

Post-Partum

planning and check-in

Important Contacts

OBGYN/Midwife: _____

Doulas: _____

Lactation: _____

Mental Health: _____

Placenta: _____

Pediatrician: _____

Other: _____

Important Info

How much sleep do you typically need? _____

Who will care for baby overnight? _____

Where will baby sleep? _____

Friends/Family we could call anytime: _____

How do you plan to feed baby? _____

It is important to our relationship that we: _____

Visitors

Welcome anytime

Certain hours ()

Limit to

May hold baby?

If mom is napping

Wake if baby needs to eat

Feed Bottle

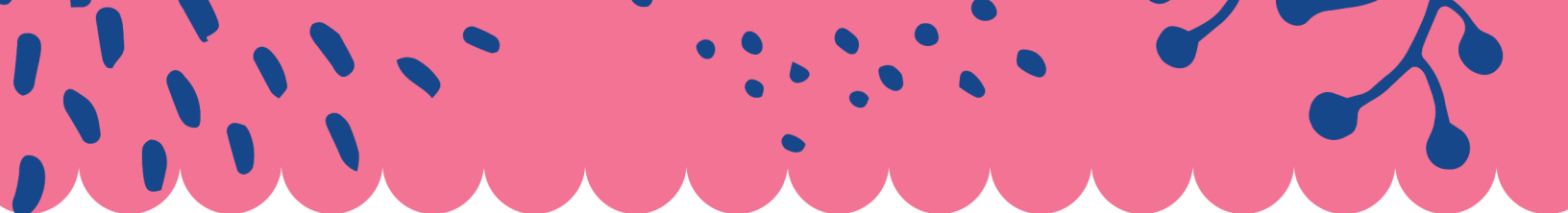
Answer door/phone

Wake for visitors

If breastfeeding

Guests welcome to stay

Guests asked for privacy



Meals

- Frozen meals prepared
- Meal train
- Prep day to day
- Take out ____ times a/week
-
-

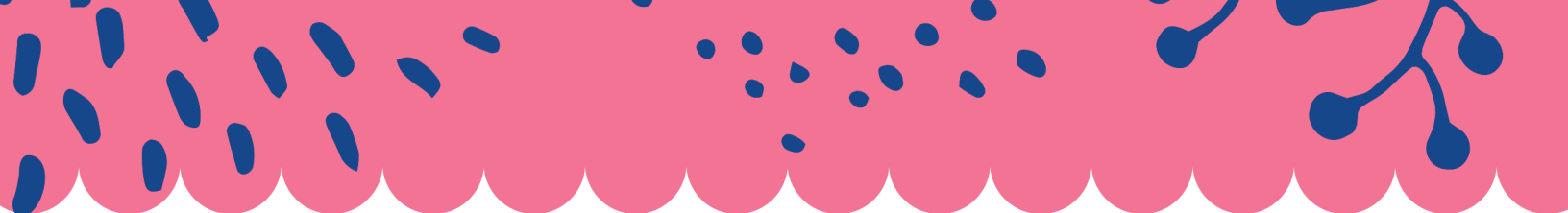
Task Distribution *Initial in box

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Dishes | <input type="checkbox"/> Meal prep |
| <input type="checkbox"/> Trash out | <input type="checkbox"/> Clean bathrooms |
| <input type="checkbox"/> Laundry | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Sweep/vacuum | <input type="checkbox"/> School drop off and pickup |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

Ways for visitors to help

- | | | |
|---|--|----------------------------------|
| <input type="checkbox"/> Change diapers | <input type="checkbox"/> Pet care | <input type="checkbox"/> Errands |
| <input type="checkbox"/> Feed bottle | <input type="checkbox"/> Take baby for walks | <input type="checkbox"/> |
| <input type="checkbox"/> Burp baby | <input type="checkbox"/> House cleaning | <input type="checkbox"/> |
| <input type="checkbox"/> Grocery shopping | <input type="checkbox"/> Meal prep | <input type="checkbox"/> |

Ways we can practice self care:



When I'm overwhelmed/sad

- | | | |
|---|---|---|
| <input type="checkbox"/> Make sure I'm hydrated | <input type="checkbox"/> Physical affection | <input type="checkbox"/> Take baby |
| <input type="checkbox"/> Remind me to take meds | <input type="checkbox"/> Watch tv with me | <input type="checkbox"/> Contact family |
| <input type="checkbox"/> Give me space | <input type="checkbox"/> Make me something to eat | <input type="checkbox"/> Contact friend |
| <input type="checkbox"/> Sit near me | <input type="checkbox"/> Tidy clutter | <input type="checkbox"/> Contact professional |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

As a parent I expect my partner's role to be:

