

Prosthetic Clinical Transitions (PCT) Questionnaire

Your clinical team aim to support you as you get older and help you gradually develop the confidence and skills to take charge of your own healthcare. Filling in this questionnaire will help the team create a programme to suit you.

Filling in this questionnaire and **returning it to your clinician** will help the team create a programme to suit you.

Please answer all questions that are relevant to you. **You can ask for help if needed, but your answers should be your own.**

Please answer all questions that are relevant to you and ask if you are unsure.

Name	Date
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Knowledge and Skills	Yes	I would like some extra advice/ help with this	Comment
Knowledge			
I can describe my condition and my type of limb difference or amputation			
I know about pain management, including where to go, what to do, and I feel confident in determining if it is an emergency or not			
Health and Lifestyle			
I understand the exercises that have been given to me and how they impact my condition			
I know sports and physical activities that I enjoy and can take part in			
I am aware that my condition can affect how I develop e.g. How I grow/volume changes due to hormones			
Daily Living – School/Education and Your Future – Leisure			
I know what equipment I need to look after myself at home/make snacks			
I know how to look after and clean my prosthetic limb/liner/other devices			
I know what I need to pack to manage my condition and devices when I am away from home overnight			
I know about additional equipment I need to manage at school			
I know about additional equipment I need to use public transport and access my local community			

Additional questions -The following may be introduced when they are suitable/ relevant for the young person aged 14+

Knowledge and Skills	Yes	I would like some extra advice/ help with this	Comment
Knowledge			
I know the names of the devices I use and can explain how my prosthesis works			
I call the prosthetics department/limb centre myself if there is a query about my equipment and devices I need			
I understand how access to sports limbs changes once I turn 18			
Self Advocacy and Transfer to Adult Services			
I am aware of the changes in services available to me when I am an adult			
Health and Lifestyle			
I have found exercises/ sports/ activities which I can take part in and I exercise regularly/have an active lifestyle			
I understand that sports and activity limbs are less readily available in adult services			
Daily Living – School/Education and Your Future – Leisure			
I understand how to look after my residual limb including when I am being active			
I understand how to look after my prosthetic limb/ device including when I am being active			
I know what I need to pack for a trip away to ensure I can care for my residual limb and prosthesis			
I understand when it is and isn't appropriate to wear my activity/sports limb			
I have been taught how to properly use my activity/ sports limb			
I know what I need to pack to manage my condition and devices for overnight and longer trips			
I know how to look after and clean my prosthetic limb/ liner/other devices			