

Chapter 4

Lesson 4 Medical Treatment

Theme: How to Seek Medical Assistance

Lesson Objective:

Students will become familiar with their health care options and will complete a medical history for their portfolios. Students will identify good health habits. (See matrix for Arizona Academic/Adult Standards).

Steps to Follow:

“Good friends are good for your health.” --Irwin Sarason

Introduce lesson with the self-talk litany. Ask how the Big Ideas fit with this lesson.

1. Complete *Locating Medical Treatment S1*.
2. Discuss medical history forms and why it is important to have one completed. Complete *Medial History Form S2*.
3. Ask students what the term “good health habit” means. Complete *Good Health Habits S3* and discuss why these health habits are important. Check responses with those on *Good Health Habits Self-Check Sheet S4*.
4. Discuss what kinds of things create stress. Have students read *Stress and Stressing S5* and then complete the exercises.

Materials:

Locating Medical Treatment S1.
Medial History Form S2.
Good Health Habits S3
Good Health Habits Self-Check Sheet S4.
Stress and Stressing S5
Pencils

Evaluation:

Rubric.

Enrichment:

Instructors may want to have students fill out the DES Application for Child Care Assistance as an enrichment activity. Students may use information from the PDS, developed in Lesson 1 to assist with completing the forms.

Additional health and parenting ideas are discussed in *M2W* Chapter 3.

Research family illnesses. Evaluate personal healthy life style considering family illnesses.

Locating Medical Treatment

S1

1. How much money have I allocated for health care: _____

2. Do I have medical insurance through my family? **YES** **NO**

If yes, what is the name of my insurance company?

Do I have a membership card? **YES** **NO**

3. If I don't have medical coverage through my family, what are my options for medical insurance?

4. What D.E.S. programs in my area are available for medical assistance?

5. How do I access these programs and how do I know if I'm eligible?

6. If I have medical emergency, where can I go?

7. How much will it cost and how will I get there?

8. Do I have any medical condition that would affect my employability?

9. Am I taking any medication/prescriptions? **YES** **NO**

10. How much are my prescriptions monthly and where will I get the \$\$ if I run out of \$\$ for medication?



Medical History Form

S2

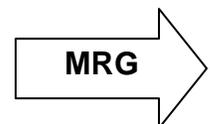
Complete this information and place in your MRG. You will need this when you visit your doctor or emergency room.

Has any member of your family had:

Diabetes	__ Yes	__ No
High blood pressure	__ Yes	__ No
Heart disease	__ Yes	__ No
Cancer of the breast	__ Yes	__ No
Colon	__ Yes	__ No
Other	__ Yes	__ No
Glaucoma	__ Yes	__ No
Arthritis	__ Yes	__ No
Kidney disease	__ Yes	__ No
Gallstones	__ Yes	__ No
Tuberculosis	__ Yes	__ No
Alcoholism	__ Yes	__ No
Suicide	__ Yes	__ No
Mental illness	__ Yes	__ No
Aneurysm	__ Yes	__ No
Seizures	__ Yes	__ No

