

INFLAMMATORY BOWEL DISEASE CENTRE CENTRE DES MALADIES INFLAMMATOIRES DE L'INTESTIN

PATIENT SELF-MANAGEMENT CHECKLIST

12-14 YEARS

You are at the center of our healthcare team and your involvement is important to us. Managing your Crohn's disease/ulcerative colitis is important to living well. We believe that gaining knowledge, skills and confidence in your Crohn's disease/ulcerative colitis will help as your life changes over the next years ahead. One of the changes ahead and an eventuality is that your care will be transferred to an adult health care provider at 18 years of age. Before transitioning from the CHEO IBD Centre to adult care, we think we could start using this time to understand what you know and what you might like to know about managing your Crohn's disease/ulcerative colitis. We developed the following questionnaire to help us know what we could help with. So, please answer to the best you are able. Thank you.

Name:	ID#:	 Date:		
WHAT I KNOW ABOUT MY IBD		Yes, I can do this on my own	I can do this with some help	No, I can't do this
I can name my diagnosis.				
I can explain where my disease is located.				
I can explain how IBD affects me on a daily basi	is.			
I know how I feel when my disease is active.				

MAKING MEDS WORK FOR ME	Yes, I can do this on my own	l can do this with some help	No, I can't do this
I can name my medications and/or treatments.			
I know when to take my medications and how much.			
I know what side effects I might have from my medications.			
I can describe what I do to help me to remember to take my medications.			

STAYING ON TRACK AND MANAGING MY IBD	Yes, I can do this on my own	l can do this with some help	No, I can't do this
When I have symptoms, I know how to describe them to my doctor and healthcare team.			
I can list the foods and/or activities that may make me feel bad or uncomfortable.			

I know the things to do to feel better (heating pad, hot bath, relaxation).		
I know how to read a thermometer.		
I know how to keep a stool calendar at appropriate time.		
I know how to keep a pain calendar.		

MANAGING MY HEALTH	Yes, I can do this on my own	I can do this with some help	No, I can't do this
I can prioritize which health issues matter most to me and share them with the team.			
I am an active team player when it comes to my care (asking questions, taking part in decision-making, contribute to my health care plan)			
I share past experiences, both successes and challenges and share what matters most to me.			
I am honest and communicate openly and tell the team about what is not working or if I'm having trouble with the health care plan.			

WORKING WITH MY IBD TEAM	Yes, I can do this on my own	l can do this with some help	No, I can't do this
I can name my gastroenterologist and IBD nurse			
I can answer at least one question during medical appointments.			
I am comfortable asking questions at my clinic visit.			
I can ask at least one question during my healthcare visit			
I am comfortable telling the team when I have trouble following a treatment plan or think that something isn't working for me.			

SCHOOL/SOCIAL ISSUES	Yes, I can	I can do	No, I
	do this on	this with	can't do
	my own	some help	this
I can manage my IBD when away from home (bathroom access, take medications, diet, etc).			

COMMENTS:

