



State of Illinois
Illinois Department of Public Health

Healthy Lifestyle Quiz for Girls and Young Women



A Healthy Lifestyle Quiz for Girls and Young Women

The Illinois Department of Public Health, Office of Women's Health, has designed this healthy quiz for you. While completing the quiz, write down any questions that cause you some concern or that you do not understand and discuss them with your health care provider. The last section of this booklet includes suggestions for talking to your health care provider that may be helpful to review before you go to your appointment. You also can call the toll-free Women's Health-Line at 888-522-1282 for suggestions about where to go to get more information about health issues that may concern you.

Gynecological Concerns

Q) Menstruation is –

- A. a normal part of female development.
- B. monthly bleeding.
- C. the body's way of preparing itself for pregnancy.
- D. all of the above

A) D. All of the above. Menstruation is a woman's monthly bleeding. It is one of the many changes a girl's body goes through during her pre-teen and teenage years, and is a part of the reproductive cycle in women. This monthly cycle rids the uterus of blood and tissue that prepares the uterus for possible pregnancy; the



cycle starts over again unless the woman becomes pregnant. Menstruation stops when a woman reaches menopause - at about the age of 51.

Q) What is abnormal bleeding?

- A. spotting (small amounts of blood) between periods
- B. very heavy periods
- C. periods that last for weeks at a time
- D. all of the above

A) D. All of the above. A normal menstrual period occurs about once a month and lasts between four to six days, but everyone is different. Once your period has established a pattern, any bleeding that does not fit into that pattern should be considered irregular. This includes spotting between periods, heavier than normal periods and longer than normal periods. However, certain events or changes in your life, such as stress, exercise or diet, can temporarily affect your cycle. If any of these problems continue, see your health care provider.

Q) What is toxic shock syndrome (TSS)?

- A. a reaction to medication
- B. a disease that can be related to tampon use
- C. a condition caused by exposure to the sun

A) B. TSS is a very serious reaction to certain bacteria and is usually associated with tampon use. Symptoms of TSS include a sudden high fever, vomiting, diarrhea, dizziness and a rash that looks like a sunburn. If you experience any of these symptoms, you should see your health care provider right away. You can decrease your risk of TSS by using lower absorbency tampons and changing tampons often or by alternating tampon use with pads or panty liners.

Q) True or False? Premenstrual syndrome (PMS) is an imaginary problem.

A) False. PMS is a group of symptoms linked to the menstrual cycle. PMS symptoms occur in the week or two weeks before your period. The symptoms usually go away after your period starts. Symptoms can be physical (bloating, headaches, dizziness and food cravings) or emotional (mood swings, panic/anxiety attacks and depression). PMS is treatable. Lifestyle changes like exercise, a healthy diet and relaxation may help to lessen some of the symptoms. If PMS is severe, consult your health care provider.

Q) When should a young woman first visit a gynecologist?

- A. between the ages of 13 to 15
- B. when she becomes sexually active
- C. if she is having a gynecological problem
- D. whichever comes first

A) A. Young women should have their first gynecological visit between the ages of 13 to 15 years. The first visit may just be a talk between you and your doctor and may not include an exam. Your doctor may ask a lot of questions about you and your family. Some of them may seem personal, such as questions about your menstrual period or sexual activities. Giving open and honest answers to these questions is key to your care.

Q) What is a Pap test?

- A. a pregnancy test
- B. a screening test for cancer of the cervix
- C. a test to see if you have had sex

A) B. The Pap test checks for changes in the cells of the cervix. The cervix is the lower part of the womb, which opens into the vagina. The test can find cancer cells or cells that could turn into cancer. Women should begin having yearly checkups, including a pelvic exam and a Pap test, within three years of becoming sexually active. Once a woman has had three consecutive, negative Pap tests within a five-year period, she may get screened every three years.

Birth Control

Q) What is the most effective form of birth control?

