

Transition Checklist

As you start to plan for adult health care, you will have to learn about your medical condition.

- You will have to develop several skills to help you be more responsible for managing your health.
- The skills listed below are important to help you manage your health as independently as possible.
- Some of these skills may not apply to everyone. The goals are to help each teen reach his or her highest ability.
- Speak with your medical team for any questions or concerns.

KNOWLEDGE	Yes/No/Need to	Comments
Do you know the name of all of your major conditions/illnesses?		
Can you explain each of your conditions in 3 sentences or less?		
Can you explain your physical and cognitive limitations and disabilities?		
Do you know the names of all your medications?		
Do you know the purpose of each medication?		
Do you know the name of each of your specialist providers?		
Do you know the basic function of each specialist provider?		
Do you know your activity and behavior limitations? (running, driving, etc.)		
Do you know how alcohol, drugs, or smoking might interact with your condition and medications?		
Do you know how your condition/medications may affect sexuality and pregnancy?		

BEHAVIORS	Yes/No/Need to	Comments
Do you wear a medical alert bracelet (conditions, allergies)?		
Do you know whom to contact for non-urgent needs (refills, questions etc.)?		
Can you understand a prescription?		
Can you fill a prescription independently?		
Can you make an appointment independently?		
Do you know where to go for emergency care? Where?		
Are you comfortable making major medical decisions?		
Do you communicate independently with your medical team during visits?		
Have you ever met with your medical team alone for part of the visit?		
ADHERENCE	Yes/No/Need to	Comments
Do you know when to take your medications or treatments?		
Do you take your medications or treatments independently?		
Are you currently compliant with medical treatment?		
INDEPENDENCE	Yes/No/Need to	Comments
Have you thought about arranging for the following once you are an adult? Have you started to make these arrangements:		
Living: What are they?		
Finances: What are they?		
Education/vocation: What are they?		
Transportation: What are they?		
Recreation: What are they?		
Have you assessed need for guardianship?		

PLANNING FOR ADULT HEALTH CARE	Yes/No/Need to	Comments
Has your provider discussed your eventual transfer to adult care (practice/department policies)?		
Do you have a plan for adult primary care?		
Do you have a plan for adult specialty care?		
Do you understand your current insurance?		
Do you have a plan for adult insurance?		
Have you thought about government benefits and programs that may be available to you as an adult? (SSI, SSDI, DRS waiver)		
Have you created a Medical Summary? Are you keeping it up to date?		
Do you know your consent and confidentiality rights?		
TRANSFER OF CARE	Yes/No/Need to	Comments
Have you or your current provider transferred your medical records to your adult provider?		

The information included in this document is for informational purposes only and is not intended to substitute in any way for medical education, training, treatment, advice, or diagnosis by a healthcare professional. A qualified healthcare professional should always be consulted before making any healthcare-related decision.