

<input type="checkbox"/> Membership of Coeliac UK?	<ul style="list-style-type: none"> • Signpost to Coeliac UK Helpline 0333 3022 2033 or coeliac.org.uk for additional support • Using member benefits? Food and Drink Information, Venue Guide, Helpline, social media networks, Local Groups • Coeliac UK's food and symptom diary completed?
<input type="checkbox"/> Measure weight and height and BMI	<ul style="list-style-type: none"> • Weight gain after diagnosis is common due to improved absorption • Unintentional weight loss - Red flag indication
<input type="checkbox"/> Review symptoms	<ul style="list-style-type: none"> • Gastrointestinal symptoms (constipation, diarrhoea, nausea, vomiting) • Mouth ulcers • Fatigue • Neurological symptoms (headache, peripheral neuropathy, ataxia) • New or unchanged symptoms – Red flag indication
<input type="checkbox"/> Assess the need for specific blood tests	<ul style="list-style-type: none"> • Screening for anaemias - full blood count and ferritin • Associated autoimmune conditions – thyroid function tests, liver function tests • Assessment of nutritional deficiencies – folate, vitamin B12, vitamin D and serum calcium
<input type="checkbox"/> Review Nutritional Status	<ul style="list-style-type: none"> • Review of supplements prescribed/purchased over the counter • Calcium intake (diet and supplements). Adults with coeliac disease should have at least 1,000 mg calcium/day • 5 mg folic acid supplementation should be prescribed 3 months pre-conception and for the first 3 months of pregnancy

Stay up to date on the latest developments on the diagnosis and management of coeliac disease at coeliac.org.uk/healthcare-professionals

To access our quarterly email newsletter and exclusive HCP member resources, join at coeliac.org.uk/joinusHCP

<input type="checkbox"/> Assess adherence to the gluten free diet	<ul style="list-style-type: none"> • Tissue transglutaminase (TtG) alone is not a good marker to evaluate adherence or ongoing villous atrophy in patients established on a gluten free diet • Key points and questions to consider asking: <ul style="list-style-type: none"> • How do you check if a food is suitable? • Do you have any difficulties with reading food labels? • What symptoms do you experience after eating gluten? • Even if asymptomatic, gluten causes damage to the gut • How do you manage your diet when eating out or travelling? • Are gluten free oats included in your diet? • Have any nutritional deficiencies improved since diagnosis? • Steps taken to prevent cross contamination? (e.g. separate toaster/toaster bags, different butter/spreads to prevent cross contamination) • Access to and affordability of gluten free foods <ul style="list-style-type: none"> • Access to gluten free food on prescription • Product discounts and gluten free meal plans examples are available from Coeliac UK
<input type="checkbox"/> Assessment of bone health	<ul style="list-style-type: none"> • Consider the need for a dual energy X ray absorptiometry (DEXA) scan (in line with the NICE guideline on osteoporosis: assessing the risk of fragility fracture) or active treatment of bone disease • Signpost to coeliac.org.uk/osteoporosis
<input type="checkbox"/> Check vaccination status	<ul style="list-style-type: none"> • Vaccination recommendations are based on the increased prevalence of hyposplenism in people with coeliac disease • Pneumococcal vaccine and booster every 5 years • Meningococcal A, C, W, Y vaccine for those born between 1995 and 2014 • Consider need for flu vaccine on individual basis • More information at coeliac.org.uk/vaccinations
<input type="checkbox"/> Consider mental health assessment	<p>People with coeliac disease may experience anxiety and depression</p>
<input type="checkbox"/> Consider referral to another healthcare professional	<ul style="list-style-type: none"> • Refer to dietitian if concerns about dietary adherence, concerns about nutritional status or a need for further dietary education is identified • Refer to gastroenterologist if red flag indications are present • Refer to osteoporosis clinic if necessary following assessment of bone health • If non responsive or refractory coeliac disease is suspected, see coeliac.org.uk/rcd for details of specialist support