

## **CYSTIC FIBROSIS**

DATE LAST CLINIC VISIT DATE INITIATED DD MM YYYY DD MM YYYY

Preferred Name	Transfer Information Checklist									
Date of BirthPHN#		-				, Jer	st			
Initiating Clinic				been sent the <b>most</b> s (where applicable):	Youth/ Family	amily	Adult Specialist			
Diagnosis Primary		rece	in allaciineni	<b>s</b> (where applicable).	≥ R	Family Practitioner	Spe			
Secondary		Medical Transfer Summary								
Youth Email		<del> </del>	etic Report							
Youth Cell #		Swea	at Test Results							
Mailing Address		DNA	Typing							
		Sput	um culture – m	ost recent						
Preferred Contact			erial Growths							
Phone			nonary function best in past 2 ye	Test - First, best, last						
Emergency Contact (if different)			siotherapy Repo							
Phone		Ches	st CT and xray -	- most recent						
Education		Activ	e Medication Li	st						
Post-Secondary Plans School Work Ot		Gastric Emptying Study								
College/University			Reflux Scan							
Location/City			Abdominal Ultrasound							
Special Considerations			tional Report	nco Tost						
First Nations Status No 🔲 Yes 🖵 Number		Oral Glucose Tolerance Test  Bone density Scan								
Financial/Medication Assistance Yes ☐ No ☐		Blood work – most recent								
Contact										
MSP□ Fair Pharmacare □ Non-Insured Health Bene	efits (NIHB)	Conse	ents							
Extended Health Benefits	, ,	I agree	to be contacted a	bout my transition experi	ence up 1	to five ve	ears			
			aving BC Childre		•	•				
Person with Disability  Disability Tax Credit  RDSP		Youth S	Youth Signature Date							
Adult Health Care Team & Recommendations										
Family Practitioner	Phone		Fre	quency of visits						
Address										
Adult Specialist			Date	of First Visit						
Address				ency of visits						
Adult Specialist			·	of First Visit						
Address				ency of visits						
Youth's strengths and concerns on transfer (to			•							
1 Court a strengths and concerns on transfer (10)	oe completed by	, youlli, p	arenvianiny an	uroi nealth care team)						

Transition Clinical Pathway — User Key Provider Initial in Cl when discussed C - Complete IP - 'In Progress' — content to review at next visit NA Not Applicable' Comments - as required, or expanded in Transition Progress Notes www.ontrabco.a.* The Youth and Family Toolkits provide corresponding ON TRAC learning activities and resources for ALL of the indicators listed on the Transition Clinical Pathway(s).  The Simple Transition Clinical Pathway has been developed for youth who have one chronic health condition without significant cognitive, Physical or emotional special needs. The goal is for youth to be engaged in their transition planning to the best of their ability and capacity' and where needed, assisted by others.  Self-Advocacy  Early Middle  Transfer Adut Care 17:18 yrs 19-24 yrs  Self-Advocacy  Early Middle 12:14/yrs Middle 17:18 yrs 19-24 yrs  Comment Gazen health and question  Practices meeting with practitioners on their own  Can named describe health condition (respiratory germs)  Can named describe health condition (respiratory germs)  Confirms Family Practitioner (FP) and visits at least once a year for primary care: check-ups, referrals, prescription reflect is girbt to privaried glucose tolerance. CF related diabetes and bone health, Lung Transplant)  Describes patients in girbts to privary and information  Understands the risks and benefits of treatment/procedures before consenting  Independent Behaviours / Self-management  Knows allergies to medications, food and/or other  Can name medications, how taken, reasons for them and side effects of and or notway and information  Understands the risks and benefits of treatment/procedures before consenting  Ricover have the medications of the program)  Knows how to access blood test results  Knows early the program of the prog								
C - Complete       P - In Progress — content to review at next visit       N/A - Not Applicable       Comments - as required, or expanded in Transition Progress Notes       Www.Ontracb.ca.2 - The Youth and Family Toolkits provide corresponding ON       TRAC learning activities and resources for ALL of the indicators listed on the Transition       Clinical Pathway(s).    Self-Advocacy		Transition Clinical Pathway – User Key						
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Self-Advocacy   Early   Middle   15-16 yrs   17-18 yrs   19-24 yrs   15-16 yrs   17-18 yrs   19-24 y								
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		Parent & Family Checklist at <u>www.ontracbc.ca</u>		<b>"</b>	<b>–</b>	_		