- A. abstinence (no sexual intercourse)
- B. the pill
- C. the shot
- D. withdrawal (“pulling out”)
- E. condoms

A) A. The only totally effective way to prevent pregnancy is not to have sexual intercourse. (That’s called abstinence.) Couples who do have sex need to use birth control properly and every time to prevent pregnancy. Realistically, most people who use birth control will make mistakes and will increase the chance of a pregnancy. Out of people who use the birth control pill, five to eight out of 100 couples will get pregnant in a year. For the birth control patch, eight out of 100 will get pregnant in a year. For the male condom, 15 out of 100 will get pregnant in a year. For the birth control shot, three out of 100 will get pregnant in a year



and for withdrawal (“pulling out”), 27 out of 100 will get pregnant in a year. Most kinds of birth control methods do not provide much protection against sexually transmitted diseases (STDs). Abstinence and condoms are the most effective in preventing STDs.

Q) Which birth control methods can you get without a prescription?

- A. condoms for men
- B. female condoms
- C. spermicide
- D. all of the above

A) D. All of the above. Condoms for men are sometimes called rubbers, safes or prophylactics. Most condoms are made from latex rubber and if you are not allergic to latex, you should use these because they are the best at preventing pregnancy and AIDS, herpes, and other STDs. Like the male condom, the female condom should be used only once. However, it is not as effective as the male condom in preventing pregnancy and STDs. Spermicides contain a chemical that kills sperm and must be used at least 10 minutes before sex and should not be washed off for at least six to eight hours after having sex.

Q) What are some situations where you may want to use emergency contraception (emergency birth control)?

- A. You did not use birth control.
- B. You were forced to have sex.
- C. The condom broke or came off.
- D. He did not pull out in time.
- E. You missed two or more birth control pills in a row.
- F. You were late getting your birth control shot.
- G. All of the above

A) G. All of the above. Emergency contraception, known as Plan B, should not be used as regular birth control. Other birth control methods are much better at keeping women from becoming pregnant. If you are already pregnant, emergency contraception will not work. Emergency contraception works by keeping the egg from leaving the ovary or keeping the sperm from meeting the egg or keeping the fertilized egg from attaching to the uterus. Plan B was recently approved to be sold over the counter to women who are 18 years of age or older. Women younger than 18 will need a prescription.

Sexually Transmitted Diseases

Q) What are some ways you can pass sexually transmitted diseases to others?

- A. vaginal intercourse
- B. oral intercourse
- C. anal intercourse
- D. all of the above

A) D. All of the above. Some infections are curable, while others are not. STDs that are caused by a bacteria can be treated and often cured with antibiotics. Some bacterial STDs include chlamydia, gonorrhea and syphilis. Some STDs are caused by a virus and can be controlled, but not cured. Some viral STDs include HIV / AIDS, genital herpes, human papillomavirus (HPV) and hepatitis B virus.

Q) What are the most common symptoms of an STD?

- A. bad smelling or colored vaginal discharge
- B. light bleeding between periods
- C. pain during intercourse
- D. all of the above

A) D. All of the above. The most common symptoms of an STD are bleeding between periods, an unusual discharge and pain during sexual intercourse. However, many STDs do not have any obvious symptoms. The only sure way to know is by having a medical exam and lab tests.

Q) What are some ways to prevent STDs?

- A. using a condom for vaginal, oral and anal intercourse – every time
- B. knowing your partner and his/her STD status and health
- C. abstinence
- D. all of the above

A) D. All of the above. If you are sexually active, you can reduce your risk for getting STDs by practicing “safe sex.” Abstinence (not having vaginal, anal or oral sex) is the best and only 100 percent effective way to prevent getting a sexually transmitted disease.

Q) True or False? Human papillomavirus (HPV) is a sexually transmitted disease.

A) True. HPV is spread through sex and can cause an infection in the cervix. The infection usually goes away without causing any changes in the cervix, but HPV that does not go away over many years can lead to cervical

cancer. Most women will be exposed to HPV during their lifetime, but that does not mean that they will get cervical cancer. The only sure protection from HPV is lifelong abstinence. Regular condom use does not completely protect from HPV.

