CHEO

PATIENT SELF-MANAGEMENT CHECKLIST

## **17 YEARS**

You are at the center of our healthcare team and your involvement is important to us. Managing your IBD is important to living well. We believe that gaining knowledge, skills and confidence in your IBD 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 IBD. 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	2:				
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 tell others what my diagnosis is							
I can explain where my disease is located							
I can explain how IBD affects my digestive system							
I can explain how IBD affects the rest of my body							
I carry medical information about my disease and m wallet or backpack	nedications with me in my						
I know which websites and books I can use to get c disease	redible information on my						

MAKING MEDICATIONS WORK FOR ME	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 medications and/or treatments			
I know when I take medications and how much			
I know why I take each medication			
I know what side effects I may expect from my medications			
I can describe how I remember to take my medications			
I can contact the pharmacy (by phone or smartphone app) to get refills on my medication			

MAKING MEDICATIONS 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 prepare my medication in advance to accommodate trips, vacations, overnights			
I can make changes to my medication as recommended by my gastroenterologist			
I know what will happen to me if I don't take my medications correctly.			
I know what medications I cannot take because they might interact with the medication I already take or might make my disease worse			

STAYING ON TRACK AND MANAGING 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 tell when I'm having a flare-up or when I need to go to see a doctor			
I can describe what can trigger a flare-up			
I can list the foods and/or activities that make me feel bad or uncomfortable			
I know what medications and treatments I can use if I have pain			
I know how to get in touch with the Gastroenterology nurse if I have questions or problems			
I know the names and purposes of routine tests			
I know how to read a thermometer			
I know how to keep a stool calendar			
I know how to keep a pain calendar			

MANAGING MY HEALTH	Yes, I can do this on my own	l 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 healthcare plan			

WORKING WITH MY IBD TEAM	Yes, I can do this on my own	I can do this with some help	No, I can't do this
I can tell others the name of my gastroenterologist			
I can schedule a follow up medical appointment with my gastroenterologist			
I <b>ask</b> questions during medical appointments			
I answer questions during medical appointments			
I feel comfortable talking with my doctor/nurse if I don't like a treatment or (will) have trouble following it			
I feel comfortable asking my doctor/nurse why tests are required, whether there are other treatment options, the benefits and harms of various options, and the likelihood of them happening to me			
I tell my doctor/nurse if I don't understand what they are talking about during medical appointments			
I know what other health services are available to me (e.g. social worker, dietician, psychologist, family doctor)			

SOCIAL ISSUES	Yes, I can do this on my own	l can do this with some help	No, I can't do this
I can describe the impact of alcohol, smoking and drugs on my condition			
I know how my disease and/or treatment may impact my sexual health			
I can communicate the length of insurance coverage under my parents' health insurance plan and the necessary steps to maintain coverage			
I know how to balance social life with school and health care management			

## COMMENTS:

Prepared in collaboration with the TRACC Network

