

Medical Transition to Adulthood Binder

Why This Notebook Matters

Every mission needs a field guide. This Care Notebook is yours.

When life feels like an endless paper trail of medical reports, evaluations, and service plans, this binder keeps it all in one place organized, accessible, and ready for whatever comes next. Think of it as your command center: the place where your child's story, care, and progress come together.

Because in the world of special needs parenting, information isn't just power, it is protection, preparation, and peace of mind.

Setting Up Your Care Notebook

Your Care Notebook is your go-to resource for keeping all your child's important medical and educational information organized and accessible. Here is how to get started:

1. Collect what you already have.

Collect any health or education documents currently on hand, including:

- Letters from doctors/ specialist for insurance purposes
- Copies of guardianship documents
- Hospital summaries or discharge papers
- Copies of insurance cards and state ID or driver's license
- Medical Action Plans (Seizure Action Plan)
- Immunization records
- Current school records of interest:
 - IEP/ FBA
 - Neuropsychological Evaluation
 - Speech, OT, and PT Evaluations
 - Behavioral data sheets

2. Decide what needs to be included in the Notebook.

- What information do you reference most often
- What your child's care or education team frequently requests
- What documents would be most helpful in an emergency or transition

3. Keep Notebook Current

Take a moment to review your Notebook before any medical visits, school meetings, or care team conversations. Keep it updated regularly so it remains accurate, thorough, and ready to support you when it matters most.

TIPS for Maintenance

Organize: Use sturdy dividers or color-coded tabs for each section.

File Regularly: Keep a "To File" pocket for new paperwork, sort weekly.

Bring it: Take the binder to all new providers or intake appointments.

Review Quarterly: Remove outdated items and add updated copies.

Digitize: Consider scanning critical pages for secure cloud backup.

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1. Personal Information

Purpose: This section provides a quick reference overview of your loved one's identity, coverage, and legal authority, essential for emergencies, transitions, and care coordination.

Full Legal Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____ Email Address: _____

SSN: _____

Healthcare Portal website: _____ Login: _____ Pswd: _____

Height: _____ Weight: _____ Blood Type: _____

Allergies: _____

Insurance Provider: _____

Policy Number: _____

Group Number: _____

Primary Subscriber: _____

Relationship to Individual: _____

Guardianship / Power of Attorney Document Location: _____

Notes: _____

2. Provider Directory

Purpose: Centralize all medical and support contacts so you can reach the right person quickly, especially in emergencies and transitions.

Include the following providers:

- Primary Care Physician (Pediatric and Adult)
- Specialist (neurologist, GI, orthopedics, cardiology, endocrinologist, allergy ENT)
- Therapists (PT, OT, SLP, ABA, Psychologist)
- Pharmacy info
- DDS Case Manager
- Home Health Agency
- Medical Equipment Providers

Provider Contact List:

Name	Specialty/Role	Phone	Fax	Email	Address

Emergency Contact Sheet

List the top emergency contacts who should be reached first in case of a crisis.

Name	Relationship	Phone (Primary)	Phone (Alternate)	Notes

6. Insurance & Financial

Purpose: Manage all insurance, Medicaid, and financial benefit paperwork for quick access and claims management.

In this section you should include copies of the following:

- Copies of insurance cards
- Medicaid/ Medicare Paperwork
- SSI/ SSDI Determination Letters
- Waiver Eligibility & Approvals
- Explanation of Benefits (EOB)

Appeal Tracking Form

Use this form to record details of any appeal filed for services, support, or insurance claims. Keeping a record ensures you stay on top of deadlines and communications.

Date Filed	Agency	Reason for Appeal	Contact Person	Deadline/ Response Date	Outcome	Notes/Next Steps

7. Appointment Information

Purpose: Track all referrals and consent forms.

Referral Tracking Form

Use this form to track all referrals related to your child's medical, educational, or support services. Keep detailed notes for follow-up and documentation purposes.

Date of Referral	Agency/Provider Name	Contact Person	Reason for Referral	Follow-Up Date	Status/Notes

Consent Tracking Form

Use this form to track all consent forms you signed or received related to your child's care, education, and services. Maintaining copies and a record of dates helps ensure you can verify authorizations and manage renewals on time.

Date Signed	Type of Consent (Medical, Educational, Release, etc.)	Agency/Provider Name	Purpose of Consent	Expiration Date	Copy On File (Y/N)	Notes/Follow-Up Needed

