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**A Collaborative Approach to the Transition of Adolescent Renal Transplant Recipients  
to Adult Care Providers**

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Studies suggest that preparing adolescent renal transplant recipients for personal responsibility of their health care may positively impact long-term success after transition to adult care. As a multidisciplinary team caring for pediatric patients, we are committed to preparing our patients to successfully manage their own health care. In 2007 we developed and implemented a formal transition program targeting adolescents with a renal transplant. The program identifies candidates who are seniors in high school and/or 17 years of age. A Transition Readiness Evaluation is conducted by the social worker and/or clinical psychologist. This assesses medication adherence, decision-making ability, psychosocial adjustment and support, and ability to navigate the health care system. Information about recipients' rights as adults and concept of advance directives is discussed when they turn 18 years of age. Consent is obtained to discuss medical information with a parent, in compliance with HIPAA. The goal is to successfully transition patients to adult care after first year post high school, acknowledging that the year of academic and/or social changes is a stressful time. Since 2007, 41 adolescents were identified, and 30 participated in evaluation. Five patients and/or families declined participation, 4 patients transferred their care to adult programs prior to assessment and 2 are yet to be scheduled. Most were seniors in high school, 8 patients in college and 2 working prior to protocol but not yet transitioned. Of the assessed group, 11 have been transitioned, 7 waiting appointments at adult centers, 7 are in the transition year, and 5 remain for medical and/or psychosocial reasons. The assessment has made individualized recommendations to reduce barriers and assist in the transition process. As a QI project, a survey was developed to assess the effectiveness of the program. A follow up analysis of transitioned patient and allograft outcomes will determine the success of our approach.

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