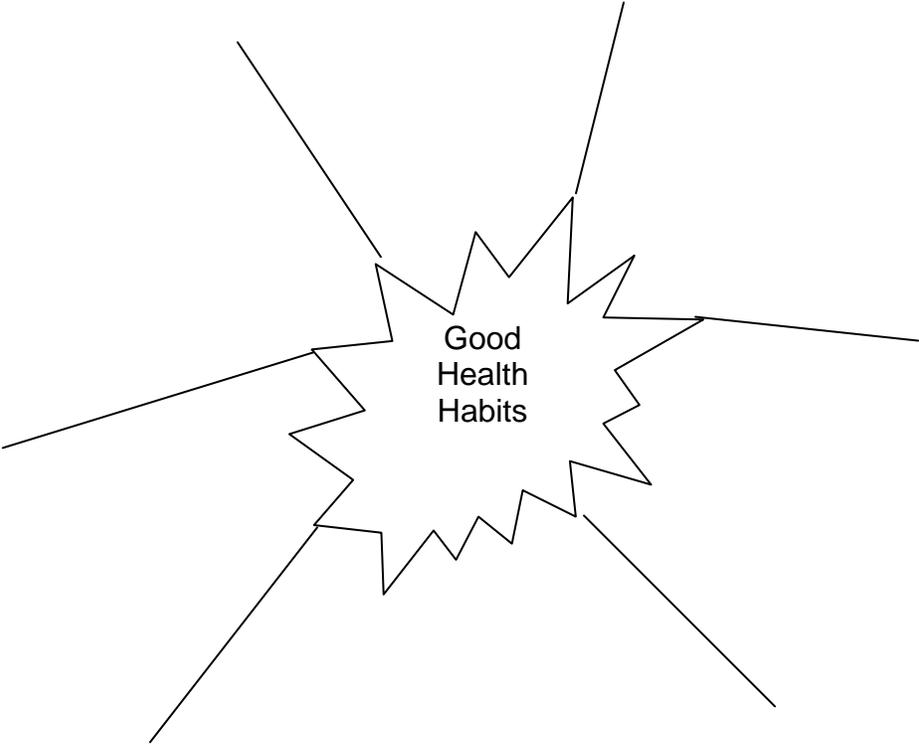


FAMILY MEMBER	IF DECEASED, AGE AT AND CAUSE OF DEATH	IF LIVING, AGE AND HEALTH PROBLEMS
MOTHER		
FATHER		
MATERNAL GRANDMOTHER		
MATERNAL GRANDFATHER		
PATERNAL GRANDMOTHER		
PATERNAL GRANDFATHER		
OTHER FAMILY MEMBER WITH SIGNIFICANT ILLNESS		



Use the web to list at least six good health habits. Start with what you already do.

Check *Good Health Habits Self-Check Sheet S4*. Add habits you may have forgotten.



Good Health Habits –Self Check Sheet

S4

Some habits you may have listed are:

- Practice safe sex
- Control your weight
- Don't smoke
- Get enough sleep
- Protect your skin from the sun
- Exercise
- Take care of your teeth
- Eat a balanced diet
- Manage stress/emotions

Why are these important to maintain good health?

What is one habit you don't currently have but will choose to start?

Will practicing good health habits cut down on your medical expenses? Why or why not?

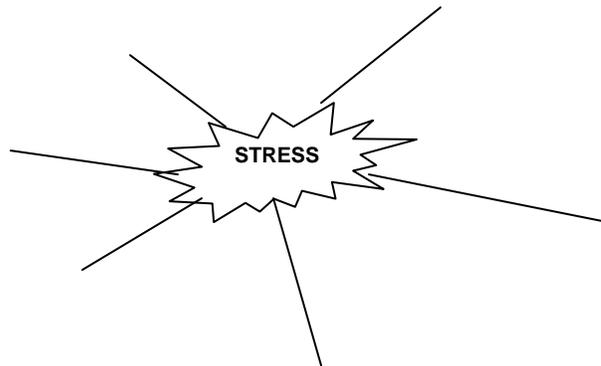
Stress and Stressing

S5

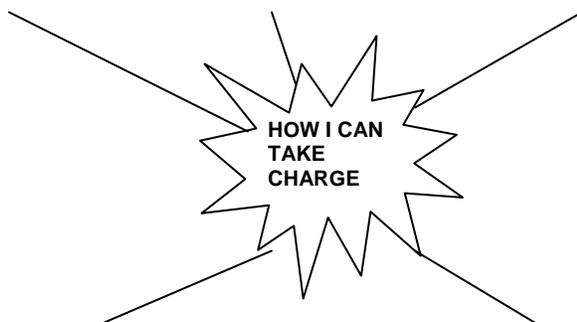
Stress is your own emotional and physical reaction to change. Stress can be a good thing, and can be helpful by motivating you and pushing you into new challenges. It can also be a negative stress, keeping you from doing your everyday tasks well.

Too much stress can cause you to feel tense and anxious and may interfere with your ability to enjoy life. It may also cause illness.

Make a web. On it list at least six things that cause you stress:



Sometimes dealing with stress is to recognize you have to control your life and make choices about all the changes that influence you. Make a web to list some ways you feel you can take charge of dealing with the things causing you stress:



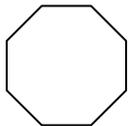
Compare your answers to those on the following lists. You may get some other ideas by comparing your answers to the ones listed below.

Cause of Stress

- Legal problems
- Illness or injury
- Death of a close family member or friend
- Divorce
- Job
- Alcohol or other substance abuse
- School
- Moving to a new place

Taking Charge – How Can I Deal With Stress?

- Don't make too many life changes at one time
- Talk to family or friends about how you are feeling
- Make an action plan to deal with the problem; list one step at a time
- Set realistic goals for yourself
- Practice good health habits
- Relax and take some time for yourself every day



Think About It

What did you think of that isn't on the list?

