

Transition Assessment for Pediatric Patients with Inflammatory Bowel Disease (IBD)



As you prepare to transition from **pediatric to adult care**, the following questionnaire will help us assess your readiness and how we can support you in becoming confident in participating in your treatment plan.

This is not a test of your knowledge, so there are no right or wrong answers, and you don't pass or fail. Rather this is used as a tool for your current and future healthcare providers to know how to best support you in your healthcare goals, and highlights areas of your care where you may want extra attention and help.

For the questions below, please select your comfort in the following areas.

My IBD knowledge & medications

I CAN...

I cannot / I am not ready to do this.

I can do this with help.

I can, or am ready to, do this on my own.

Name my diagnosis.

Explain the location of my disease.

Fill out a medical history form, and list of my allergies.

Name my medications past and present.

Take my medications, at the right time, using the correct amount (dose).

Remember to refill prescriptions on my own before running out.

Remember what side effects I might have from my medications.

Manage what to do if I am having a bad reaction to my medications.

Managing my IBD

I KNOW...

I cannot / I am not ready to do this.

I can do this with help.

I can, or am ready to, do this on my own.

How to describe my symptoms to my healthcare team.

The foods/activities that make me feel unwell or uncomfortable.

Ways to help myself feel better physically and mentally.

How to read a thermometer.

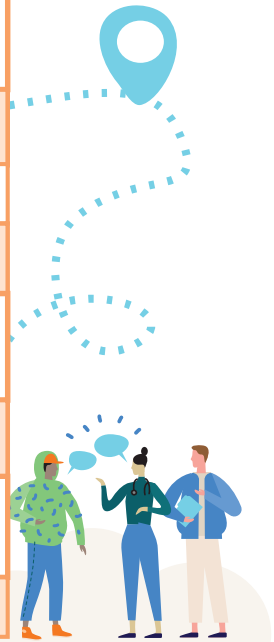
How to keep a stool calendar.

How to keep a pain calendar.



Managing my health & working with my healthcare team

I CAN...	I cannot / I am not ready to do this.	I can do this with help.	I can, or am ready to, do this on my own.
Name my gastroenterologist and IBD nurse and I know how to contact them.			
Call the clinic to make appointments as needed.			
Prioritize which health issues matter most to me and share them with the team.			
Actively participate with my healthcare team when it comes to my care (i.e., asking/answering questions, participating in decision making).			
Share past experiences, both successes & challenges, and talk about what matters to me.			
Communicate honestly and openly with my healthcare team if something is not working or if I'm having trouble with the healthcare plan/treatments.			
Follow-up on any referrals for tests, and check-ups/labs as needed.			



School & social issues

I CAN...	I cannot / I am not ready to do this.	I can do this with help.	I can, or am ready to, do this on my own.
Manage my IBD when away from home (bathroom access, take medications, diet, etc).			
Speak to my healthcare team about how my condition affects my relationships and sexual health (examples: sexually transmitted infections, protection & birth control).			
Speak to my healthcare team about how my condition is impacted by using tobacco, a vape, alcohol, or drugs.			
Talk to my healthcare providers about ways to manage stress.			
Speak to my healthcare providers about how my diagnosis/treatment may impact my future plans.			
Arrange for rides/transportation to medical appointments as needed.			
Plan or prepare my own meals/food.			
Manage my health insurance and know what it covers.			
Manage my money/expenses and know how my medications are paid for.			

Notes

Once complete, please feel free to share this with your adult provider.

For those who are undergoing a gradual transition, this tool can be re-done further along your transition period.



CANIBD. Developed May 5, 2022.

This document was developed through CANIBD and the collaborative efforts of Frost, K, Watson, M, and Swain, A, with support from Amgen Canada.