Why is it vital to educate young teens about their health?

THESE ARE THE FACTS:

- 1 in every 4 teenage girls between the ages of 14-19 yrs has a sexually transmitted disease (STD).
- 3 in every 10 will get pregnant at least once before the age of 20 yrs.
- 17% of adolescents 12-19 yrs are overweight.
- 10 million females battle eating disorders such as anorexia and bulimia, while millions more suffer from binge eating disorders.
- Over ½ use unhealthy weight control behaviors such as skipping meals, fasting, smoking cigarettes, vomiting, and taking laxatives.

It is important to counsel, educate and design information that is age appropriate for a teen's individual reproductive healthcare needs.

How do we find a teen-friendly gynecologist?

Generations OB-GYN has excellent, caring and highly qualified healthcare professionals that can meet both you and your teen's needs.

~ INFORMATIONAL WEBSITES ~ www.bestbonesforever.gov/bbf www.girlshealth.gov

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Ask An OB-GYN Healthcare Provider

When does a teen need her first personal healthcare visit?

This is one of the most common questions asked when referring to a young woman's reproductive healthcare. The American College of Obstetricians and Gynecologists (ACOG) recommends that 13 to 15 year old adolescent girls see a gynecologist.

What is the purpose of this visit?

The focus of this first visit is to inform and educate the teen about reproductive healthcare issues. In addition, she is given an opportunity to establish a long-term trusting relationship with an OB/GYN provider. A pelvic exam is not usually necessary at this visit.

What if she is older than 15 or younger than 13?

First personal healthcare visits can be scheduled at any age. It doesn't matter if she is older or younger than the recommended age of 13 to 15 yrs old. What is important is that she gets established now with a gynecologic healthcare professional. All visits are tailored to meet each individual teens personal needs.

What to expect at the first visit?

You, as her parent/guardian, may be required to accompany her to the first initial visit to help with paperwork and establish her as a patient (You are welcome to every appointment after that but it is not necessary, teens may come alone).

First ► the provider will meet with both of you together.

Second ➤ the provider will meet with your teen alone.

Thirdly ► the provider will get together with both of you at the end of the visit for a summarization.

Any family health history issues relating to reproductive health is essential to know. Based on the history given, there may be some preventative measures she can take now to minimize symptoms or even avoid these conditions. Some medical conditions that can be genetically based are polycystic ovarian syndrome, endometriosis and breast cancer.

Topics covered may include:

- Breast Health/Education
- Pelvic Pain/Menstrual Cramps
- Irregular/Heavy Periods
- Vaginal Discomfort/Discharge
- Contraception Counseling/Education
- Acne/Hygiene
- Exercise/Social Activities
- Nutrition/Weight Management
- Sex Education
- Self Esteem
- Mood Changes
- Prevention of sexually transmitted diseases and pregnancy can be addressed (Starting the Gardasil® vaccination series may be discussed, which prevents certain kinds of cervical cancers).

Isn't a pediatrician or a primary care physician (PCP) sufficient?

This first personal healthcare visit is designed to complement her routine care appointments with her pediatrician or (PCP) and is <u>not</u> intended to replace them. Each handling different aspects of overall prevention and health of the teen.

Doesn't school teach her what she needs to know about personal healthcare?

Most schools can and do *help* educate teens about healthcare issues. Unfortunately gynecologic 'myths' and inaccuracies get perpetuated by their peers. Establishing access to a trustworthy source she can ask the 's' she really wants answered in a private setting. Also, this ensures she receives accurate up-to-date information, both of which are important steps to a lifetime of the best healthcare possible.

Screening, diagnosis and early treatment is necessary for optimum future reproductive healthcare.