

FREE CAREGIVER GUIDE

The Caregiver Resource & Supply Guide

Everything a family typically needs on hand when caring for someone at home, grouped room by room and task by task, plus where to look for help beyond supplies.

Most families start caregiving with three emergency trips to a store in the first week, because nobody hands you a list. This is that list. It covers the supplies that come up again and again in home care, organized the way you will actually need them, so you can buy in one pass instead of five.

Not everything here applies to every situation. Work through the categories, check off what fits the person you are caring for, and skip the rest. Anything involving a medical device, a prescription, a wound, or a mobility aid should be sized and set up on the advice of the treating clinician, physical therapist, or occupational therapist. Equipment that is the wrong height or the wrong fit is worse than no equipment at all.

BEFORE YOU BUY ANYTHING

Ask the care team what is already covered. Some items are supplied through a discharge plan, a home health agency, an insurance benefit, or a durable medical equipment provider, and buying them yourself first is a common and expensive mistake. Ask specifically: what will be delivered, what needs a prescription, and what we should have waiting at home.

1. Getting around safely

Mobility and transfer

- ☐ Cane, walker, rollator, or wheelchair as recommended
Have a clinician or therapist set the height and check the fit. A walker at the wrong height changes posture and increases fall risk.
- ☐ Replacement tips, wheels, and glides for canes and walkers
Worn rubber tips are one of the easiest things to overlook and one of the easiest to replace.
- ☐ Walker tray or basket, so hands stay on the frame
- ☐ Transfer belt (gait belt) if the care team has trained you to use one
- ☐ Transfer board or slide sheet for bed-to-chair moves
- ☐ Bed rail or bed assist handle, if approved for this person
- ☐ Chair riser blocks or a firm cushion to raise a low seat
- ☐ Non-slip footwear with a closed back and a firm sole
- ☐ Reacher or grabber tool
- ☐ Threshold ramps for door sills, if a wheelchair or rollator is in use
- ☐ Wheelchair cushion and brake extensions if needed

2. The bathroom, where most falls happen

Bathroom safety

- ☐ Grab bars properly anchored beside the toilet and inside the shower or tub
Suction-mounted bars are not a substitute for bars fixed into structure.
- ☐ Shower chair or tub bench sized to the space
- ☐ Handheld shower head with a long hose
- ☐ Non-slip mat inside the tub or shower, and a non-slip bath mat outside it
- ☐ Raised toilet seat or a toilet safety frame
- ☐ Bedside commode, if getting to the bathroom at night is difficult
- ☐ Long-handled sponge and long-handled shoe horn
- ☐ No-rinse shampoo, no-rinse body wash, and bathing wipes for days when a full wash is not possible
- ☐ Bath towels within reach of the shower seat, and a bathrobe that is easy to put on
- ☐ Night light or motion light on the route from bed to bathroom
- ☐ Lever-style faucet handles or tap turners for stiff hands
- ☐ Water temperature checked and the heater set to avoid scald risk

3. The bed and the sleeping area

Bedroom setup

- ☐ Hospital bed or adjustable bed if the care team has recommended one
- ☐ Waterproof mattress protector, and a second one so you can strip and remake immediately
- ☐ Disposable or washable underpads for the bed and chair
- ☐ Pressure-relieving mattress topper or overlay, if recommended
- ☐ Extra fitted sheets, at least three sets
Laundry capacity is the real constraint. Three sets is the point where night changes stop being a crisis.
- ☐ Positioning pillows and wedges for side-lying, heels, and under knees

- ☐ Bedside table that reaches over the bed
- ☐ Bedside lamp with a switch that can be found in the dark
- ☐ Water within reach, in a cup that does not spill
- ☐ Call bell, handbell, or wireless doorbell button to summon help
- ☐ Trash bin with a lid beside the bed
- ☐ Clear floor path from bed to door with no rugs or cords

4. Skin, continence, and personal care

Skin condition is one of the things families are best positioned to notice early. Check pressure points during routine care, and report new redness that does not fade, broken skin, or any sore to a clinician promptly rather than treating it yourself.

Personal care supplies

- ☐ Adult briefs, pull-ons, or pads in the correct size and absorbency
- ☐ Disposable underpads for chairs and car seats
- ☐ Barrier cream or protective ointment as advised by the care team
- ☐ Gentle, fragrance-free cleanser and a good moisturizer
- ☐ Disposable washcloths and pre-moistened wipes
- ☐ Basin for bed baths, and a separate basin for foot care
- ☐ Nail care kit and a clinician's guidance if the person has diabetes or circulation problems
Foot and nail care may need to be done by a professional in those cases. Ask.
- ☐ Electric razor, which is safer than a blade for shaky hands and blood thinners
- ☐ Oral care supplies: soft brush, denture care, mouth swabs, lip balm
- ☐ Hairbrush, dry shampoo, and a hair-washing tray if the person is bed-bound
- ☐ Adaptive clothing with front closures, elastic waists, or magnetic fasteners
- ☐ Odor-control bags for soiled items
- ☐ Laundry detergent suited to sensitive skin, and a stain and odor treatment

5. Medication management

Follow the labels and the prescriber's instructions exactly. Nothing here suggests changing a dose, splitting a pill, or adding a supplement. All of that is a conversation with the pharmacist or the prescriber.

