



Stanford
Children's Health

Lucile Packard
Children's Hospital
Stanford

Building Independence

A Resource Guide for Teens and Young Adults with Diabetes

Revised 1/2017

Stanford Children's Transition Resource Guide

This resource guide has been created to supplement our transition program.

The policy at Stanford Children's is that patients are followed until the age of 18-21. Between the ages of 18 and 21, you will transition to seeing an adult endocrinologist. If you have California Children's Services (CCS), you can be seen until you turn 21 as CCS will cover your visits through your 21st birthday and many adult doctors do not accept CCS. We want to make the sometimes challenging task of transferring diabetes management in the pediatric world to an adult care provider a more smooth transition. We feel it is important to start discussing this transition early so that you will know what to expect and have the knowledge that you will need to stay healthy before you age out of our pediatric practice.

Now that you are becoming older and more independent, you may be starting to think about your future and this is also a good time to start thinking about becoming more independent with your diabetes care. We want to see you take control of your diabetes and not let it control you. We understand how difficult diabetes can be and are here to help.

We are very excited to be building our transition program for you and we welcome your feedback!

Please call the diabetes center at 650-721-1811 if you have any questions or comments about our transition program. We look forward to talking about transition with you!

Sincerely,
Stanford Children's Diabetes Center Staff

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Diabetes Skills Checklist

By the time you transition to adult care and/or go off to college or live on your own, there are some skills you should feel comfortable with. Please review this list, and talk to your doctor or diabetes educator if you have questions about any of the following:

Diabetes Management Skill	Yes-I know this!	I'm working on this...	I have a question about this...
Diabetes Basics			
I know what type of diabetes I have			
I know that I should wear a medical ID bracelet or necklace or carry a medical wallet card at all times			
I know what the A1C is, and what my target A1C is			
I know how to manage my diabetes when I am sick			
I know how to manage my diabetes when I am traveling			
I know how to contact the diabetes clinic			
I know how to tell someone about my medical history and the names of all medications I take			
Insulin			
I know how insulin works to lower my blood sugars			
I know what can happen if I don't take my insulin, and how to prevent DKA			
I know how much insulin to take and when to take it			
I know how to store my insulin and dispose of sharps			
I know how to draw insulin out of a vial or prime a pen			
If on pump--I know how to insert my pump infusion set			
If on pump—I know how to program my pump			
Low and High Blood Sugars			
I know symptoms of low blood sugars, and how to treat a low blood sugar using rule of 15			
I am comfortable showing others how to use glucagon			
I know symptoms of high blood sugars and when to check for ketones, and what to do if I have ketones			
I know how to review my blood sugars and look for patterns			
If on CGM—I know how to insert my sensor			
If on CGM—I know how to use my sensor data			
Food and Exercise			
I know how exercise affects my blood sugars			
I know how to manage my diabetes before, during, and after exercise			
I know how to count carbohydrates			
I know what resources I can use to find carbs in foods			
Risky Behaviors			
I know when it is unsafe for me to drive, and the importance of checking my blood sugar before driving			
I know the effect alcohol, smoking, and drugs can have on my body and how my blood sugars could be affected			

I understand consequences of unprotected sex, and know that a healthy pregnancy must be planned			
I know how I might feel if I were depressed, and what resources I can use if I'm feeling this way			
Diabetes Management Skill	Yes-I know this!	I'm working on this...	I have a question about this...
I can explain possible long-term complications of uncontrolled diabetes, and know about screening tests			
Transition Skills			
I know how to make a doctor's appointment, how often I should be seen, how to reach my doctor in an emergency, and I understand I need a primary care doctor			
I know how to order all of my diabetes supplies and to request refills before I run out of supplies			
I know that I need health insurance and should always bring my insurance card and meter to the doctor's office			
I know the differences between pediatric and adult care			

Additional Checklists:

NDEP Pediatric to adult diabetes care transition planning checklist

<http://ndep.nih.gov/media/NDEP-Transitions-Planning-Checklist-508.pdf>

Endocrine Society Transition Toolkit

<http://www.endocrinetransitions.org/type-1-diabetes/>

Questions or Concerns:

Diabetes Supply Checklist....

Make sure you keep all of your diabetes supplies on hand!

- **Insulin (s)**
- **Oral medications if needed**
- **Pen needles and/or syringes**
- **Glucose meter and back up meter**
 - **Extra batteries for meter**
 - **Can request cable/software to download meter**
- **Test strips**
- **Lancing device (finger poker)**
- **Lancets**
- **Sharps container**
- **Ketone strips**
- **Alcohol wipes**
- **Glucagon kit (s)**
- **List of emergency phone numbers**
 - **Parents or guardian's numbers**
 - **LPCH emergency number: 650-497-8000**
 - **LPCH diabetes center number: 650-721-1811**
 - **Number of closest hospital**
 - **911**
 - **My pharmacy phone # _____**
- **Copy of insurance cards**
- **Diabetes ID (medical alert bracelet or necklace or wallet card)**
- **Glucose tablets, juice box, etc for low blood sugars**
- **Snacks**
- **Other health supplies:**
 - **Thermometer**
 - **Tylenol, Motrin, Benadryl, cold/allergy meds, etc**
 - **First-aid kit, band aids, Neosporin, etc**
 - **Sugar-free cough drops**
- **If you are on an insulin pump, you need ALL of the above, plus:**
 - **Sets/tubing or pods**
 - **Tape/dressings if used**
 - **IV prep, skin tac, unisolve, detachol, etc if used**
 - **Reservoir or cartridges**
 - **Record of current pump settings**
 - **Pump manual**
 - **Pump company phone # _____**
 - **Extra batteries or charging cables**
 - **Can request cable/software to download pump**
 - **List of phone numbers for pump supply provider and know how to order if getting low on your supplies**

Diabetes Apps



Insulin Calculator This app allows you to enter your carb and correction ratios and tells you your insulin dose based on your blood sugar and carbs.



MediSafe Medication Reminder Set reminders to help you remember to take your insulin and/or pills. Can also set reminders for ordering prescription refills.



Glooko This app allows you to download your glucometer to a phone or tablet.



My Sugr This app allows you to track your blood sugar, carbs, and insulin and creates reports of this data.



Calorie King The CalorieKing Food Database is one of the most complete.



Figwee Portion Explorer Great carb counting resources that shows pictures of portion sizes.



Lose It! This app helps with carb counting and has many foods in the database. You can also enter a recipe to get the nutrition information for foods you make from scratch.



My Fitness Pal Reach your weight loss goals with MyFitnessPal. Set a daily calorie goal, then record your daily food and exercise to make sure you stay on track. Can also be used to help with carb counting with a large food database and barcode scanner.



Fooducate This app helps you choose healthy items at the grocery store. You can scan barcodes, search for products, and browse categories to find foods you're shopping for.



Workout Trainer

This free app features workouts led by personal trainers. The exercises, which don't require you to use any equipment, include step-by-step photos, videos, and audio.

Glucagon 

Glucagon for Injection (rDNA origin)
1 mg (1 unit)

Glucagon app by Lilly Diabetes Interactive app that reviews how to administer glucagon. Currently only available on apple products.

Diabetes Resources

Stanford Children's Diabetes Center
650-721-1811

Doctor on Call
650-497-8000

Website
<http://dped.stanford.edu/>

Diabetes Info

Barbara Davis. <http://www.barbaradaviscenter.org/> Under online books: you can read "Understanding Diabetes" and "Understanding Insulin Pumps & Continuous Glucose Monitors" free of charge

Juvenile Diabetes Research Foundation. www.jdrf.org

American Diabetes Association. www.diabetes.org

Glucagon Training Video. http://www.humalog.com/include/glucagon_video.jsp

Transition Resources

National Diabetes Education Program. <http://ndep.nih.gov/transitions/ResourcesList.aspx>

Health Care Transitions (University of Florida Research).
<http://hctransitions.ichp.ufl.edu/hct-promo/>

Got Transition. <http://www.gottransition.org/youth-information>

We're Talking: Teen Health from PAMF. <http://www.pamf.org/teen/>

Stanford Children's Guide to Turning 18.
<http://www.stanfordchildrens.org/content-public/pdf/transitioning-adult-care.pdf>

College and Diabetes:

College Diabetes Network. <http://collegediabetesnetwork.org/> Many colleges have campus chapters. Lots of great information and resources for before and after you get to school.

