We focused on the story of minimally invasive prostate surgery with the device called the da Vinci robot. We explained how the lessons apply to any kind of surgery or medical procedure. To see newsletter No. 2 again, [click here](#).

Newsletter No. 3 talked about why "more is not always better" in modern medicine. We focused on cancer screening, especially for

breast and prostate cancer, and why you can feel not so guilty if you're a little less aggressive about getting the test. (But if you have any symptoms, you shouldn't wait!) [Click here](#) to read it again.

Newsletter No. 4 talked about choosing a hospital, and why the best known rating systems such as U.S. News & World Report may not be all they're cracked up to be. I give some tips about other ways to make sure your hospital is up to par. Click [here](#) to read it again.

Newsletter No. 5 talked numbers -- how it's important for all consumers of health care who want to make informed choices to learn a little bit about how statistics are used -- and misused -- in health care. I introduced readers how to read medical statistics in a straightforward way. To read it again, [click here](#).

Newsletter No. 6: Back pain and heart disease: how less can be more. The simpler approaches can work just as well as or better than more complex kinds of surgery. [Here's the link](#) to see it again.

Newsletter No. 7: Preventive care: what every adult American needs. [Here's the link](#).

Newsletter No. 8: Colonoscopy: two questions you must ask to make sure you get a competent screening exam. These questions can be a real life-saver when you know how often colonoscopies miss life-threatening lesions. [Read more here](#).

No. 9: Why getting and reading your own medical records can save your life -- and how to do it. The link is [here](#).

No. 10: The joys of being a health care skeptic -- or, Why statisticians are our friends. And more on why most published research eventually turns out to be wrong. The link [is here](#).

No. 11: Part one of preventing injury in the hospital, discussing why 24/7 bedside coverage is essential, and focusing specifically on bedsores and falls. [Read it here](#).

No. 12: Part two of preventing injury in the hospital: infections, blood clots and wrong medicine/wrong dose problems. [Here is the link](#).

To your continued health!

Sincerely,

A handwritten signature in black ink that reads "Patrick Malone". The signature is written in a cursive, flowing style.

Patrick Malone  
Patrick Malone & Associates