Transition Clinical Pathway – User Key Provider Initial in □ when discussed C - 'Complete' IP - 'In Progress' – content to review at next visit N/A - 'Not Applicable' Comments - as required, or expanded in Transition Progress No	tos				
Social Supports		45.40	47.40	40.04	Comments
Discusses how parents and others are supporting health and	12-14yrs	15-16 yrs	17-18 yrs	19-24 yrs	
transition		_		_	
Identifies family /friends to talk to about problems or worries					
Describes friendships and peer activities outside of school					
Identifies any risks for bullying (in person or online)					
Identifies if feeling sad, depressed, anxious, hopeless or having					
difficulty sleeping					
Aware of online support groups d/t infection control challenges					
Explores feelings/concerns about transfer to adult care					
Educational/Vocational/Financial Plan	10 14	15 10 · ···	47.40	10.04	Comments
Talks about school attendance, strengths, goals for school	12-14yrs	15-16 yrs	17-18 yrs	19-24 yrs	
and/or concerns	_	_		_	
Understands how condition may affect career choices					
Applies for and obtains Social Insurance Number (SIN)					
Discusses medical/dental/extended health insurance –eligibility					
for CF Grant for travel and medication / PWD					
Discusses working for service hours, volunteering and paid					
employment					
Describes plans for after high school education/work					
Knows where to find information on education/career					
counselling, bursaries or scholarships					
Aware of College/University student services for special accommodation (for assistance, access or illness)					
Knows of items to plan for when moving away for school, work					
or travel (medications & health care)					
Sexual Health					Comments
	12-14yrs	15-16 yrs		19-24 yrs	
Discusses any changes in physical development, body image,					
(menstrual cycle/ yeast infections/ stress incontinence) due to condition or medications					
Identifies who to talk to about sexual health - before becoming					
sexually active	_		-		
Knows how to prevent pregnancy and sexually transmitted					
infections (STIs)					
Discusses condition-specific issues affecting sexual activities,					
fertility (male/ female) and/or child-bearing					
Understands any need for genetic counselling					
Health & Safety	12-14yrs	15-16 yrs	17-18 yrs	19-24 yrs	Comments
Describes regular physical activity and any restrictions due to					
condition (CF infection control policy)	_			_	
Describes healthy weight, special diets or concerns (when to					
increase salt and fluids)					
Discusses interactions of alcohol, drugs or smoking with					
medications and health www.drugcocktails.ca					
Discusses driving and aware of any restrictions					

www.ontrac	bc.ca/ – This website provides corresponding ON TRAC learning
	d resources for <u>ALL</u> of the indicators listed on the
	Clinical Pathway.
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Checklist	Pre-Transfer
	Youth/Family Questionnaires ☐ Confirmed next FP visit ☐ Scheduled Last Pediatric Visit ☐
	Transition Workshop ☐ Booked Appointment(s) to Adult Specialist(s) ☐ Service Application(s) completed ☐
	Post-Transfer
	FP received Transfer Package* ☐ Adult Specialist(s) received Transfer Package * ☐
	Youth attended Adult Clinic – First Visit  Second Visit  Adult Consult Letter back to Pediatric Clinic & FP
	*Transfer Package includes – Medical Transfer Summary, Transition Clinical Pathway and condition-specific documents,
	reports & assessments (as indicated on front sheet).
Initial	Signature / Role
Transition	Dunguyana Matan
Condition-	Progress Notes
specific	Aware of CF Infection control Guidelines, CF History and genotype
Information	
IIIIOIIIIalioii	
Financial/	
Living	
Education/	
Vocation	
Peer	
Support,	
Recreation	
& Leisure	
<b>T</b> /	
Team/	
Adult Care	
Providers	