Students With Diabetes. Some colleges have local chapters. This organization also has an internship program, blog, research, and hosts conferences. www.studentswithdiabetes.com

Diabetes Blogs:

Type 1 Nation: A community for young adults with diabetes. www.typeonenation.org

D Life <http://www.dlife.com/>

TuDiabetes

www.tudiabetes.org/group/youngadults
<http://www.tudiabetes.org/group/collegestudentswithdiabetes>

Glu. <https://myglu.org/>

Troubleshooting Ketones

What are ketones?

Ketones are a side product of your body burning fat and muscle for energy because it can't get sugar out of the blood.

What causes your body to make ketones?

- 1) Missing insulin injections
- 2) Not eating (can get starvation ketones when ill)

Why are ketones bad?

Ketones create acid. When the acid builds up in your blood, you can get very sick and can end up in DKA (Diabetic Ketoacidosis).

What are symptoms of ketones?

High blood sugars that won't come down, vomiting, upset stomach, difficulty breathing, dehydration, fruity smell on the breath

How are ketones treated?

Ketones are treated with fluids and extra insulin. However if you become dehydrated and have large ketones, you may need to come into the hospital for IV fluids and IV insulin.

Urine Ketones	Blood Ketones	What to do
Negative	< 0.6 mmol/L	Normal schedule and activities
Trace or Small (15 mg/dL)		Drink extra water and recheck in 2 hours. Rest - no exercise until ketones are gone.
Moderate (40 mg/dL)	0.6 - 1.5 mmol/L	Call your diabetes team at 650-497-8000 and ask for the Diabetes doctor on call. They will help you give extra insulin and fluids. Rest - no exercise.
Large (80 mg/dL)	1.6 - 3.0 mmol/L	Call your diabetes team at 650-497-8000 and ask for the Diabetes doctor on call. They will help you give extra insulin and fluids. Rest - no exercise.
	> 3.0 mmol/L	Call your diabetes team at 650-497-8000 and ask for the Diabetes doctor on call. The doctor will decide if you need to go to the ER.

remember that once you open a bottle of urine ketone strips it is only good for 6 months

When should you check for ketones?

- 1) If you have 2 unexplained blood sugars >250mg/dL
- 2) If you are sick or vomiting
- 3) If you missed your lantus or levemir
- 4) If your insulin pump is not working

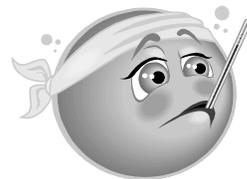
Sick Day Guidelines

If you are sick:

- Drink 8 ounces calorie-free fluid every hour while awake to prevent dehydration (water, diet soda, broth, sugar-free Kool Aid). Fluids should be caffeine-free.
- Increase frequency of blood glucose monitoring to every 2-4 hours.
- Monitor for ketones every 4 hours.
- Record your results from monitoring.
- Do NOT skip your long acting insulin (lantus or levemir or NPH).
- You still may need to take your fast acting insulin and/or oral medications even if you are not eating, but you may need to make a change in the amount that you are taking. Call your doctor if you are not sure how much insulin to take.
- Extra doses of fast-acting insulin may be needed.

If you cannot eat because of nausea or cannot keep food down and your blood sugar is less than 180 mg/dl:

- Sip on carbohydrate containing beverages/soft foods to prevent hypoglycemia (regular soda, juices, soups, ice cream)
- Acceptable foods that contain 15 grams of carbohydrate:
 - ½ cup (4 oz) apple juice
 - ½ cup (4 oz) regular soda
 - 1 cup Gatorade
 - 1 regular Popsicle stick
 - 5 lifesavers candies
 - 1 slice dry toast
 - 6 saltines
 - ½ cup regular ice cream
 - ¼ cup sherbet
 - ¼ cup regular pudding
 - ½ cup regular jello



When to call your doctor:

- Moderate or large ketones (or >0.6 on the blood meter)
- Vomiting more than once
- Diarrhea more than 5 times or more than 6 hours
- Difficulty breathing or “deep breathing”
- Change in mental status
- 2 consecutive blood sugars greater than 250 mg/dL even after giving extra insulin
- If you ever have any questions or concerns

Diabetes Screening Labs

Autoimmune Disorders: Autoimmune is when the body turns against itself. The immune system mistakenly attacks and destroys body tissue. People with Type 1 Diabetes have an increased risk of developing another autoimmune disorder.

Thyroid Function- TSH, FT4, and thyroid antibodies. The thyroid is a gland in the lower front of the neck. The thyroid gland helps control heart rate, metabolism, temperature control. Thyroid disorders include hypothyroid (underactive) and hyperthyroid (over active). Hypothyroid is more common. Approximately 30 % of patients with diabetes will develop thyroid disorder over their lifetime.

Celiac – Celiac Disease is an autoimmune disease that damages the villi of the small intestine. This interferes with the body's ability to absorb nutrients into the bloodstream and can cause malnourishment. When people with celiac disease eat foods containing gluten (found in wheat, barley and rye), their immune system responds by damaging the finger-like villi of the small intestine. We screen with a blood test (tissue transglutaminase), and if levels are found elevated, then we refer to Gastroenterology. Some people experience no symptoms with Celiac, while others may have abdominal pain, gas, and diarrhea. Approximately 10% of patients with Type 1 Diabetes will develop Celiac Disease.

Vitamin D- Important for strong bones and supports a healthy immune system. Foods rich on vitamin D include fish (sardines, salmon tuna), egg yolks, vitamin D-fortified milk, vitamin D-fortified orange juice, cereals, yogurt and cheese. Supplements come in chewable and pill form and can be found over-the-counter.

Kidney Function-Urine sample testing the microalbumin (protein) and creatinine. Large amounts of protein in the urine could indicate early kidney damage. Ratio of Microalbumin/creatinine should be less than 30. If levels are greater, then we will request a first morning urine sample to be collected and tested. If levels remain elevated, then we refer to a Nephrologist (kidney specialist).

Lipid Panel- This looks at the different types of cholesterol or fat level in the blood. High levels can contribute risk for heart disease and stroke. We do not usually obtain fasting levels (nothing to eat within the last 8-12 hours) unless previous levels have been significantly elevated.

- Total Cholesterol= the sum of the different types of cholesterol
- HDL- High Density Lipoprotein= “good cholesterol”. Carries cholesterol to the liver to be eliminated.
- LDL-Low Density Lipoprotein= “bad cholesterol”. Clogs arteries and increases risk for heart disease.
- Triglycerides-can clog vessels over time.

Yearly tests not provided at our office:

Ophthalmologist- Doctor that specializes in eye disease that can perform a dilated “diabetic” eye exam. This screens for retinopathy which is small changes to the blood vessels in the back of the eye. These changes can occur over time due to poor blood sugar control. *You should have a regular eye doctor and have this test done every year!*

Staying Safe With Diabetes

Driving

Checking blood sugars before driving is VERY important. Your vision, reaction times, and ability to make good decisions can all be affected if your blood sugar is too high or too low. Driving with a low blood sugar is equivalent to driving drunk. Your blood sugar should be above 100 before you start driving. If you are driving for long periods of time, you should stop and check your blood sugar every few hours. If you cause an accident because of a low or high blood sugar (or if you did NOT check) you can be held responsible. If you are driving and not feeling well, be sure to pull over and check your blood sugar. Keep snacks to treat low blood sugar in the car and be sure to have a medical ID or wallet card in case of emergency.

