

POSTPARTUM CARE PLAN

SLEEP

HOW MUCH SLEEP DO I NEED/EXPECT EVERY 24-HOURS?

WHERE WILL THE BABY SLEEP?

- In our bed
- In our room in a bassinet
- In the nursery/separate room

WHO WILL CARE FOR BABY AT NIGHT?
(SELECT ALL THAT APPLY)

- Mom
- Partner
- Family Member/Friend
- Postpartum Doula

FEEDING

I PLAN TO: (SELECT ALL THAT APPLY)

- Breastfeed on demand
- Breastfeed on a schedule
- Pump and bottle feed
- Formula feed

MEALS

WE PLAN TO: (SELECT ALL THAT APPLY)

- Have frozen meals prepared
- Prepare meals day-to-day ourselves
- Create a meal train
- Order take-out _____ times a week

SELF-CARE

WHAT ARE WAYS I CAN PRACTICE SELF-CARE?

WHAT FOOD OR ITEMS PROVIDE ME COMFORT?

WHAT ARE WAYS MY PARTNER CAN HELP ME FEEL RECHARGED?

VISITORS

WE EXPECT TO HAVE __ VISITORS IN THE FIRST 3 DAYS

WE EXPECT TO HAVE __ VISITORS IN THE FIRST 2 WEEKS

WE EXPECT A VISIT FROM A FRIEND TO LAST ____

WE EXPECT A VISIT FROM FAMILY TO LAST ____

HERE IS A LIST OF TASKS VISITORS CAN HELP WITH:

RELATIONSHIPS

IT IS IMPORTANT IN OUR RELATIONSHIP THAT WE:

HERE IS A LIST OF FRIENDS AND FAMILY WHO WE CAN CALL FOR HELP:

ROLES

AS THE MOTHER, I EXPECT MY PARTNER'S ROLE TO BE:

AS THE PARTNER, I EXPECT THE MOTHER'S ROLE TO BE:

CONSIDER WHO WILL BE DOING THE FOLLOWING:

(IT MAY BE ONE OF YOU, BOTH OF YOU, OR SOMEONE YOU HIRE)

Changing diapers

Laundry

Bottle feeding

Housecleaning

Calming the baby

Pet care

Burping the baby

Bills and Finances

Taking the baby on walks

Grocery Shopping

Dinner prep or take out

Other Errands