Q) True or False? AIDS stands for acquired immunodeficiency syndrome.

A) True. AIDS is caused by the human immunodeficiency virus (HIV). HIV destroys the body's ability to fight infections and certain cancers. Over time, HIV kills and damages cells of the body's immune system. The word AIDS is used for the most advanced stages of HIV infection.

Q) How is HIV spread?

- A. by having unprotected vaginal, oral or anal sex with someone who is infected
- B. by sharing needles or syringes with people who are infected
- C. by shaking hands

A) A and B. If you have a sexually transmitted disease, you may be at higher risk for getting infected with HIV during sex with an HIV-infected partner. Sharing needles or syringes with HIV-infected people also puts you at risk. There is no evidence that HIV is spread by contact with saliva or through casual contact, such as shaking hands or hugging or the sharing of food utensils, towels and bedding, swimming pools, telephones, or toilet seats. HIV is not spread by biting insects such as mosquitoes or bedbugs.

Q) True or False? A woman can transmit HIV/AIDS to her child.

A) True. Mothers can pass HIV / AIDS to their children in several ways – during pregnancy, during delivery or through breast milk. If you are pregnant or are thinking about becoming pregnant, check your HIV status as soon as possible. Certain drug therapies can reduce the chance of transmitting HIV / AIDS from mother to child.

Q) How long should you wait to get an HIV test if you believe you may have been exposed to the virus?

- A. one month
- B. three to six months
- C. at least one year
- D. you should get one right away
- E. until you start to feel sick

A) B. Most HIV tests are antibody tests that measure the antibodies your body makes against HIV. It can take some time for the immune system to make enough antibodies for the test to detect the antibodies and this time period can vary from person to person. Most people will develop detectable antibodies within two to eight weeks. Even so, there is a chance some people will take longer to develop detectable antibodies. If the test was given within the first three months after possible exposure, repeat testing should be done after three months to account for the possibility the first test was inaccurate. If you are engaging in unprotected sex, you should be tested at least once a year.

Q) Where can I get tested for HIV/AIDS infection?

A) Many places have testing for HIV infection. Common testing is done at local health departments, clinics, offices of private doctors, hospitals, and other sites. You also can ask your health care provider about getting tested, or, for information on where to find an HIV testing site call the Illinois Department of Public Health's HIV/AIDS/STD hotline at 800-243-2437 or the U.S. Centers for Disease Control and Prevention at 800-232-4636. All testing is confidential.

Healthy Bones

Q) True or False? The best time to build bones is when you are young.

A) True. It is important to build strong and healthy bones in childhood and teen years to avoid osteoporosis and other bone problems later in life. Osteoporosis is a condition in which the bones are fragile, making them fracture or break much easier. Taking care of your bones when you are young will help prevent problems in the future.

Q) True or False? Milk is the only way to get calcium in your diet.

A) False. There are many foods that contain calcium. Dairy foods, such as cheese, ice cream and yogurt, are excellent sources of calcium. Other foods high in calcium are dark green leafy vegetables like spinach and broccoli, and tofu. To build strong bones, it is important for girls and young women to eat foods rich in calcium. By age 30, your bones are the strongest they will ever be. As women age, their bones

become more fragile. Unfortunately, many young women stop drinking milk when bones are growing the most.

Q) Which kind of exercise helps prevent osteoporosis?

- A. swimming
- B. exercise that improves flexibility
- C. weight-bearing and resistance exercises like walking, running and weight lifting

A) C. Weight-bearing and resistance exercises are the two types of exercises most important for building and maintaining bone mass and density. Weight-bearing exercises are those in which you have to work against gravity and include jogging, walking, playing tennis and dancing. Resistance exercises include lifting free weights and using weight machines.

Q) True or False? The more exercise a young woman gets, the better it is for her bones.