Tattoos and Piercings

It is very important to be sure your blood sugars are not running high if you decide to get a tattoo or piercing. High blood sugars can increase the risk of infection and may prevent the tattoo or piercing from healing properly. If you decide to get a tattoo or piercing, be sure to go to a reputable establishment that will follow the correct procedures. It is recommended to have an A1C less than 10% before you get a tattoo or piercing. If you get a tattoo or piercing, check blood sugars frequently afterwards. If you have high blood sugars, ketones, fever, or notice redness, swelling, pain or pus, seek medical treatment as these can be signs of infection.

Smoking

It is recommended that people with diabetes avoid smoking (as well as other tobacco products). Smoking itself can contribute to higher blood sugar levels due to the cortisone response caused by nicotine. People who have diabetes and smoke also have a much higher risk of having heart disease (some studies have found the risk tripled in smokers with diabetes!). Smoking can also increase the risk of other complications and may make treatment more challenging. If you are smoking, we recommend that you try to quit. Smokefree.gov is a great resource.

Illicit Drug Use

Drug use itself is not believed to directly affect blood sugars, but it will affect your ability to make decisions and may affect your appetite. If you are not in your right frame of mind, you will not be able to properly care for your diabetes. You may not be able to feel a low blood sugar or make safe decisions about insulin dosing. We recommend that all young adults avoid drug use.

Disordered Eating

Eating disorders are more common in young adults with diabetes than in the general population. If you are using unhealthy methods to lose weight (such as laxatives, restricting food, over exercising, purging, misuse of insulin, etc) you should discuss this with your doctor. Complications of eating disorders can be fatal, and if you are struggling with an eating disorder, you are not alone and you can get help.

Sex

Sex can be risky even without diabetes, so be sure to use condoms every time. You can get free or reduced price condoms at your local health department. Women with diabetes should be on birth control as unplanned pregnancy can result in complications. Women with diabetes can have healthy pregnancies by ensuring they are taking good care of their diabetes before trying to get pregnant. Women should also be aware that high blood sugars can contribute to UTI or yeast infections. Men can experience impotence (erectile dysfunction) if their blood sugars are running high. Talk to your doctor if have symptoms of UTI/yeast infections or erectile dysfunction.

Drinking Alcohol

The decision to drink alcohol is one that must be taken very seriously.

Please remember that the legal drinking age is 21, and if you are caught drinking and you are not yet 21, there may be consequences that you will have to face from that decision.

If you do decide to drink, drink responsibly. DO NOT drink alone. NEVER EVER drink and drive. Always have a plan for how you and your friends will be getting home safely.

Remember that alcohol can impair your judgment, and people often do not make very good choices when they have been drinking. Accidents can happen, and you will be held responsible for any poor decisions that you make while under the influence of alcohol.

How Does Alcohol Affect My Diabetes?

Alcohol does not get broken down the same way that food does. Alcohol goes to your liver to be digested. Alcohol can also increase your body's sensitivity to insulin, so you may be more prone to having a low blood sugar if you take insulin to cover carbohydrates in alcohol. As a result of this, alcohol can cause blood sugars to drop unsafely, and people have been found unresponsive due to low blood sugars (and in some cases even dead) after a night of drinking. The risk for low blood sugars can last for many hours after drinking. There is an increased risk of lows overnight, so testing blood sugars overnight is important for your safety.

Symptoms of low blood sugars can be similar to the symptoms of being drunk. If you are acting confused, behaving strangely, or slurring your speech, it may be difficult to determine whether you are having a low blood sugar or whether you have had too much to drink. It is good practice to check your blood sugar anytime you or someone else notices these symptoms. You may need to rely on a friend to help you with this. If your blood sugar is low, you need to treat the low immediately. If your blood sugar is not low, you should think about switching to drinking only water for the rest of the evening.

A word of caution about glucagon:

If you become unconscious due to a severe low blood sugar during or after you have been drinking, ***glucagon will not raise your blood sugar.*** Under normal circumstances, glucagon tells the liver to release glucose to raise the blood sugar, but alcohol interferes with this process. *If you have an alcohol-related severe low, the only way to raise your blood sugar is to call 911 and have an EMT inject glucose into the bloodstream.*

Tips for Responsible Drinking

- 1) **Always wear a diabetes medic alert bracelet.** If you ever find yourself in an emergency situation, you will be able to get the help you need a lot sooner if the medical personnel that respond can identify that you have diabetes.
- 2) **Never drink alone.** Be sure that at least one of your friends knows that you have diabetes and can help if you find yourself in a situation where you are unable to take care of yourself.
- 3) Never drink on an empty stomach. **Always be sure that you have eaten before or with an alcoholic beverage.** Eat a snack with 15 grams of carbohydrate before you drink---and *do not take insulin for this snack*. If you eat more than 15 grams, you can cover the remaining carbs.
- 4) **Check your blood sugar before you have a drink.** If you are low, treat the low and then eat an uncovered 15-20 gram snack before you drink.
- 5) **Check your blood sugar before you go to bed if you have been drinking.** If you are low, treat the low and eat an uncovered 15-20 gram snack before you go to bed. You should also try to eat something with protein and fat before bed. If you are high, drink water and *wait until you wake up to treat your high blood sugar*—your blood sugar may drop from the alcohol while you are sleeping.
- 6) **Remember to take your Lantus or Levemir as usual if you have been drinking.** It is a good idea to *draw up the dose before you start drinking* so that you can be sure it will be accurate when you take your insulin. You may also consider decreasing your lantus dose by 2 units or setting a temporary basal rate if on a pump. If you forget to take your Lantus or Levemir before you go to bed, check your ketones when you wake up. If you have moderate to large ketones, call the emergency number at 650-497-8000. If your ketones are negative, take ½ the dose in the morning.
- 7) You may want to set your cell phone or alarm clock to wake you up about 4-5 hours after you go to sleep. Check your blood sugar when the alarm goes off, and treat your blood sugar with 15 grams of fast acting carbohydrate if it is low.
- 8) **Avoid** the following types of alcohol. These drinks contain carbohydrate and will raise your blood sugar and you may need to take insulin for them. However, these drinks could still cause blood sugars to drop several hours later.
 - regular beer
 - sweet wines or wine coolers
 - liquor mixed with juice, regular soda, grenadine, or energy drinks
 - mixers such as margaritas, daiquiris, or sweet n sour mixes
 - liquors such as kahlua or crème de menthe

- 9) **Choose** the following types of alcohol. These drinks contain very little carbohydrate and will not require you to take insulin.
- **light beer**
 - **dry wine or dry wine spritzers (wine mixed with club soda)**
 - **liquor (rum, whiskey, vodka, gin, etc) mixed with diet soda or club soda**
- 10) If you choose to drink, you should **drink in moderation**. Moderation means no more than 1 drink per day for girls and 2 drinks per day for guys. “One drink” is a 12 oz beer, 4 oz (1/2 cup) wine, or 1 ½ oz (one shot) liquor.
- 11) Be sure to **drink plenty of water while you are drinking** to prevent dehydration. It is good practice to alternate water and alcohol while you are drinking.
- 12) **Check blood sugar more frequently** the first few times you drink to learn how your body responds to alcohol.

If you have any questions about alcohol, you can call the diabetes center at 650-721-1811.

Depression & Diabetes

Feeling down once in a while is normal. But some people feel a sadness that just won't go away. Life seems hopeless. Feeling this way most of the day for two weeks or more is a sign of serious depression.

Does Diabetes Cause Depression?

At any given time, most people with diabetes do not have depression. But studies show that people with diabetes have a greater risk of depression than people without diabetes. There are no easy answers about why this is true.

The stress of daily diabetes management can build. You may feel alone or set apart from your friends and family because of all this extra work.

