Me and Epilepsy

Thank you for coming to clinic/hospital today. We would like to know how you are and we would like you to tell us about anything that you are worried about. This will help us look after you better. If you need any help, ask the person you are with today or someone from the Epilepsy Team.

Please tell us who is completing this form:

[ ]  Parent/guardian in discussion with my child (recommended 7-11 years old)

[ ]  On my own about my Epilepsy (Recommended 11 years and over)

|  |
| --- |
| **A little bit about me** |
| My name is: |  |
| My age: | I am………….. years old |
| Today’s date is: |  |
| I have come to clinic / hospital today with: |  |
| My hobbies are/things that make me happy are: |  |

|  |  |
| --- | --- |
| **These are some things that could be a worry or a problem:** | **How often might this be a worry / problem for you?****Please tick a box** |
| **Never**Smiling face outline with solid fill | **Sometime**sConfused face outline with solid fill | **Often**Sad face outline with solid fill | **Almost always** Crying face outline with solid fill |
| Family |  |  |  |  |
| Friends / Friendships |  |  |  |  |
| School / School work |  |  |  |  |
| Memory, attention and / or concentration |  |  |  |  |
| Feeling sad |  |  |  |  |
| Feeling worried / anxious |  |  |  |  |
| Feeling angry |  |  |  |  |
| Sleep |  |  |  |  |
| My behaviour e.g. getting into trouble/getting told off |  |  |  |  |
| Coming into clinic / Hospital |  |  |  |  |
| Taking medication for Epilepsy |  |  |  |  |
| Having a Seizure / Fit |  |  |  |  |

Thank you for telling us about any worries or problems. Some children /young people tell is that Epilepsy can make worries / problems seem bigger.

 Please turn over the page 

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Does Epilepsy make any of these worries / problems bigger for you? [ ]  No [ ]  Yes

|  |  |
| --- | --- |
|  Smiling face outline with solid fill  | **When your worries /Problems get bigger, what helps you?** |
|  |

You can write or draw anything you want to talk about, ask or tell us today in clinic.

You can use the speech bubbles or box below. Please remember there are no right or wrong or silly questions. We like hearing from you.



Me and Epilepsy

We know that living with a physical health condition can sometimes feel difficult emotionally for children, young people and their families.

Please ask the epilepsy nurse for information regarding emotional wellbeing services in your area that can be accessed for support. We look forward to contacting you at the end of January to see if any of these services were helpful for you, your child, young person or family.

**Thank you for completing. Please give this to the nurse or doctor so we can use it for today’s appointment.**