

# Getting to Know Me

<b>Name:</b>	<b>Nickname:</b>
<b>Date of Birth:</b>	<b>Today's Date:</b>
<b>Who am I? How would I describe myself?</b>	
<b>What are my strengths/interests?</b>	
<b>What is my life like in the community?</b> <i>(Things to consider: school, favorite places)</i>	
<b>How would I describe my family situation?</b> <i>(Things to consider: siblings, parents, other relatives, pets, where you call home)</i>	
<b>What is my diagnosis (diagnoses) and what that means for me?</b> <i>(Things to consider: doctor's explanation, my explanation)</i>	
<b>What are my challenges?</b> <i>(Things to consider: things that frustrate me about my illness, how people interact with me due to my illness)</i>	
<b>What do I think of my overall health?</b> <i>(Things to consider: limitations, things that bother me, things I can control)</i>	
<b>What are my prior surgeries, procedures, lab/diagnostic studies?</b>	
Date:	Procedure: Results:
<b>What are my current medicines/doses?</b>	

**What are my allergies?**

**What are things to avoid?**

*(Things to consider: food, procedures, activities such as gym class, etc.)*

**What Equipment/Assistive Technology do I need?**

Braces/orthotics  Walker, wheelchair  Communication device  Home O<sub>2</sub>   
Insulin pump  Nebulizer  Suction  Other:

**What other things I'd like you to know about me and my condition:**

**How do I want information:**

*(Things to consider: tell me in writing, tell me alone, or tell me and my parents together)*

**Things I want help with:**

**Boundaries:**

**My responses to my illness:**

*(Things to consider: general responses, tired, excited, hungry)*

**How I want to be treated:**

- It's OK to ask me if I need help.
- It's **not** OK to ask me if I need help
- It's OK to ask me details about my condition
- It's **not** OK to ask me details about my condition

For an electronic version of this form visit [www.cshcn.org/planning-record-keeping/care-plans-parents/parents-create-care-plan](http://www.cshcn.org/planning-record-keeping/care-plans-parents/parents-create-care-plan)



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