If you face diabetes complications such as nerve damage, or if you are having trouble keeping your blood sugar levels where you'd like, you may feel like you're losing control of your diabetes.

Just like denial, depression can get you into a vicious cycle. It can block good diabetes self-care. If you are depressed and have no energy, chances are you will find such tasks as regular blood sugar testing too much. If you feel so anxious that you can't think straight, it will be hard to keep up with a good diet. You may not feel like eating at all. Of course, this will affect your blood sugar levels.

Spotting Depression

Spotting depression is the first step. Getting help is the second. If you have been feeling really sad, blue, or down in the dumps, check for these symptoms:

- **Loss of pleasure** — You no longer take interest in doing things you used to enjoy.
- **Change in sleep patterns** — You have trouble falling asleep, you wake often during the night, or you want to sleep more than usual, including during the day.
- **Early to rise** — You wake up earlier than usual and cannot get back to sleep.
- **Change in appetite** — You eat more or less than you used to, resulting in a quick weight gain or weight loss.
- **Trouble concentrating** — You can't watch a TV program or read an article because other thoughts or feelings get in the way.
- **Loss of energy** — You feel tired all the time.
- **Nervousness** — You always feel so anxious you can't sit still.
- **Guilt** — You feel you "never do anything right" and worry that you are a burden to others.
- **Feeling of hopelessness**- You can't see a bright future. You feel like life has nothing to offer you.
- **Morning sadness** — You feel worse in the morning than you do the rest of the day.

- **Suicidal thoughts** — You feel you want to die or are thinking about ways to hurt yourself. If you feel this way, get help immediately! You can go to a local emergency room and tell them you are at risk of hurting yourself. There is also a 24/7 confidential hotline: **National Suicide Prevention Lifeline 1-800-273-TALK (8255)**.

If you have three or more of these symptoms, or if you have just one or two but have been feeling bad for two weeks or more, it's time to get help.

Getting Help for Depression

If you are feeling symptoms of depression, don't keep them to yourself. Talk to a trusted friend or adult. You should also mention this to your doctor at your next visit.

Mental Health Treatment

If you and your doctor rule out physical causes, your doctor will most likely refer you to a specialist. You might talk with a psychiatrist, psychologist, psychiatric nurse, licensed clinical social worker, or professional counselor. All of these mental health professionals can guide you through the rough, but manageable, waters of depression. In general, there are two types of treatment, and many doctors recommend a combination of both forms:

- Psychotherapy, or counseling
- Antidepressant medication

Psychotherapy

Psychotherapy with a well-trained therapist can help you look at the problems that bring on depression. It can also help you find ways to relieve the problem. Therapy can be short term or long term. It often takes multiple sessions to feel at ease with a new mental health professional. Try to attend at least 3 sessions!

Medication

If medication is advised, you will need to consult with a psychiatrist (a medical doctor with special training in diagnosing and treating mental or emotional disorders). Psychiatrists are the only mental health professionals who can prescribe medication and treat physical causes of depression.

If you opt for trying an antidepressant drug, talk to the psychiatrist and your primary care provider about side effects, including how it might affect your blood sugar levels.

<http://www.diabetes.org/living-with-diabetes/complications/mental-health/depression.html>

Where To Find Treatment for Depression and Other Mental Health Needs:

Contact the diabetes center and ask to speak to a social worker 650-721-1811.

If you have health insurance, contact your insurance provider to obtain a list of covered mental health professionals in your area. If you do not have health insurance, see section on community clinic resources. Many of these clinics also offer mental health services.

Complications of Uncontrolled Diabetes

Keeping your blood sugars from being too high for too long is very important. Having occasional high blood sugars should not cause any permanent problems, but when your A1C is staying high over the years, you can start to experience complications. The picture below shows what organs can be affected by poor diabetes control. Two of the most common complications of uncontrolled diabetes are heart and kidney disease. Patients with uncontrolled diabetes could experience heart attack or stroke, and may end up having to receive dialysis if their kidneys shut down from continued high blood sugars.

It is important to have your eyes checked every year, to have regular dentist appointments, and inform your doctor if you ever feel any numbness or tingling in your arms or legs. All patients with diabetes should also have a yearly check up with a primary care doctor who will evaluate you for other health concerns that are unrelated to your diabetes. If you do not currently have a primary doctor, we recommend you establish care with one.

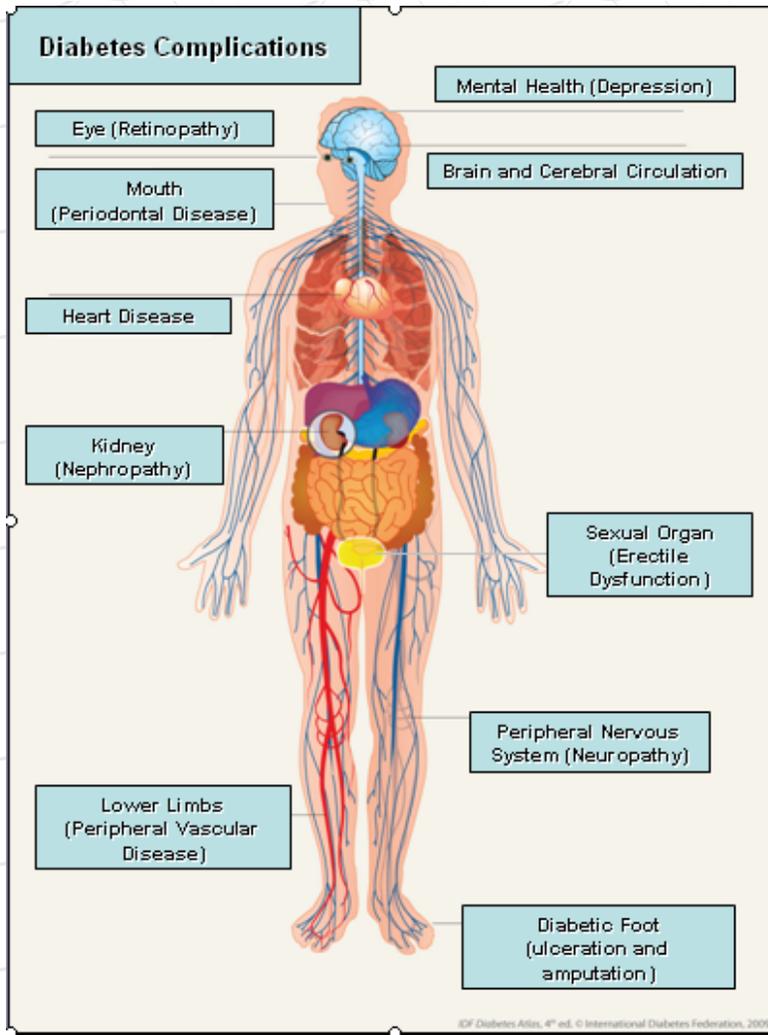


photo from joslin.org

What is a PCP and how do I find one?

Primary Care Providers (PCPs) are physicians that will take care of your general medical needs. They will help patients maintain overall health by focusing on preventive care and performing annual exams. PCPs will provide urgent care needs when you are sick and can handle any referrals to specialists you need. PCPs can be a Family Physician, Internal Medicine Physician or a Pediatrician. A Pediatrician stops seeing patients between the age of 18-21 years generally. ***You should have a PCP AND an endocrinologist!***

Some, but not all, insurance companies require patients to choose a Primary Care Physician. Check with your insurance company to see if you're required to select a PCP.

Where do I start my search?

- Your health insurance company- they may have a list of doctors in their insurance "network" who are accepting new patients.
- Personal referral- Friends, families and co-workers may recommend their own Primary Care Physician. If someone you respect and trust has a positive experience with a doctor, it's more likely you too will like that particular physician.
- Nearby Practice- look around the area you live or work to find a Primary Care Practice. Convenience is always nice.
- Online search

Tips for your First Visit with your new doctor:

- Bring your insurance card
- Arrive early so you can complete paperwork
- Bring method of payment for your co-pay
- Bring a list of current diagnoses and medications
- Know pertinent family history (ex. diabetes, thyroid disease, cancer, etc).
- Ask questions
- Request prescriptions if needed

What do I do if I don't have health insurance?

