



AAP Transition ECHO Case Presentation Form

PLEASE NOTE that Project ECHO® case consultations do not create or otherwise establish a provider-patient relationship between any clinician and any patient whose case is being presented in a Project ECHO® setting. Do not share any confidential patient information (name, etc.) when identifying your patient during clinic.

Case Number: Click or tap here to enter text.

Please choose one or two challenges from the list below that your practice has when implementing a health care transition process for youth and young adults. Describe the problem and lessons learned, including what worked and what did not.

1. **Starting and/or implementing HCT Quality Improvement process.** Yes No
 - a. **What is the issue? Any lessons learned so far?** Click or tap here to enter text.
2. **Engaging adult providers to partner in caring for your youth and young adults with epilepsy.** Yes No
 - a. **If yes, what are the challenges? Any lessons learned so far?** Click or tap here to enter text.
3. **Creating and/or sharing a consistent transition policy within your practice?** Yes No
 - a. **If yes, what is the challenge? Any Lessons learned so far?** Click or tap here to enter text.
4. **Creating and utilizing a standardized self-care assessment tool with youth and parents or a self-assessment tool with young adults within your practices?** Yes No
 - a. **If yes, what are the barriers? Any lessons learned so far?** Click or tap here to enter text.
5. **Incorporating needed self-care skills into youths' and young adults plan of care or problem list within your practice?** Yes No
 - a. **If yes, are there specific barriers to doing this? Any lessons learned so far?** Click or tap here to enter text.
6. **Gathering the transfer information for youth leaving your practice and/or welcoming young adults into their new adult clinician's office?** Yes No
 - a. **If yes, what are the barriers? Any lessons learned so far?** Click or tap here to enter text.

7. **Other challenges you would like to see addressed in HCT process part of your clinic process?** [Click or tap here to enter text.](#)