Teen’s Checklist for **GER** or **GERD**

**Lifestyle and Eating Habits**

If you have Gastroesophageal Reflux Disease (GERD), changes in lifestyle and eating habits may help your symptoms. Place a check mark next to the suggestions you have tried so that you will be able to discuss them with your doctor:

- Ate smaller meals more often.
- Avoided eating or drinking 2-3 hours before bedtime.
- Avoided eating large meals before periods of heavy or stressful activities such as exercise or test taking.
- Elevated the head of the bed with books or bricks about 30 degrees during sleep.
- Avoided tight waistbands.
- Lost weight (discussed with my doctor, if I am overweight).
- Avoided drinking alcohol.
- Avoided cigarettes and all types of tobacco.
- Avoided carbonated drinks, chocolate, caffeine, and foods that are high in fat (For example, pizza and French fries).
- Limited foods that are spicy or contain lots of acid (pickles, tomatoes, citrus).
- Tried gum chewing.
- Drank lots of water when symptoms arose.

Discuss these lifestyle changes with your physician. If the symptoms are severe or continue to bother you even even after the above changes, your physician may also recommend:

- A trial of a medication that decreases acid in the stomach.
- Referral to a pediatric gastroenterologist (a specialist who cares for children with digestive problems).
- Tests to rule out other problems.

Most cases of GERD can be managed by lifestyle changes and/or medications that block or reduce the acid in your stomach.

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**YOUR SOURCE FOR PEDIATRIC REFLUX AND GERD INFORMATION**

[www.TeensAcidReflux.org](http://www.TeensAcidReflux.org) • [www.CDHNF.org](http://www.CDHNF.org) • [www.AAP.org](http://www.AAP.org) • [www.NASPGHAN.org](http://www.NASPGHAN.org)

CDHF National Office: P.O. Box 6, Flourtown, PA 19031
Phone: 215-233-0808

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If your food frequently comes back up from the stomach into the esophagus (the tube that connects the mouth to the stomach), you may have gastroesophageal reflux or GER. If however, you have any of the symptoms listed below, then you may have GERD. In most cases, your symptoms may be controlled by lifestyle changes, but for some teens, medication is needed.

Symptoms of GERD

Place a check mark next to any and all of the symptoms that you are experiencing. Share this information with your doctor. Your description is important to help your physician determine whether you have GERD. Sometimes these symptoms may be associated with GERD, but they can also be caused by other problems. Symptoms of GERD may come and go, and it is unlikely you will have them in the doctor’s office.

• Discomfort or pain in the stomach or chest
  □ Heartburn
  □ Chest pain
  □ Abdominal pain

• Vomiting that contains
  □ Food or stomach acid
  □ Blood (e.g., bright red streaks, blood clots)
  □ Green or yellow fluid

• Eating difficulties
  □ Difficulty or discomfort or pain with swallowing
  □ Sensation that food gets stuck while swallowing
  □ Persistent throat clearing

• Breathing problems
  □ Recurring pneumonia
  □ Difficulty controlling asthma
  □ Chronic coughing (particularly at night time)
  □ Wheezing

• Other
  □ Bad breath
  □ Dental erosions
  □ Sore throat
  □ Hoarseness
  □ Weight loss or poor weight gain
  □ Problems sleeping

IMPORTANT REMINDER: This information from the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN), the Children’s Digestive Health and Nutrition Foundation (CDHNF) and the American Academy of Pediatrics (AAP) is intended only to provide general information and not as a definitive basis for diagnosis or treatment in any particular case. It is very important that you consult your doctor about your specific condition.

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