- Talk with a social worker or case manager to help you find resources.
- Establish yourself with a community clinic. You will need to find out if there is a "waiting list" for the clinic. Certain clinics may only have certain hours of operation.
- Some practices may offer a "sliding scale" payment based on income.

Making an appointment

How do I make an appointment?

Whenever you make an appointment, you should always have your insurance card ready *and* your calendar. Think about what you want to say and how you want to say it. You may say something like:



“ Hi. My name is _____ and my birthdate is _____ and I would like to make an appointment with Dr. _____.”

OR

“Hi. My name is _____ and my birthdate is _____ and I need help with _____”.

After confirming the time and date of the appointment, write it down in your calendar or save in your phone right away. You may not remember later.

****Always remember to leave your full name (first and last), date of birth, and your phone number when leaving a message for the doctor or pharmacy.**

How do I fill a New Prescription?

There are several options to filling a prescription. You can ask your medical team to fax or email the prescription directly to your pharmacy before you leave your doctor's office. The other option is for you to take a written prescription to the pharmacy near your home.

How do I refill a prescription?

Refills may be requested in person, online, in the mail, or on the phone. When you call the pharmacy, you want to have your pharmacy card as well as the name of the medicine or supplies that you need. The pharmacy will only fill a prescription that they have on file. If there are changes, they will need to contact your doctor.

- To refill online, just go to the pharmacy website, and choose the “refills” option.
- Ask your pharmacy if you can do automatic refills for your supplies or your insulin. You may be able to set this up online as well.
- Some people choose to use mail order. If your insurance allows it, then try it. It will save you time and sometimes, it will save you money.

*****A note of caution: DO NOT WAIT until you are completely out of supplies or insulin!!! There may be questions about your prescription and you may have to wait until the problem is resolved by your doctor. It can take several days to be able to pick up a refill if your prescription is expired or if there have been changes to your insurance, so be sure to request refills several days to a week BEFORE you are out. It is a good idea to set a reminder in your phone to order supplies so you do not run out.***



Pediatric vs Adult Care

As a patient at Stanford Children's Hospital, you saw a pediatric endocrinologist. A pediatric endocrinologist is an expert on children with diabetes. When you were younger, your parents made all of your decisions for you and were responsible for making sure you took your medication and checked your blood sugars as directed.

At age 18 years of age, *you* will be responsible for your own care. In fact, your parents will no longer be able to make medical decisions for you. That means, the doctors will expect you to have all of the answers about your diabetes, not your parents. In fact, it is against the law for a doctor to share any information without your permission. This is called *consent* and you may be asked to sign forms which indicate that you consent to sharing your information with others.

According to new health care laws, you may still be covered under your parents' insurance. If not, please review the health insurance section which discusses other insurance options.

How to Find an Adult Endocrinologist

- Call the insurance company and request a list of providers that accept your insurance
- Go online to your insurance company website to search for a list of providers
- Ask your current diabetes team for any referrals in the community
- Find an endocrinologist near you at: <http://www.aace.com/resources/memsearch.php>

Be aware that if you decide to see an endocrinologist who is not on your insurance panel, your insurance company may not pay and you will be responsible for the cost of the visit. *Therefore, it is highly recommended that you select someone covered by your insurance.*

Questions to Ask a Potential Endocrinologist:

As an adult, you have the right to choose any endocrinologist that you like (remember you should always check with your insurance first). You may decide to see someone at Stanford. You may decide to see a private endocrinologist. Whichever you choose, make sure that you feel comfortable with this person and that they have any experience or attributes that you find important. Here is a list of questions that might be helpful to ask:

- What insurance does your practice accept?
- Will you download my meter?
- Do you know how to work with insulin pumps/CGM?
- How do I contact you in case of an emergency?
- What do I do if I need to make an appointment immediately?
- What do I do if I need a refill?
- What kinds of supports are available in your practice? Do you have a social worker, dietitian, or diabetes educator? Find a diabetes educator near you at: <http://www.diabeteseducator.org/DiabetesEducation/Find.html>



Tips for Talking to an Adult Health Care Provider:

<http://hctransitions.ichp.ufl.edu/gladd/>

Caring for Diabetes Away from Home

If you are going to college:

- 1) Register with the office of disability services on your campus. There are no 504 plans in college, and even though diabetes is not a “disability” this is the office that you can use to request accommodations to manage your diabetes. Registering with this office is confidential, but will protect you from being penalized if you have to miss class time to treat high or low blood sugars. Ask your university what other resources or accommodations may be available to you.
- 2) Make sure that you tell your roommate you have diabetes. You can talk about it, or write a letter such as this one: <http://jdrf.org/life-with-t1d/college/preparing-for-college/letter-to-a-college-roommate/>
- 3) Keep your glucagon in a spot that is easily accessible and make sure your closest friends know how to use it. Some college students recommend taping your glucagon kit to your fridge. It’s easy to see and people will ask what it is.
- 4) Make sure that you keep a stash of fast acting sugar to treat low blood sugars. Make sure your friends and roommates are not snacking out of this stash.
- 5) Look online for the nutrition information for the food available on campus. Some colleges even have a registered dietitian on staff who can help you if having trouble counting carbs on campus.
- 6) Know where the student health center and closest emergency rooms are located.
- 7) Find a local pharmacy that you can have your prescriptions sent to. If using mail order, you can arrange to have your supplies shipped to you.
- 8) Keep an eye on your supplies and make sure that you re-order refills or arrange for the pharmacy or your parents to send them to you BEFORE you run out.
- 9) Plan your follow up appointments with your diabetes doctor when you will be home on break. If you will not be coming home often, it is a good idea find a local endocrinologist and transfer your care there. You should be seen every 3-4 months.
- 10) Talk to your parents before you leave and come up with a plan for how often you will be communicating about your diabetes. Will you download and email, text, etc?

Living on Your Own: If you are not going to college, but will be moving out to live on your own or with roommates, many of the above are still important considerations. In addition:

- 1) Be sure to wear medical ID and make sure your closest friends and co-workers know you have diabetes and how to help in an emergency.
- 2) Have a place in your home where you keep all of your diabetes supplies and go to your local pharmacy or order new supplies BEFORE you are out.
- 3) Obtain and maintain health insurance. This is up to you if living independently.
- 4) Factor the cost of caring for your diabetes into your monthly and yearly budgeting. Diabetes supplies are costly, but you don’t want to end up in the hospital in DKA.

Job Interview Tips:

- **Be on time! Play it safe and arrive at least 15 minutes early for the interview.**
- **If you're running late, call them and let them know.**
- **Dress neat and clean.**
- **Have prepared answers to questions, but don't memorize your responses – you don't want to sound like a robot.**
- **Bring extra copies of your resume and references.**
- **Appear fresh and rested, interested, and alert.**
- **After the interview, send a thank-you letter.**
- **Turn cell phone off or leave in car!**
- **Be prepared! Do your homework!**

There are lots of job interview resources available online. Search Google by typing in "job interview tips for college students"

www.jobinterviewquestions.org/

www.groovejob.com/resources/interview-tips/

[http://jobsearch.about.com/od/interviewquestionsanswers/Job Interview Questions and Answers.htm](http://jobsearch.about.com/od/interviewquestionsanswers/Job_Interview_Questions_and_Answers.htm)

******Remember that you do NOT have to disclose that you have diabetes when you are interviewing. It's a good idea to tell your employer about your health condition AFTER being hired, but we do NOT recommend you tell employers that you have diabetes until you begin work.******

Part-time Jobs with Health Insurance Benefits

Target
Trader Joe's
Toys/Kids/Babies-R-Us

Costco
Staples
UPS

Apple
Fed Ex
Home Depot

Also consider banks, universities/colleges and hospitals, where it's not unusual for part-time employees to receive various benefits. These days, you can have your 401(k) and part-time status, too.

