



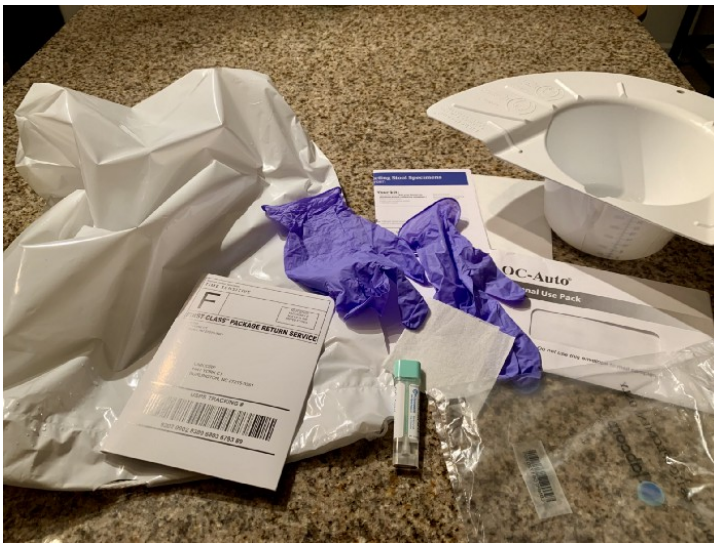
CFlisi

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A Moving Experience: The real poop about US poop testing



by C.Flisi

When I lived in Italy, the letter arrived regularly every other year in my mailbox. It was from the regional *Azienda Sanitaria Locale* (ASL), the regional health office, inviting me to participate in a free screening for

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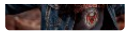


cancer of the colon. The invitation had nothing to do with suspicious symptoms on my part; everyone between the ages of 50–69 received the same letter and the same instructions, with some regional variations.

In Lombardia, we were asked to bring the letter to a local pharmacy, where we would receive a “kit,” consisting of a small plastic tubelike container with a built-in spiral stick and a blank label. A short accompanying note explained that we should use the spiral to take a sample of our feces (only what would stick on the spiral), then close the top tightly, label the container, and bring it back to the pharmacy where we had retrieved it. If we couldn’t return the sample immediately, we were to put the container in the fridge and make sure to bring it back within two days.

From the time we returned it, we might wait several weeks for results. If the diagnosis was negative, a letter in the mail (pre-Covid correspondence was all by snail-mail) would announce that

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fact, congratulating me and reminding me to re-test in two years. I don't know how fast the response was for those who tested positive but the follow-up was supposed to be a personal phone call from ASL and not a letter. The next step would have been a colonoscopy, also absolutely free.

Contrast this with my recent experience in Virginia. I went for my annual "wellness check-up", practically the only thing without cost to the patient in the morass that is Medicare.

(I should say "supposedly" because last year my then-doctor found a way to charge me for it; after four months of phone calls to her office and to Medicare, I gave up and reluctantly paid her. As a result, this year I changed doctors).

The new doctor suggested an FOBT (occult blood, fecal, immunoassay testing). This seemed like a reasonable suggestion, but "How much will it cost? Does Medicare cover this?" I wanted to

know before agreeing, given the outrageous costs of healthcare in the US.

“Medicare covers this test,” the doctor’s office reassured me. So I made an appointment at a nearby laboratory for several blood tests that had been prescribed AND for the FOBT.

The lab seemed competent. They checked my RX against Medicare coverage and told me that one of the doctor’s blood test requests was NOT covered by Medicare and would cost me an additional \$232.00. “Thanks but no thanks,” I told them, grateful for the *a priori* heads-up, but now a little bit nervous about the eventual cost of everything else.

When the blood had been drawn, a nurse came out to the waiting room with a large white plastic bag. What was that about?, I wondered. Peering inside, I saw a large plastic object that — at quick glance — looked like a child’s cowboy hat. Was the lab

sending home a present because I had mentioned grandchildren?



