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Pediatric to Adult Diabetes Care: Transition Planning Checklist

This checklist helps the health care provider, young adult, and family discuss and plan the change from pediatric to adult health care. While a variety of events may affect the actual timing when this change occurs, below is a suggested timeline and topics for review. The young adult, family, and health care provider can obtain a copy of this checklist and access many online transition resources at the NDEP website (www.YourDiabetesInfo.org/transitions).

• 1 to 2 years before anticipated transition to new adult care providers

- Introduce the idea that transition will occur in about 1 year
- Encourage shared responsibility between the young adult and family for:
 - Making appointments
 - Refilling prescriptions
 - Calling health care providers with questions or problems
 - Making insurance claims
 - Carrying insurance card
 - Reviewing blood sugar results with provider between visits
- Discuss with teen alone: *
 - Sexual activity and safety
 - How smoking, drugs, and alcohol affect diabetes
 - How depression and anxiety affect diabetes and diabetes care

• 6 to 12 months before anticipated transition

- Discuss health insurance coverage and encourage family to review options
 - Assess current health insurance plan and new options, e.g. family plan, college plan, employer plan, and healthcare.gov
 - Consider making an appointment with a case manager or social worker
 - Discussion of career choices in relationship to insurance issues
- Encourage family to gather health information to provide to the adult care team (*See Clinical Summary for New Health Care Team at www.YourDiabetesInfo.org/transitions*)
- Review health status: diabetes control, retina (eye), kidney and nerve function, oral health, blood pressure, and lipids (cholesterol)
- Discuss with teen alone: *
 - Sexual activity and safety
 - Smoking status, alcohol, and other drug use
 - Issues of independence, emotional ups and downs, depression, and how to seek help

• 3 to 6 months before anticipated transition

- Review the above topics
- Suggest that the family find out the cost of current medication(s)

- Provide information about differences between pediatric and adult health systems and what the young adult can expect at first visit
 - Patient's responsibilities
 - Other possible health care team members such as a registered dietitian or diabetes educator
 - Confidentiality/parental involvement (e.g., HIPAA Privacy Act and parents need permission from young adult to be in exam room, see test results, discuss findings with health care providers), health care proxy
- Help identify next health care providers if possible or outline process
- Discuss upcoming changes in living arrangements (e.g., dorms, roommates, and/or living alone)
- **Last few visits**
 - Review and remind of above health insurance changes, responsibility for self-care, and link to online resources at www.YourDiabetesInfo.org/transitions
 - Obtain signature(s) for release for transfer of personal medical information and for pediatric care providers to talk with the new adult health care providers
 - Identify new adult care physician
 - If known – request consult (if possible) and transfer records/acquire hard copy of most recent records
 - If unknown – ask teen to inform your office when known to transfer records and request consult
 - Review self-care issues and how to live a healthy lifestyle with diabetes
 - Medication schedules
 - Self-monitoring of blood glucose schedule
 - Importance of managing diabetes ABCs (A1C, blood pressure, cholesterol)
 - Meal planning, carb counting, etc.
 - Physical activity routine and its effects on blood glucose
 - Crisis prevention-management of hypoglycemia (low blood glucose), hyperglycemia (high blood glucose), and sick days
 - Need for wearing/carrying diabetes identification
 - Care of the feet
 - Oral/dental care
 - Need for vision and eye exams
 - Immunizations
 - Staying current with the latest diabetes care practice and technology
 - Preconception care (preparing for a safe pregnancy and healthy baby)
 - Discuss with teen alone: *
 - Sexual activity and safety
 - Screening and prevention of cervical cancer and sexually transmitted infection
 - Risk taking behaviors, e.g. tobacco/alcohol/drug use
 - Consider ongoing visits with current diabetes educator as part of transition
 - Suggest options for a diabetes “refresher” course

* For more information on addressing psychosocial issues in adolescents, see the [HEEADSSS assessment](#).

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