Starbucks

In addition to a benefits package that includes medical insurance, a retirement package and stock options, each "partner" who works 20 or more hours per week at the Seattle-based coffee chain receives a pound of free coffee each week.

Whole Foods

Not only are team members eligible for paid training, paid time off, health insurance, retirement savings and a discount to the natural foods store, they also get to vote every three years on which benefits the company should offer.

REI

All REI employees have access to flexible scheduling, gear discounts and free rentals, tuition reimbursement, a performance-based incentive program and gear grants to support any outdoor adventure challenges they may participate in.

Barnes & Noble

The bookstore chain offers part-time workers a significant discount on store merchandise in addition to a healthcare plan and a 401(k).

Nordstrom

Nordstrom employees' benefits fall into one of three categories: work/life balance, savings and protection. Benefits such as paid time off and bereavement leave fall under work/life balance; a merchandise discount, 401(k) plan and profit sharing are part of savings; and short- and long-term disability and life insurance are among its protection benefits.

Lowe's

Lowe's offers part-timers the opportunity to participate in a limited benefit health plan, a dental plan, term life insurance and short-term disability. A year of employment qualifies workers for 40 hours of paid vacation time, which increases with their length of service.

Lands' End

In addition to healthcare and retirement plans, merchandise discounts and paid time off, Lands' End offers its employees access to a company-owned recreation center, discount tickets to theme parks and movie theatres, and an invitation to the annual company picnic.

Nike

Part-time employees who work between 20 and 30 hours per week can qualify for health coverage the first day of the calendar year following a year of employment. Other benefits available include a matching gifts program for charitable donations, discounts at employee stores, discounts on auto and homeowners insurance, and scholarships for employee children.

Cost Plus World Market

In addition to medical coverage, life insurance and a 401(k), the retail chain's benefit package for eligible part-time employees includes flexible spending, vacation and floating holidays.

JCPenney

JCPenney invites associates who work less than 35 hours per week to participate in a dependent care spending account, medical, dental, vision and term life coverage, and paid time off, as well as a discount on merchandise.

Potential Employers for Teens

Restaurant/Food Service

Taco Bell
Dominos Pizza
Pizza My Heart
Round Table Pizza
Papa John's
Pizza Hut
McDonalds
Wendy's
Burger King
In and Out Burger
Jack in The Box
Carl's Jr
KFC
Chic Fil A
Popeye's
Subway
7-Eleven
Waffle House
Red Lobster
Olive Garden
Panera Bread
Dunkin Donuts
Dairy Queen
Jamba Juice
Rubios
Andale
Le Boulanger

Supermarkets

Safeway
Trader Joes
Whole Foods
Nob Hill
Lunardi's
Lucky
Sprout's

Entertainment

Movie Theaters
Bowling Alleys
Golf Courses

Retail

CVS
Rite Aid
Walgreens
Target
Walmart
Ross
TJ Maxx
Payless Shoes
Sears
Aeropostale
Hollister
H&M
Forever 21
Kohl's
Best Buy
JC Penney
Toys "R" Us/Babies "R" Us
Michaels Arts & Crafts
Dollar Store
Petco
PetSmart

Miscellaneous

Hotel Reception
YMCA
Recreation Centers
Landscaping
Veterinary Clinics/Hospitals
Day Care Centers
Babysitting

Summer Jobs

Great America
Santa Cruz Boardwalk
Gilroy Gardens
Exploratorium
Lifeguard positions
Summer Camp Counselor
Summer Internships

Insurance Basics

*****Insurance can NOT be denied to any person due to a pre-existing health condition, such as diabetes.**

Types of insurance plans:

1. **HMO (Health Maintenance Organization).** With an HMO, you have a **primary care doctor**. This doctor coordinates all your medical care. Although the co-pay for these services is usually lower, the tradeoff is that you can only use doctors and hospitals approved by your plan. Also you can't see a specialist without a written referral.
2. **PPO (Preferred Provider Organization).** A PPO is like an HMO, only with more flexibility. Instead of choosing a primary care doctor, you can see any doctor you want. However, if you choose a doctor who participates in your plan, you will pay less.
3. **POS (Point of Service).** You can choose an in-network doctor for most of your care, but you may go outside the network if you need to see a specialist. If you do go out of network, you may have to pay more.
4. **EPO (Exclusive Provider Organization).** Similar to a PPO, only the network of participating doctors is smaller.

How to Choose

If you have a choice from more than one plan, compare how each plan handles the following:

- **Premiums** (the amount of money you pay each month for your insurance)
- **Co-payments** (a fixed dollar amount you pay each time you go to the doctor or pick up prescriptions)
- **Coinsurance** (a percentage of cost of treatment that you are required to pay for all medical expenses after your deductible is met)
- **Deductibles** (the amount of money you must pay out of pocket before your health insurance kicks in to cover)
- **Limitations on devices, drugs, and access to specialists** (some insurances only cover certain diabetes supplies and some endocrinologists may be out of network)

What are typical out of pocket costs for diabetes?

INJECTION THERAPY		PUMP THERAPY	
•Insulin: Avg. Use 3vials x \$95 Add \$95 for extra vial for teens	\$285	•Initial cost of an insulin pump = \$6000** Monthly cost of insulin pump*	\$125
•Blood glucose test strips (200/month)	\$190	•Insulin for pump: Avg use 3 vials x \$95 Add \$95 for extra vial for teens	\$285
•Syringes: 100/box, \$30/box (2 boxes)	\$60	•Blood glucose test strips (200/month)	\$190
•Ketostix: 20/box, \$10/box	\$10	•Sets, tubing and cartridges	\$200
•Lancets: 100/box, \$12/box (2 boxes)	\$24	•Ketostix: 20/box, \$10/box	\$10
•Glucagon Emergency Kit: 1-2/yr, \$87	\$87	•Lancets: 100/box, \$12/box (2 boxes)	\$24
		•Glucagon Emergency Kit: 1-2/yr, \$87	\$87
Total Monthly:	\$656	Total Monthly (incl 1/48 of pump cost*):	\$921
Total Monthly w/out glucagon:	\$569	Total Monthly w/out glucagon:	\$834
MD visits every 3 months about \$193/visit + labs			

How To Get Health Insurance

1. Employment

- a. Obtain a full-time or part-time job that offers health insurance as part of its benefits package.
- b. See list of “Part-time Jobs with Health Insurance Benefits” for possible jobs that offer health benefits.
- c. Ask if health insurance is a benefit when applying for jobs.

2. Parents’ Insurance

- a. ***The Affordable Care Act (President Obama’s 2010 health care reform bill) states that children can stay on their parents’ insurance until the age of 26*** - mandatory as of September 23, 2010 (UNLESS on TRICARE INSURANCE)
- b. No restrictions. Do NOT have to live at home with your parents, DO NOT have to be enrolled in school/college, DO NOT have to be full-time status. Does not matter if you can get insurance from your current job or not. Can be married; however spouse will not be eligible for their in-laws’ insurance.
- c. Tricare Insurance—benefits max at age 21. Coverage is only extended until age 23 IF full-time student or sponsor pays >50% finances. Tricare has its own young adult insurance you may qualify for if you’re 21-26. www.tricare.mil/tya

3. University/college Sponsored Health Insurance Plan

- a. Ask about any school sponsored health insurance programs that are available at your college or university.
- b. Contact the student health center or disability services at your college or university for information.

