

Caregiver Hand-Off Sheet

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Complete from your child's own care plan, then give a copy to each caregiver.

Parent/guardian note: This hand-off sheet does not replace a clinician-approved medical, school, allergy, or emergency plan. The parent/guardian supplies all child-specific instructions.

01 Child + hand-off basics

CHILD'S NAME (REQUIRED)		PREFERRED NAME (optional)	DATE OF BIRTH (optional)
PARENT/GUARDIAN (REQUIRED)		BEST PHONE (REQUIRED)	BACKUP CONTACT + PHONE (REQUIRED)
CAREGIVER / SETTING (optional)	DATES / TIMES THIS SHEET APPLIES (optional)		LAST UPDATED (REQUIRED)

02 What this caregiver should know

In our words, celiac disease means for this child... (optional) *Use the wording from your family and care team.*

Important daily needs, routines, or communication preferences (optional)

03 Food already approved by our family

List exact items, brands, flavors, package sizes, or packed foods when those details matter. Approval is specific to the item and situation listed, not a broad "safe food" claim.

Packed items / meals (REQUIRED)

Approved foods / exact brands (REQUIRED)

☐ Use only the packed food provided

☐ Call before making any substitution

☐ Keep packaging so the family can review it

☐ Other: _____

04 Before serving any food REQUIRED CHECKS

☐ Check the ingredient label every time

☐ Confirm the exact product with parent/guardian

☐ Check preparation and serving surfaces

☐ Check utensils, cookware, appliances, and hands

☐ Ask about shared fryers, toasters, grills, or prep space

☐ Stop and call if anything is unclear

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Specific instructions beat assumptions. If anything is unclear, pause and call.

05 Preparation + cross-contact reminders REQUIRED

☐ Wash hands before food preparation	☐ Clean the work surface first
☐ Use the family-provided utensils or equipment	☐ Keep this child's food separate during prep and serving
☐ Use fresh condiments or a method that avoids shared crumbs	☐ Do not reuse oil, water, utensils, or serving tools unless approved
☐ Do not remove food from its package until ready	☐ Other: _____

Our child-specific preparation instructions *Include equipment, storage, labeling, or serving details.*

06 Eating away from home OPTIONAL SECTION

☐ Use food packed by the family	☐ Ask the parent/guardian before ordering
☐ Confirm ingredients and preparation with the food provider	☐ Avoid buffets or shared serving areas unless family-approved
☐ Keep the receipt, menu, label, or package for review	☐ Other: _____

Approved restaurant / event / activity plan

07 What our family wants watched for OPTIONAL, PARENT-WRITTEN

Child-specific signs, symptoms, behaviors, or concerns *Write only what your family/care team has told caregivers to watch for.*

08 If there is a question or possible exposure REQUIRED

1. Stop serving the food. 2. Call the parent or guardian right away and tell them what happened. 3. Write down the food, brand, amount, and time. 4. Follow only the child's parent-approved care instructions. 5. For urgent symptoms, follow the family's emergency plan and call local emergency services. **This sheet never gives medical, treatment, or medication advice.**

CALL FIRST (REQUIRED) _____	PHONE (REQUIRED) _____ _____	BACKUP / CLINICIAN CONTACT, IF PARENT SUPPLIES (optional) _____
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Parent/guardian instructions if a question or possible exposure occurs (REQUIRED)

09 Situation-specific notes OPTIONAL

School • babysitter • family • camp • sports • travel • party • other _____ _____ _____		
PARENT/GUARDIAN SIGNATURE _____ _____	DATE _____ _____	CAREGIVER REVIEWED WITH _____ _____

Educational reference: NIDDK, "Eating, Diet, & Nutrition for Celiac Disease" (niddk.nih.gov). No endorsement implied.