A) False. Though weight-bearing and resistance exercises do help a woman build bone mass, exercise must be done in moderation. The sign of too much exercise for a young woman is when she has previously had regular periods, but has stopped menstruating (amenorrhea) because her body weight or body fat levels are too low, as often occurs in athletes, as well as women who are anorexic. Both of these conditions suppress hormone production, including the hormone estrogen which is important for bone building, and can lead to early osteoporosis.

Breast Health

Q) True or False? Breast cancer never happens in younger women.

A) False. Breast cancer is less common among women who are younger than 40 years old, but it is still possible to be diagnosed with the disease at a young age. In 2005, less than 30 percent of all breast cancer cases occurred in women younger than age 40. The chance of getting breast cancer increases as you get older.

Q) True or False? There isn't anything I can do to reduce my risk for getting breast cancer.

A) False. There are different kinds of risk factors. Some factors, like a person's age or race, cannot be changed. Other factors are linked to cancer-causing factors in the environment. Still, others are related to personal choices such as smoking, drinking and diet. You can lower your risk for breast cancer by following a healthy diet, not smoking, limiting alcohol, exercising regularly and having regular checkups with your health care provider.

Q) What are the best ways for a young woman to check for breast cancer?

- A. practice breast self-exam
- B. visit a health care provider at least every three years for a clinical breast exam
- C. get mammograms
- D. A and B only

A) D. A breast self-exam (starting around age 20) helps you learn the way your breasts normally look and feel and allows you to keep track of any changes that may occur. You should check your breasts two or three days after your period. If you discover a lump or notice any changes in your breasts, see your health care provider for a clinical breast exam. Clinical breast exams are recommended for all women beginning at age 20. Mammograms are not as effective in younger women because the breast tissue tends to be more dense, making the mammograms difficult to read. It is recommended that women start having mammograms beginning at age 40.

Immunizations

Q) Before going to college, you should consider getting a vaccine to prevent which disease?

- A. measles
- B. chickenpox
- C. meningococcal disease

A) C. College freshman, particularly those who live in dormitories, have a slightly increased risk of getting meningococcal disease and should consider getting a meningococcal vaccine.

Q) True or False? There is a vaccine to prevent you from getting infected with hepatitis C.

A) False. There is currently no hepatitis C vaccine, but you can get vaccinated against both hepatitis A and B.

Q) The immunity of which of the following vaccines generally wears off after 10 years?

- A. pertussis
- B. measles
- C. chickenpox

A) A. Vaccine-induced immunity to pertussis is thought to last for 10 years following the last dose. Protection provided by childhood vaccination is most likely expired by the time a woman completes high school, so additional vaccination against pertussis is needed. A small number of people who receive the measles, mumps and rubella (MMR) vaccine can lose its protection after several years if a booster dose is not given. Although having had chickenpox usually provides lifelong protection against recurrences, the length of time that the chickenpox vaccine offers protection is expected to be at least 15 to 25 years. Adolescents and adults who previously received only one dose of chickenpox vaccine should receive another.

Q) You may need to get a tetanus shot if —

- A. you step on a rusty nail.
- B. you are bitten by a dog.
- C. you scratch yourself with a rose bush thorn while gardening.
- D. all of the above

A) D. All of the above. Any contaminated puncture wound, whether from a rusty nail, bite or scratch, may require a tetanus shot if you have not had one within 10 years.



Q) What can the newly developed human papillomavirus vaccine help prevent?

- A. HIV/AIDS
- B. cervical cancer
- C. obesity

A) B. Certain types of human papillomaviruses (HPV), a sexually transmitted disease, cause cervical cancer. The Advisory Committee on Immunization Practices recommends that the vaccine be given to adolescent girls and young women. Vaccination is recommended for girls and women, ages 13 to 26, who have not been previously vaccinated, and at the discretion of their families and doctors, can be administered to girls as early as age 9. The decision about whether to vaccinate a woman aged 19 to 26 should be made based on an informed discussion between the woman and her medical provider regarding her risk of previous HPV exposure and her potential benefit from the vaccination.

