## Sample Individual Transition Flow Sheet

### Six Core Elements of Health Care Transition 2.0

| Patient Name: __________________________ | Date of Birth: ____________ |
| Primary Diagnosis: _____________________ | Transition Complexity: ____________ |

#### Welcome and Orientation

- Contacted young adult before the first visit to welcome and answer questions ________________

- Transfer package received from pediatric provider ________________

  - Transfer letter
  - Final transition readiness assessment
  - Plan of care, including transition goals and pending actions
  - Updated medical summary and emergency care plan
  - Guardianship or health proxy documents, if needed
  - Condition fact sheet, if needed
  - Additional provider records, if needed

- Orientation material shared with young adult ________________

- Practice policy on transition discussed/shared with young adult ________________

#### Adult Model of Care

- Clarified adult approach to care, including shared decision-making, privacy and consent, access to information, adherence to care, and preferred methods of communication ________________

- If needed and not previously addressed, discussed legal options for supported decision-making ________________

#### Self-Care Assessment

- Conducted self-care assessment ________________ ________________ ________________

- Included self-care goals and prioritized actions in plan of care ________________ ________________ ________________

#### Medical Summary and Emergency Care Plan

- Updated and shared medical summary and emergency care plan ________________ ________________ ________________

#### Transfer Completion

- Communicated with pediatric provider confirming transfer or care and arranging for consultation, if needed ________________

- Elicited feedback from young adult about transition and experience with care ________________

© Got Transition™/ Center for Health Care Transition Improvement, 01/2014 • Got Transition™ is a program of The National Alliance to Advance Adolescent Health supported by U39MC25729 HRSA/MCHB • www.GotTransition.org