Medication supplies and systems

- ☐ Weekly or monthly pill organizer, ideally with morning, midday, evening, and bedtime compartments
 - ☐ Pill splitter and pill crusher only if the pharmacist has confirmed a medication can be split or crushed
Many cannot. Ask before assuming.
 - ☐ Medication list printed from the pharmacy, kept current and posted where everyone can see it
 - ☐ Written schedule showing what is taken when, in plain language
 - ☐ Alarms, reminder clock, or a timed dispenser if doses are being missed
 - ☐ Oral syringes and medicine cups for liquid medications
 - ☐ Lockable box for anything that needs to be secured
 - ☐ Sharps container if injections are part of care
Check your local rules for disposal. Household trash is not appropriate.
 - ☐ Pharmacy phone number and the after-hours number on the refrigerator
 - ☐ A single point person for refills, so nobody assumes someone else ordered
 - ☐ A bag or bin to bring every bottle to the next appointment for review
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6. Monitoring and vital signs

Home monitoring equipment

- ☐ Digital thermometer, plus probe covers
 - ☐ Home blood pressure monitor with the correct cuff size
A cuff that is too small or too large gives readings that are not usable. Take the device to an appointment once to check it against the clinic's.
 - ☐ Pulse oximeter if the care team has asked you to track it
 - ☐ Blood glucose meter, test strips, and lancets if diabetes is being managed at home
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- ☐ Scale that is easy and safe to step onto, if the care team has asked for weight tracking
- ☐ A written log for whatever the care team asked you to record, with dates and times
- ☐ Clear written instructions on which numbers mean call the office and which mean call emergency services
Ask for these in writing at the appointment. Do not guess at thresholds.
- ☐ Spare batteries for every device

7. Wound care and first aid

Basic supplies to have on hand

- ☐ Adhesive bandages in several sizes
- ☐ Sterile gauze pads and rolled gauze
- ☐ Paper tape and a gentle silicone tape for fragile skin
- ☐ Non-adherent pads for anything weeping
- ☐ Saline wound wash
- ☐ Antiseptic wipes
- ☐ Elastic bandage and cold packs
- ☐ Blunt-tip bandage scissors and tweezers
- ☐ Any specific dressings prescribed for an existing wound, in quantity
Ask exactly how many per week so you do not run out over a weekend.
- ☐ Skin-protective film or wipes if tape irritates the skin
- ☐ Written wound care instructions from the clinician, kept with the supplies

CALL A CLINICIAN ABOUT A WOUND

Contact the care team for any wound that is not healing, is getting larger, has increasing redness or warmth spreading around it, has drainage or an odor, comes with fever, or is on the foot of someone with diabetes or circulation problems. Do not manage those at home on your own judgment.

8. Infection control

Keeping the care space clean

- ☐ Disposable gloves in the right size, in more than one place in the house
 - ☐ Hand sanitizer at the bedside, the bathroom, and the door
 - ☐ Liquid soap and paper towels at the sink used for care
 - ☐ Surface disinfectant appropriate for the surfaces you are cleaning
 - ☐ Masks, if a clinician has advised them for this situation
 - ☐ Disposable aprons or a set of clothes reserved for hands-on care
 - ☐ Lined, lidded waste bin with tie-off bags
 - ☐ Separate laundry basket for soiled linens
 - ☐ A clear rule about staying away when a helper is sick
Agree it in advance so nobody has to make the call in the moment.
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9. Eating, drinking, and the kitchen

Mealtime supplies

- ☐ Weighted or built-up utensils for a weak or unsteady grip
 - ☐ Plate guard or a plate with a raised rim
 - ☐ Non-slip mat under the plate
 - ☐ Cups with lids and handles, and straws if they help
 - ☐ Insulated mug that keeps a drink warm through a slow meal
 - ☐ Adjustable overbed or lap table
 - ☐ Clothing protectors that do not look like bibs
 - ☐ Thickening products only if a speech-language pathologist or physician has prescribed them
Texture changes for swallowing problems should never be improvised. Ask for a swallowing evaluation if coughing or choking at meals is happening.
 - ☐ Simple, easy-to-chew foods the person actually likes, kept stocked
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- ☐ Prepared meals in the freezer for hard days
- ☐ Water bottle or pitcher kept where they sit most of the day
- ☐ Kitchen timer or written prompt if meals are being forgotten