Mental Health

Q) What is clinical or major depression?

- A. a personality flaw
- B. part of being a teenager
- C. a treatable medical illness

A) C. Although adolescence can be a very confusing time, severe depression is not a normal part of being a teenager. Treatment can help and may include medicine and therapy.

Q) True or False? There is more than one type of depression.

A) True. Depressive disorders come in many different forms, just as is the case with other illnesses. Three of the most common types of depressive disorders are major depression, dysthymia and bipolar disorder. Major depression interferes with the ability to work, study, sleep, and enjoy once pleasurable activities. A less severe depression, dysthymia is long-term and chronic. While this form of depression does not keep a person from doing their daily routine, it keeps a person from feeling good. Bipolar disorder, also called manic-depressive disorder, is not as common as other forms of depression. A person with bipolar disorder has cycling mood changes, from mania (severe highs) to depression (severe lows).



Q) What are the signs of major depression?

- A. sadness, anxiety or nervousness
- B. change in sleeping and/or eating patterns
- C. feelings of guilt, hopelessness and worthlessness
- D. constant fatigue or tiredness
- E. all of the above

A) E. All of the above. Additional symptoms include irritability, persistent physical problems that do not respond to treatment, difficulty concentrating or remembering and thoughts of suicide. Those with depression also may have difficulty with relationships, abuse substances, or be absent from or perform poorly in school. If you experience at least four of these symptoms for two or more weeks, talk to your family and go to your health care provider right away.

Q) True or False? Teen boys and girls are at equal risk for depressive disorders.

A) False. Boys and girls are equally at risk for depression until adolescence, when girls are twice as likely to develop depression. A parent who experiences depression at any early age increases the risk for childhood depression in their children.

Eating Disorders

Q) What is an eating disorder?

A) Eating disorders are complex, chronic and largely misunderstood and misdiagnosed. The most common eating disorders – anorexia nervosa, bulimia nervosa and binge-eating disorders – are on the rise. No one knows exactly what causes eating disorders. However, all socioeconomic, ethnic and cultural groups are at risk.

Q) What are some factors that can contribute to eating disorders?

- A. low self-esteem
- B. feelings of lack of control in life
- C. depression, anxiety, anger or loneliness
- D. history of physical or sexual abuse
- E. cultural pressures that glorify “thinness” and the perfect body
- F. all of the above

A) F. All of the above. Eating disorders can have many possible causes. People with eating disorders often use food and the control of food to make up for emotions that may be overwhelming. It is a way some people try to cope with painful emotions and to feel in control of one’s life, but in the end, eating disorders will damage a person’s physical and emotional health, self-esteem and sense of competence and control.

Q) Anorexia nervosa is –

- A. a strict diet.
- B. an obsession with weight and an unrealistic body image.
- C. something that can be fixed if you make the person eat.

A) B. Anorexia is basically self-starvation, a refusal to maintain a minimum normal body weight. It is not simply a refusal to eat and it cannot be solved by making the person eat. People with anorexia are obsessed with their weight and think they are fat even though they are often abnormally underweight. People with anorexia also may engage in self-induced vomiting and abuse of laxatives, diuretics or exercise in order to control their weight. The condition may lead them to become thin or even emaciated. In severe cases, anorexia can be life-threatening.

Q) What are some signs of anorexia?

- A. weight loss, sometimes severe
- B. intense fear of gaining weight
- C. distorted body image
- D. all of the above

A) D. All of the above. Despite being unusually thin, those with anorexia believe they are fat and have an intense fear of gaining weight. Anorexia can cause irregular heart rhythms and heart failure, osteoporosis, risk of suicide, menstrual changes or no menstruation periods.

Q) People with bulimia nervosa –

- A. follow a strict diet.
- B. binge and purge.
- C. do not like the taste of food.