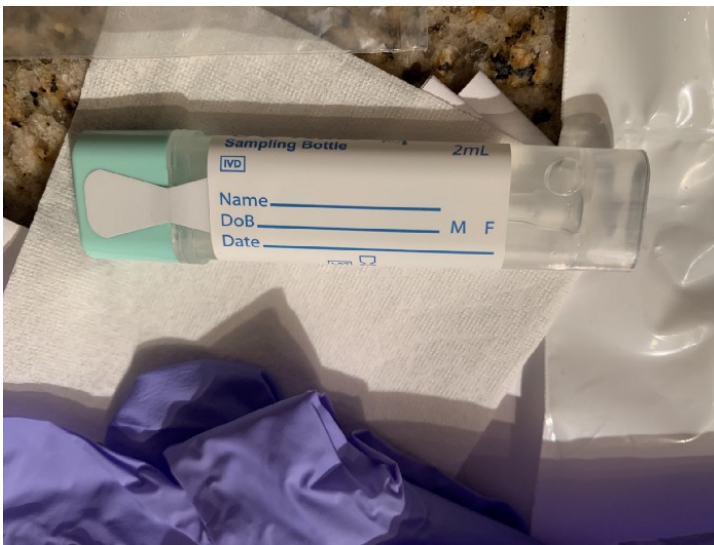
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No, actually. “It’s all part of your FOBT,” said the nurse. “Take it home and read the instructions.” So I did, and noted the inventory:

- large white plastic bag
- large white hard plastic toilet seat half cover. This is what looked like a cowboy hat at first glance
- pair of blue plastic gloves
- transparent sealable bag, called a biohazard bag, for shipping

- pre-stamped, pre-addressed hard-sided mailing envelope
- folded square of tissue-like “collection paper”
- absorbent pad
- sampling bottle with a blank label, similar to the one used in Italy
- copy of the RX sent by my doctor to the lab
- a two-sided instruction sheet with laboriously detailed illustration, in English and Spanish.

First, I had to laugh. Italy had provided a sampling bottle and a short list of instructions. The US lab had foisted 10 items on me, at least half of which were totally unnecessary, and somebody clearly was paying for them. “No wonder US healthcare costs are insane,” I thought.



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Then I wanted to cry. Were Americans so squeamish or stupid that they needed plastic gloves? Wouldn't a few sheets of toilet paper do? Collection paper? No one has tissue at home? The ridiculous toilet seat? My granddaughter took one look and refused to use it for her own needs, although it seemed perfectly suited to toilet training for a two-year-old. Plus these laborious instructions, which also seemed perfectly suited to a two-year-old mentality. They warned me to return the stool sample to the lab immediately! Preferably same day!

I was prepared to do that, but the presence of the pre-stamped envelope

gave me pause. The lab was several miles away and the closest mailbox was a few feet from my front door. So I decided to mail my specimen. For sure it would not arrive same day, but what the hell.

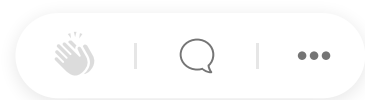
Precisely eight days after mailing, I received an email from the lab informing me that my test results were ready and available on my portal. I logged on and read that my FOBT was negative, so no colonoscopy would be needed. Sigh of relief, not only for the obvious indelicate reasons, but also because that procedure in the US runs between \$3,500–4,000. If you are “high risk,” Medicare covers the entire cost every two years. If you are not considered high risk, you have to wait four years between colonoscopies, not that anyone is eager to shorten the interval.

In keeping with the marvelous (lack of) logic in the Medicare (non) system, should your doctor remove a polyp or suspect tissue during a colonoscopy,

you will be responsible for 20% of the Medicare-approved amount of the doctor's services. You also face copayment costs for the hospital, with the amount depending on a number of variables. And oh yes! Don't do *any* of the above without assurance that your doctor accepts Medicare payments.

In comparison to the US, the Italian system is slow-ish, stripped down to basics, and relies on minimal intelligence in the population it serves. However, it is designed not to bankrupt people for needed services. This can't be done in the US? Oh shit.

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