4. COBRA (the Consolidated Omnibus Reconciliation Act).

- a. A federal law that allows young adults who lose coverage under their parents’ employer-sponsored plan to purchase temporary extended coverage for up to 36 months.
- b. The U.S. Department of Labor advises parents to notify their employer in writing within 60 days that their covered child is no longer a dependent. Their employer-sponsored healthcare plan should then advise the child of his or her right to extend healthcare benefits under COBRA. The child will then have 60 days from the date the notice was sent to elect COBRA coverage.
- c. Contact your parents’ human resources/benefits department for more information. COBRA can be expensive, so good to look into other options too.

5. Privately Purchased Health Insurance

- a. Find an insurance company that will sell you an individual health insurance plan.
- b. Here are some internet resources that may be a good start. You can also enter “individual health insurance plans” in the search box for a more extensive list.
*** If you make less than \$45,960 a year, look into covered California first.

www.healthinsurancesort.com

Blue Cross Blue Shield. www.blueshieldca.com

Anthem Blue Cross. www.anthem.com/ca/health-insurance/home/overview

United. www.uhc.com

Kaiser. www.kp.org

Cigna. www.cigna.com

6. Medi-Cal

- a. As of January 1, 2014 ALL low-income, non-elderly, non-disabled individuals will be eligible for Medicaid, including unemployed adults and working families.
- b. If you have an intellectual, physical, or psychological disability you may be eligible to continue receiving Medicaid past age 19-regardless of income.
- c. Provides coverage for people with annual income approximately below 138% of the federal poverty level (*as of 2013, this is less than \$15,857 per year for an individual*).
- d. Apply for Medi-Cal:
In person: at your local Department of Social Services office
<http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx>
or Online: <http://www.dhcs.ca.gov> or at: www.coveredca.com

7. Affordable Care Act <http://obamacarefacts.com/obamacare-young-adults.php>

Covered California online: <https://www.coveredca.com> or 1-800-300-1506

As of 2014, all adults are required to have health insurance. You will have to pay a fine if you don't have insurance coverage. Covered California is an insurance marketplace for Californians to purchase health insurance. If you make less than \$15,857, you can apply for Medi-Cal at any time. You can only apply for covered California insurance during open enrollment (starts each fall) or if you have a qualifying life event (marriage, birth of child, loss of current coverage, etc). Through covered California, if you make \$15,857-\$45,960 you can receive financial assistance to pay for insurance. This website allows you to apply for and compare insurance plans. You will be able to see how much you will have to pay each month for the insurance, as well as if you'll have co-pays for services. *You need to consider how much you have to pay for diabetes visits, prescriptions/supplies in making your decision of which plan to purchase.* Often, plans that cost less monthly, have higher deductibles, so you spend more out of pocket for care and prescriptions. Factor this into your decision...

Medically Indigent County Health Programs

If you do not qualify for medi-cal, you can contact the department of health and social services for the county you live in. They can help you determine if you qualify for medically indigent health care.

Prescription Assistance (for those who cannot afford their diabetes supplies/medications)

ABC Diabetics (provides free supplies to young adults with type 1 up to age 24)
<http://abcdiabetics.org/> (can fill out a supply request form on their website)

ADA Prescription Assistance
<http://www.diabetes.org/living-with-diabetes/health-insurance/prescription-assistance.html>

Needy Meds (assistance with strips, insulin, and oral diabetes meds)
<http://www.needymeds.org>

Lilly Cares (humalog, glucagon, 75/25)
<http://www.lillytruassist.com/>

Novo Nordisk patient assistance (novolog, levemir, 70/30)
<http://www.cornerstones4care.com/ToolsResources/PatientAssistance.aspx>

Sanofi-Aventis patient assistance (apidra, lantus)
Your healthcare provider must sign you up at: <https://www.visitspconline.com/>

Partnership for Prescription Assistance (assistance for most any medication)
<http://www.pparx.org/>

Free/Low Cost Clinics

If you do not have health insurance or cannot afford care with the insurance plan you do have, you can receive care at one of the area's community health clinics. Please keep in mind there is often a waiting list of several months to be seen if you are a new patient. We recommend establishing a primary care physician at one of these clinics BEFORE you transition if you are or will be without affordable health insurance.

Ravenswood Family Health Center

1798A Bay Rd.
East Palo Alto CA 94303
650-330-7400

<http://www.ravenswoodfhc.org>

Accepts: Uninsured, Underinsured, Insurance, Medicare, Medicaid

Fees: Low cost

Languages Spoken: English, Spanish

Services: Women's Health Services, Specialist medical services, Pediatric Services, Counseling/Mental Health Services, Medical Services, Dental Services, Sexually Transmitted Diseases (STD) Testing

Tri-City Health Centers

<http://tri-cityhealth.org/>

Accepts: Uninsured, Underinsured, Insurance, Medicare, Medicaid

Fees: Sliding scale of fees based on income

Languages Spoken: English, Spanish, Cantonese, Mandarin, Farsi

Services: Pediatric Services, Counseling/Mental Health Services, Medical Services, Health Education Services, Family Planning Services

Locations:

Tri-City Health Center - Main Street Village

3607 Main Street Suite B
Fremont CA 94539
510-770-8040

Tri-City Health Center - State Street Site

39184 State St.
Fremont CA 94538
510-770-8040

Tri-City Health Center- Dental Site

38056 Martha Ave.
Fremont CA 94536
510-252-6800

Tri-City Teen City Clinic Site

39500 Liberty Street
Fremont CA 94538
510-770-8131

Tri-City Health Center/Liberty Site

39500 Liberty St 3B
Fremont CA 94538
510-770-8040

Tri-City Health Center- Mowry Site

2299 Mowry Avenue Ste 3B
Fremont CA 94538
510-770-8040

Arbor Free Clinic

<https://arbor.stanford.edu/>

795 Willow Rd.
Menlo Park CA 94025
650-493-5000

Accepts: Uninsured, Underinsured (must be 18+)

Fees: No fee

Languages Spoken: English, Spanish, Mandarin

Services: walk in clinic every Sunday 8:30 am-2 pm for general medical care/physicals, labs, low cost prescriptions. Referrals made for: mental health and specialty services

Pacific Free Clinic

<http://pacific.stanford.edu/>

Overfelt High School Health Clinic
1835 Cunningham Ave.
San Jose, CA 95122
650-721-2786

Accepts: Uninsured, Underinsured (must be 18+)

Fees: No fee

Languages Spoken: English, Spanish, Mandarin, Vietnamese, Cantonese

Services: walk in clinic every Saturday 8:30 am-2 pm for general medical care/physicals, labs, shots, low cost prescriptions. Referrals made for: mental health and specialty services

Rotacare Bay Area

<http://www.rotacarebayarea.org>

Accepts: Uninsured, Underinsured

Fees: No fee

Locations in: Concord, Daly City, Gilroy, Half Moon Bay, Monterey, Mountain View, Pittsburg, Richmond, San Jose, San Leandro, San Rafael, and Santa Cruz

See website for specific information on each clinic. Patients seen on first come, first serve basis.

Gardner Health Services

<http://www.gardnerfamilyhealth.org>

Accepts: Uninsured, Underinsured, Insurance, Medicare, Medicaid

Fees: Sliding scale based on income

Languages Spoken: English, French, Russian, Spanish, Tagalog, Vietnamese

Services: Primary Care, Mental Health, Substance Abuse, WIC, Podiatry Services, Vision, Pharmacy Services, Pediatric Services, OB/GYN, Dental Services

Locations in: San Jose, Gilroy, Atherton, Alviso

See website for specific information on each clinic.

Bill Wilson Center

<http://www.billwilsoncenter.org/>

3490 The Alameda
Santa Clara, CA 95050
Phone: (408) 243-0222

Accepts: Uninsured, Underinsured in Santa Clara County

Services: Mental Health services, family/individual counseling

Crisis Line: (408) 850-6125

Also offers shelter for homeless young adults (ages 13-25):

The Drop-In Center is located at 693 South 2nd Street, San Jose, CA 95112.

