# PLAN OF CARE

## YOUNG ADULTS WITH NEUROLOGIC DISORDERS

**Instructions:** This plan of care is a written document developed jointly with the transitioning youth to establish priorities and a course of action that integrates health and personal goals. Information from the transition readiness assessment can be used to guide the development of health goals. The plan of care should be updated regularly and sent to the new adult provider as part of the transfer package.

Adapted from [www.gottransition.org](http://www.gottransition.org)

**Patient Name:**

**Date of Birth:**

**Primary Diagnosis:**

**Secondary Diagnosis:**

## WHAT MATTERS MOST TO YOU AS YOU BECOME AN ADULT?

<table>
<thead>
<tr>
<th>Prioritized Goals</th>
<th>Issues of Concerns</th>
<th>Actions</th>
<th>Person Responsible</th>
<th>Target Date</th>
<th>Completed Date</th>
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Initial Date of Plan: __________

Last Updated on: __________

**Parent/Caregiver Signature:** ____________________________________________

**Clinician Signature:** ____________________________________________

**Care Staff Name and Contact Information:** ____________________________________________