

ENDOCRINOLOGY & DIABETES UNIT

Endocrine Clinic

Phone: 604-875-2117

Toll-free: 1-888-300-3088, x2117

Fax: 604-875-3231

<http://endodiab.bcchildrens.ca>



DATE: _____

TRANSITION 3: GRADUATION FROM PEDIATRIC ENDOCRINOLOGY
Grades 11-12, 17-19 Years of Age, Youth Focus

ASSESSMENT:

Family members; primary caregiver(s); pets: _____

School, sports, interests: _____

Future plans (job, school): _____

Participation in health care: _____

Other non-endocrine health issues: _____

TOPICS FOR REVIEW:

SUMMARY/NEEDS:

1. _____ Completion of transition process.
2. _____ Role of future specialist and GP in providing care.
3. _____ Condition and management as an adult.
4. _____ Self-care skills.
5. _____ Plan for managing emergencies.
6. _____ Sexual health: future implications: genetics, self-exam.
7. _____ Future sources of information, support groups.
8. _____ Receive appropriate handouts.
9. _____ Referral information: name, contact information for Adult Endocrinologist.

Date: _____ RN Signature: _____