A) B. Those with bulimia follow a routine of secretive, uncontrolled eating followed by inappropriate ways of trying to rid the body of food before it is digested. This includes vomiting and /or misuse of laxatives, diet pills, water pills, excessive exercise or fasting. Because many people with bulimia “binge and purge” in secret and maintain normal or above normal body weight, they can often hide the disorder from others.

Q) True or False. Unlike anorexia, bulimia is not harmful?

A) False. Bulimia nervosa can cause electrolyte imbalance, damage of heart muscle, inflammation of esophagus and erosion of tooth enamel.

Q) People with binge-eating disorder –

- A. are usually very thin.
- B. are often overweight.
- C. are incredibly hungry.

A) B. People with binge-eating disorder experience frequent episodes of out-of-control eating, with the same binge-eating symptoms as those with bulimia. The main difference is that individuals with binge-eating disorder do not purge their bodies of excess calories. Therefore, many with the disorder are overweight for their age and height. Those with this disorder often eat when not hungry and in secret. Feelings of self-disgust and shame associated with this illness can lead to bingeing again, creating a cycle of binge eating.

Q) What are the possible health effects of binge eating?

- A. high blood pressure
- B. high cholesterol
- C. heart disease and diabetes
- D. gallbladder disease
- E. all of the above

A) E. All of the above. Binge eating can cause high blood pressure, high cholesterol, heart disease, diabetes and gallbladder disease.

Q) True or False? There is no treatment for eating disorders.

A) False. Eating disorders are most successfully treated when diagnosed early. The longer abnormal eating behaviors persist, the more difficult they are to overcome. In some cases, long-term treatment and hospitalization is required. Presently, there is no universally accepted standard treatment for eating disorders. Ideally, an integrated approach to treatment involves medical care, psychosocial interventions, and nutritional counseling. Certain selective serotonin reuptake inhibitors (SSRIs) have been shown to be helpful for weight maintenance and for resolving mood and anxiety symptoms associated with anorexia. People with eating disorders often do not recognize or admit that they are ill. As a result, they may strongly resist getting and staying in treatment. Family members and other trusted individuals may be helpful in ensuring that the person with an eating disorder receives needed care and rehabilitation.

Sexual Violence

Q) What are date-rape drugs?

A) Date-rape drugs are sometimes used to assist a sexual assault. Sexual assault is any type of sexual activity that a person does not agree to. Because of the effects of these drugs, victims may be physically helpless, unable to refuse sex, and unable to remember what happened. Alcohol is the most commonly used date-rape drug. It is easy to get and is commonly used in socializing. Other common date-rape drugs are GHB (gamma hydroxybutyric acid), ketamine and rohypnol. The drugs often have no color, odor or taste and are easily added to flavored drinks without the victim's knowledge.

Q) What are the effects of alcohol and date-rape drugs on the victim?

- A. less able to protect oneself
- B. impaired judgment
- C. better control of the situation
- D. trouble handling or avoiding arguments

A) A, B and D. Alcohol makes the victim less able to protect themselves, causes impaired judgment and makes the victim more likely to have trouble handling or avoiding arguments. Alcohol can put you at risk for date rape.

Q) True or False? Most rapes are committed by someone the victim does not know.

A) False. In eight out of 10 rape cases, the victim knows the rapist. Most incidents of physical assault or stalking are committed by an intimate partner.

Q) True or False? There are some people who are more vulnerable to or at risk for sexual violence.

A) True. Having an earlier history of sexual violence, being female, being young, abusing drugs or alcohol, engaging in high-risk sexual behavior (multiple sexual partners), being poor, or being an American Indian or Alaskan Native woman increases the risk for sexual violence.

Smoking

Q) When do most women start to smoke?

- A. during college
- B. as a teenager
- C. before age 12

A) B. Women who smoke usually start as teenagers – before high school graduation. The younger a girl starts to smoke, the more likely she is to become addicted to nicotine and continue to smoke into adulthood.

Q) True or False? Second-hand smoke is not dangerous.

A) False. Second-hand smoke contains more than 4,000 chemical compounds. More than 60 of these are known or suspected to cause cancer.