10. Comfort and daily life

The things that make a long day better

- ☐ Extra-warm blanket, and a lighter one for warm evenings
- ☐ Supportive chair with arms at a height they can rise from unaided
- ☐ Footstool and a lap blanket
- ☐ Good reading light, and a magnifier if vision has changed
- ☐ Large-button phone or a simple phone with photos for contacts
- ☐ Hearing aid batteries or charger, and a spare set of glasses
- ☐ Music they know from memory, on something easy to operate
- ☐ Large-print books, puzzles, cards, or a hobby they can still do comfortably
- ☐ Calendar and clock that show the day and date clearly
- ☐ Photographs and familiar objects within sight of where they spend the day
- ☐ A comfortable chair for whoever is sitting with them

11. Safety and emergency readiness

Home safety

- ☐ Smoke alarms and carbon monoxide alarms tested, with fresh batteries
- ☐ Fire extinguisher in the kitchen, and everyone shown how to use it
- ☐ Night lights along the bed-to-bathroom route and at the top and bottom of stairs
- ☐ Loose rugs removed, cords secured, high-traffic paths cleared

- ☐ Stair handrails secure on both sides where possible
- ☐ Personal emergency alert device or a phone kept on the person, not on a table
- ☐ Emergency contact and medical information sheet on the refrigerator
- ☐ Key access arranged for emergency responders and helpers
- ☐ Flashlights and batteries in known locations
- ☐ One week of medications and supplies set aside for a storm or outage
Rotate it so nothing expires unused.
- ☐ Backup plan for power-dependent equipment, agreed with the supplier in advance
- ☐ Written plan for what happens if the primary caregiver is suddenly unavailable

12. Paperwork and records

The binder

- ☐ Current medication list from the pharmacy
- ☐ List of all clinicians, with phone numbers and what each one treats
- ☐ Insurance cards and member numbers, photographed
- ☐ Allergy list, including reactions to medications, adhesives, and latex
- ☐ Advance directive, health care proxy, or power of attorney, and a note of where the originals are
- ☐ Discharge instructions from any recent hospital stay
- ☐ Daily log or care notes
- ☐ Equipment supplier contacts, model numbers, and warranty information
- ☐ Receipts and records for care expenses
- ☐ A shared calendar everyone helping can see

How often to check and restock

A SIMPLE RHYTHM SO YOU NEVER DISCOVER A GAP AT 10PM ON A SUNDAY

How often	What to check
Weekly	Fill the pill organizer, request any refill with under a week left, restock gloves, wipes, briefs, and underpads, run linens through the wash
Every two weeks	Wound care and dressing supplies, batteries in monitors and hearing aids, personal care items, laundry and cleaning products
Monthly	Walker and cane tips, wheelchair brakes and tires, bathroom safety equipment tightness, expiration dates on first aid and over-the-counter items, test smoke and carbon monoxide alarms
Every three months	Review the whole supply list against how care has changed, re-check equipment fit with a therapist if mobility has changed, refresh the emergency kit
After any hospital stay or change in condition	Rebuild the medication list from scratch, ask what new equipment is needed, ask what is no longer needed, update the emergency sheet

Where to look for help beyond supplies

Families routinely buy their way through problems that other people are set up to solve. Before you spend another weekend on this alone, work through these.

1 Ask for a home safety evaluation

An occupational therapist can walk the home and tell you exactly which equipment matters and where it should go. Ask the treating clinician for a referral.

2 Ask what the insurance or benefit plan covers

Durable medical equipment, home health visits, and some supplies are often covered with the right paperwork. The answer depends entirely on the plan, so ask the plan directly.

3 Contact your local Area Agency on Aging

In the United States, these agencies exist in every region and can point you to meal programs, transportation, respite, and local services. Search for the one covering your county.

4 Ask the hospital or clinic for a social worker or case manager

This is usually the fastest route to coordinated help and it is often free to the family.

5 Find the condition-specific organization

National nonprofits focused on a particular diagnosis typically run helplines, caregiver education, and local support groups.

6 Look into respite care before you need it

Arranging coverage in advance is far easier than arranging it in a crisis, and taking a break is what keeps a caregiver able to keep going.

7 Join one caregiver support group

In person or online. The practical shortcuts other caregivers share are often the most useful information you will get all year.

8 Talk to your own doctor about your own health

Caregiver exhaustion is real and common. Yours is a legitimate reason for an appointment.

ONE LIST, ONE PLACE

Keep this checklist inside the care binder with the items you use ticked, so that when a sibling or a new aide asks what to pick up, you hand them the page instead of trying to remember.

YOUR NEXT STEP

Get the home set up in one pass

SafeHouse Medical stocks the home medical and first aid supplies on this list, from mobility and bathroom safety to wound care, monitoring, and personal care. Work down your checked boxes, order what the care team has recommended, and keep the reorder rhythm on this page so you are never caught short.

Shop the collection at safehousemedical.com

Important. This guide is general information for family caregivers and is not medical advice. It does not diagnose any condition and it is not a substitute for instructions from a qualified clinician. Equipment selection, sizing, and use should be guided by the treating physician, therapist, or home health team, and prescription items and dressings should be used exactly as directed. Never change a medication, dose, or food texture on your own, and call emergency services for sudden, severe, or worsening symptoms.