Monday - Friday from 9 am - 5 pm

Saturday - Sunday from 9 am - 1 pm

Planned Parenthood

Find a Location Near You: <http://www.plannedparenthood.org/health-center/>

Accepts: Uninsured, underinsured, insurance, Medicaid

Fees: Sliding scale available

Services: Women's Health, Men's Health, Family Planning, Sexually Transmitted Diseases (STD) Testing/Counseling/Treatment, HIV/AIDS Testing, Pregnancy Care

My Diabetes History:

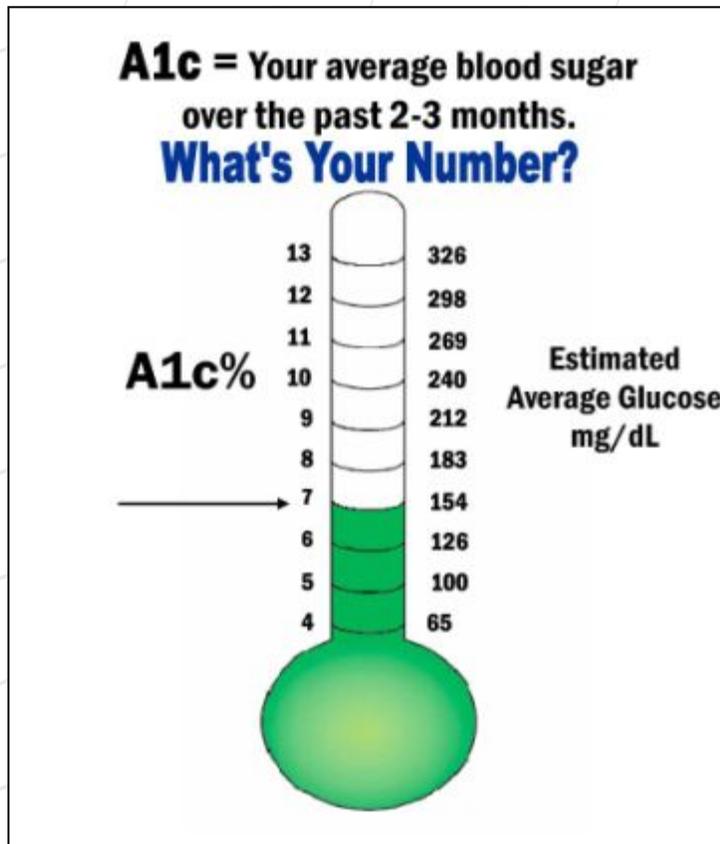
Type of Diabetes: Type 1 Type 2

Date of Diagnosis: _____

My Pediatric Endocrinologist is:

Hemoglobin A1C History:

Date	Result



My Glucose Meter is a: _____ I check my blood sugar _____ times per day

My insulin:

Conventional Therapy: NPH Regular 70/30 75/25 50/50

_____ Units at Breakfast _____ Units at Dinner

Lantus Levemir _____ units at _____ (time taken)

Humalog Novolog Apidra

Target Blood Sugar: _____ Correction Factor: _____

Carbohydrate Ratio(s): _____

I take my insulin with: vial/syringe pen pump: _____ sets used: _____

Basal Rates:

Other Medications I take:

Name	Dose	Time of Day Taken

My Medical History:

	Yes or No	Details
Recent DKA		
High Blood Pressure		
Kidney Problems		
Nerve Damage		
Eye Problems		
Recurrent Infection		
Celiac Disease		
Thyroid Problems		
High Cholesterol		
Vitamin D Deficiency		
Mental Health		



Congratulations!

You have “graduated” from pediatric diabetes care and are moving on to see an adult endocrinologist!

We know that this may be a time of mixed emotions for you and hope that we have helped you prepare for this new chapter of your life. There are a few differences between pediatric and adult health care. One of the biggest differences is that the focus of pediatric care was on you AND your family but **now the focus is just on YOU!** This can sometimes be an adjustment for both you and your family.

Another difference about adult clinics is the size and structure of the clinic. There are often more patients being seen during the day and **the length of your visit may be shorter than what you may be used to.** Adult endocrinologists may not download your meter and may not spend as much time trying to get you to talk to them. **It is important to speak up for yourself to get the most out of your visits** with your adult endocrinologist. It will be helpful to attend the visit without a parent or guardian because the adult endocrinologist will most likely only want to talk with you. It's also important for your parent or guardian to remember that once you turn 18, the doctor can not share any information with anyone without your permission.

It is estimated that about 25% of young adults with diabetes do not follow up with care after they leave their pediatric practice; which can lead to the development of life long complications from diabetes. This statistic is heartbreaking and we know that diabetes can be a very manageable condition with the proper treatment and follow up. **We want to see you be successful in life and in controlling your diabetes!**

Please keep the following tips in mind as you prepare to see your new doctor:

- 1) **Bring your ID, BG meters, and health insurance cards to every visit.** Your LPCH endocrinologist will send a letter to your new endocrinologist summarizing your diabetes care up to this point, but your new doctor is going to want to hear how you've been managing your diabetes from you so come prepared to talk.
- 2) Have a list of questions/concerns you want to discuss with your new doctor. **Think about your visit ahead of time and write down the topics you want to cover.** This way you won't forget what you wanted to talk about and you will be able to get the most out of the time you have with your new doctor.
- 3) **Be honest!** Your doctor will not judge you, but he/she will not be able to help you if you aren't honest about what you are (or are not) doing with regards to your diabetes care.

- 4) **Don't be afraid to ask questions!** You and your doctor need to work together as a team and you know better than anyone what you are willing and able to do. If you disagree with your doctor's plan of care, ask to discuss it and come up with a new plan. Also, if what the doctor says doesn't make sense to you, you need to have him or her clarify so you **understand before you leave**.
- 5) Make sure that you have enough prescription refills for all of your diabetes supplies **before** you see your new doctor. **Once we have transitioned your care, your current endocrinologist will not be able to write any more prescriptions for you.**
- 6) **Make contact with your new doctor's office as soon as possible.** Ask if they have a diabetes educator and what other resources they may provide. Many adult endocrinologist offices do have diabetes educators and they can be a great resource in helping with your diabetes. Most endocrinologists are booked 4-6 months in advance, but you can typically get in to see a diabetes educator if you have any questions/concerns in between your endocrinologist visits.
- 7) If you are unable to make the appointment that was scheduled for you, **it is YOUR responsibility to call your new doctor's office to reschedule.** Most clinics require at least 24 hours to cancel an appointment and **you may still get charged for the appointment if you do not show up.**
- 8) Your adult doctor may want you to have lab work done **BEFORE** your visit. **Call the office ahead of time to find out and be sure to ask for instructions on what you need to do before your visit.**
- 9) **Arrive 15-20 minutes BEFORE the start of your appointment.** Since you will be a new patient in the adult practice, they will need you to fill out some paperwork before you see the doctor.
- 10) Remember it may take a few visits to feel comfortable with a new doctor. However, **if you don't feel like you click with your new doctor, there are other doctors available.** Call your insurance company to discuss changing doctors if you are unhappy with your new endocrinologist.
- 11) **Make sure that you have a family or primary care doctor (PCP)!** Your endocrinologist can only help you with your diabetes so you will need to have a doctor you can see if you need care for any non-diabetes related illness or condition.

We hope that the skills we have discussed with you here at Stanford Children's and the above tips will help you as you prepare to meet a new endocrinologist. If you have any questions or issues in the beginning of your transition, we will still be here and may be able to help you troubleshoot. We enjoy hearing about how you are doing so feel free to keep us updated! Also, if you would be interested in giving back to the diabetes community and being a mentor for other kids/young adults with diabetes please let us know. There are lots of kids who could benefit from your time, help, and expertise.

Congratulations, Take Good Care of Yourself, and Best Wishes from the Stanford Children's Diabetes Center Staff!!!