FREE PRINTABLE KIT · CREATED BY A REGISTERED NURSE

The Caregiver Binder Kit

Nine ready-to-print pages that organize everything about your loved one's care, so any question can be answered from one place, by anyone, in under a minute.

What's inside

How to use this kit

1

Print & fill

Print every page (extra copies of the medication list, visit notes, and symptom log; they get used the most). Fill them out in pencil or pen.

2

Build the binder

A 1.5–2" three-ring binder with 9 divider tabs. Emergency sheet goes first, in a sheet protector. Keep it somewhere visible; most families use the kitchen counter.

3

Keep it current

Update the same day anything changes: medications, diagnoses, hospital visits. Do a 10-minute review monthly and date it on the review log.

Want the version that never goes out of date? The full guide to building your binder (and the hybrid paper + digital system we recommend) is at **safehandsapp.com/caregiver-binder-guide**.

1 Quick-Reference Emergency Sheet

The first page in the binder. Hand this to EMS or the emergency department, before anyone asks.

SafeHands
Care made simple

IN AN EMERGENCY, GIVE THIS PAGE TO RESPONDERS

FULL NAME	DATE OF BIRTH	HEIGHT	WEIGHT

ALLERGIES: DRUG & FOOD (INCLUDE THE REACTION, E.G. "PENICILLIN → HIVES")

☐ TAKES A BLOOD THINNER, which one: _____ (tell responders immediately)

CURRENT CONDITIONS (PLAIN LANGUAGE)

HOME OXYGEN · ☐ Yes ☐ No · device & flow rate (e.g. nasal cannula, 2 L/min):

MEDICATIONS: FULL DATED LIST IS BEHIND THIS PAGE (SECTION 2)

EMERGENCY CONTACTS

NAME	RELATIONSHIP	PHONE

PRIMARY DOCTOR & PHONE

PREFERRED HOSPITAL

ADVANCE DIRECTIVE / DNR: ☐ Yes ☐ No · where the document is kept:

THIS SHEET UPDATED ON

Make copies: one on the refrigerator, one in the car's glove box, one in your bag, one photographed on your phone.

2 Current Medication List

Include over-the-counter medicines and supplements. When anything changes, start a fresh list and date it; never scribble over.

LIST UPDATED ON: _____

Always date this page; a dated, current list is the single most valuable document you can hand a nurse. Bring it to every appointment.

MEDICATION (BRAND / GENERIC)	STRENGTH	DOSE & WHEN TAKEN	WHAT IT'S FOR	PRESCRIBER	STARTED

OVER-THE-COUNTER MEDICINES, VITAMINS & SUPPLEMENTS (YES, THESE MATTER; THEY INTERACT)

NAME	DOSE & WHEN	WHY TAKEN	STARTED

3 Medical Contacts & Care Team

Every person involved in care, on one page. Add what each provider is for; "Dr. Osei, kidneys" beats "Dr. Osei."

SafeHands
Care made simple

MEDICAL TEAM

NAME	SPECIALTY / WHAT FOR	PHONE	LAST SEEN
Primary care:			

PHARMACY & SERVICES (HOME HEALTH, CASE MANAGER, EQUIPMENT, INSURANCE PHONE LINES)

NAME	WHAT THEY HANDLE	PHONE	NOTES
Pharmacy:			

FAMILY & HELPERS

NAME	ROLE IN CARE	PHONE	BACKUP?

4 Medical History & Conditions

The story a new provider needs in two minutes. Use the wording from discharge paperwork where you can, plus your own plain-language notes.

SafeHands
Care made simple

DIAGNOSES & ONGOING CONDITIONS

CONDITION	SINCE	NOTES (WHO MANAGES IT, HOW IT'S MONITORED)

SURGERIES & HOSPITALIZATIONS

WHAT	WHERE	WHEN

IMMUNIZATIONS

VACCINE	MOST RECENT DATE	NOTES
Flu		
Pneumonia		

FAMILY HISTORY HIGHLIGHTS

5 Appointment Prep & Visit Notes

One page per visit; print plenty. Walking in with written questions is the difference between leaving informed and leaving with more questions.

SafeHands
Care made simple

DATE	PROVIDER & SPECIALTY	REASON FOR VISIT

BEFORE THE VISIT: MY QUESTIONS (WRITE THEM DOWN, CHECK THEM OFF)

DURING THE VISIT: WHAT THE PROVIDER SAID

CHANGES MADE · If medications changed: ☐ I updated the medication list (Section 2)

NEXT STEPS: FOLLOW-UPS, TESTS, REFERRALS, WHAT TO WATCH FOR

6 Daily Care & Routines

Write this page as if the reader has never met your loved one; someday a respite worker, aide, or neighbor will run the day from it.

SafeHands
Care made simple

MORNING

AFTERNOON

EVENING

MEALS & DIETARY RULES (RESTRICTIONS, TEXTURES, INTERACTIONS; E.G. LOW SODIUM, THICKENED LIQUIDS, NO GRAPEFRUIT)

MOBILITY, ASSISTIVE DEVICES & EQUIPMENT (WALKER, OXYGEN SETTINGS, HEARING AIDS, GLASSES)

PERSONAL CARE NOTES (BATHING, TOILETING, SKIN CHECKS)

COMFORTS & PREFERENCES: THE SMALL THINGS THAT KEEP A DAY CALM

7 Symptom & Observation Log

Be specific: "dizzy every morning since the 12th, about 20 minutes after her pills" gets a different response than "dizzy lately."

SafeHands
Care made simple

DATE & TIME	**WHAT YOU NOTICED** (plain words; describe, don't diagnose)	**THE DETAILS** (how long · how often · better or worse with · what was tried · vitals or photo)
7/12, 8:15 am	*Dizzy when standing up, steadied herself on the counter*	*About 20 min · every morning since 7/12 · worse right after breakfast, better sitting down · sat down, water, rested · BP 112/68 at 8:30 am*

BEFORE THE VISIT: TURN THE LOG INTO A TWO-MINUTE STORY

The headline (the one thing to say first): _____

When it started, and what has changed since: _____

The question we most want answered: _____

Review this page before every appointment; patterns that are invisible day-to-day become obvious on paper.

8 Family Coordination Plan

Written down instead of assumed: who does what, who's the backup, and how everyone stays informed.

SafeHands
Care made simple

WHO DOES WHAT

RESPONSIBILITY	WHO OWNS IT	BACKUP	NOTES
Medications & refills			
Appointments & transport			
Finances & insurance			
Groceries & meals			
Home & yard			
Respite / relief shifts			

COMMUNICATION PLAN: HOW UPDATES GET SHARED AFTER APPOINTMENTS

IN AN EMERGENCY, CALL IN THIS ORDER

#	NAME	PHONE	THEN
1			
2			
3			

WHERE THINGS LIVE: BINDER LOCATION, SPARE KEY, IMPORTANT DOCUMENTS

MEDICAL BINDER

for

In an emergency: the Quick-Reference Emergency Sheet is the first page inside this binder. · Put a note on the refrigerator that says where this binder lives; EMS crews are trained to look there.

REVIEW LOG: 10 MINUTES, ONCE A MONTH

DATE REVIEWED	BY	WHAT CHANGED