Q) What can smoking do to your body?

- A. Smoking causes injury to your airways and lungs.
- B. Teen smoking slows your lung growth.
- C. Smoking causes lower fertility in women.
- D. Smoking can give you wrinkles.
- E. All of the above

A) E. All of the above. If you smoke, your lungs cannot fight infection well, resulting in injuries to lung tissue. In addition to fertility problems, babies of women who smoke are more likely to be born early. Smoking harms your whole body. It increases the risk of fractures, dental problems, eye diseases and ulcers. It also causes wrinkles.

Q) True or False? Smoking keeps my weight down.

A) False. Many people are afraid to quit smoking because they think they will gain weight. The average weight gain after quitting smoking is 5 pounds. However, people who continue to smoke can gain weight, too. To limit weight gain, eat a well-balanced diet and have low-calorie snacks on hand for nibbling and to keep your hands busy. The health benefits of quitting far exceed any risks from the average weight gain that may follow quitting.

Q) What are some reasons you should quit smoking?

- A. Most teens would rather date a non-smoker.
- B. Your hair will grow faster.
- C. Non-smokers are seen as more mature than smokers.
- D. You will save money.

A) A, C and D. If you need a reason to quit, here are just a few: cigarettes are expensive and unhealthy; most adults view non-smoking young females as being more mature than those who smoke; and most teens would rather date a non-smoker. Only 5 percent of teens think they will still be smoking in five years. Actually, about 75 percent of them are still smoking more than five years later. If you smoke, it will never seem like the right time to quit and quitting will never be easy. If you are interested in quitting smoking call the I-Quit Line at 866-784-8937.

Tips on How to Talk to Your Health Care Provider

Before you go to your health care provider –

- Make a list of your questions.
- Ask a family member or friend to go with you.

If you have medical tests done –

- Ask how and when you will receive your results.
- Ask who will be available to answer any questions and when is the best time to call.

If your health care provider advises you to change your diet or lifestyle –

- Ask how these changes will help you and what will happen if you do not make these changes.
- Ask him/her to be specific about the changes. For example, if the health care provider recommends more exercise, ask what type of exercises and how often you should do them.
- If your health care provider suggests you lose weight, ask how much.
- Ask if there are support groups or programs that you should join.

If your health care provider prescribes medicine –

- Ask why the medicine should be taken.
- Ask how you should take the medicine:
 - With food or without food?
 - Time of day?
 - How much and how often?
 - Can it be taken with other medications?
- Ask about side effects. What should you do if you have side effects?
- Ask how long you should take the medications.
- Be sure to bring a list of all medicines you should take and share it with your health care provider.

If you are treated for a condition –

- Ask how your progress will be monitored: For example, if you take drugs to lower your blood pressure, ask if you should buy a home blood pressure kit to monitor yourself.
- Ask if you should make a chart of your progress and when you should report changes to your health care provider.
- Ask when you should see progress and if you do not, who should you call.
- Ask when you should return to your health care provider to be checked.

Resources

American Cancer Society
800-ACS-2345

American Heart Association
800-242-8721

American Lung Association
800-lungusa

Illinois Department of Public Health
www.idph.state.il.us
888-522-1282

National Center for Injury Prevention and Control
www.cdc.gov
800-CDC-INFO

National Eating Disorder Association
800-931-2239

National Cancer Institute
www.cancer.gov
800-4-cancer

National Institute on Alcohol Abuse and Alcoholism
www.niaaa.nih.gov
301-443-3860

National Institute of Mental Health
www.nimh.nih.gov
866-415-8051

National Osteoporosis Foundation
202-223-2226

National Women's Health Information Center
www.4woman.gov
800-994-9662

U.S. Department of Health and Human Services
www.hhs.gov
866-640-PUBS

U.S. Food and Drug Administration
www.fda.gov
888-INFO-FDA



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Questions about women's health can be directed to

Women's Health~line

888-522-1282

TTY

(hearing impaired use only)

800-547-0466



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