

## POSTNATAL CARE CHECKLIST

	Task	Notes
<input type="checkbox"/>	1. Diapers	
<input type="checkbox"/>	- Service will be provided by	
<input type="checkbox"/>	- Purchased cloth diapers	
<input type="checkbox"/>	- Will use disposable diapers	
<input type="checkbox"/>		
<input type="checkbox"/>	2. Placenta Preparation	
<input type="checkbox"/>	- Will be provided by	
<input type="checkbox"/>	- Placenta will be dropped off by	
<input type="checkbox"/>	- Placenta will be picked up by	
<input type="checkbox"/>		
<input type="checkbox"/>	3. Postnatal Professional Team	
<input type="checkbox"/>	Midwife	
<input type="checkbox"/>	Obstetrician	
<input type="checkbox"/>	Lactation Consultant	
<input type="checkbox"/>	Other Therapist on hand (Acupuncturist, Massage Therapist)	
<input type="checkbox"/>		
<input type="checkbox"/>	4. Core at Home Team	
<input type="checkbox"/>	- Doula (hours of availability, how long she will be available for)	
<input type="checkbox"/>	- Back up doula	
<input type="checkbox"/>		
<input type="checkbox"/>	5. Family and or Friends that can come by to help	
<input type="checkbox"/>	Names and telephone numbers	
<input type="checkbox"/>	*Doodle will be created by	
<input type="checkbox"/>		
<input type="checkbox"/>	6. Mothers I Can Call	
<input type="checkbox"/>		
<input type="checkbox"/>	7. Social Groups With Other Mothers	
<input type="checkbox"/>	Mommy friends to do play dates with	
<input type="checkbox"/>	Mommy & Me Classes	
<input type="checkbox"/>	Local Groups	
<input type="checkbox"/>	Online Groups	
<input type="checkbox"/>		
<input type="checkbox"/>	8. Social (Core Team Time)	
<input type="checkbox"/>	Regular time slots, even if brief	
<input type="checkbox"/>	By Myself	
<input type="checkbox"/>	With Partner	
<input type="checkbox"/>		
<input type="checkbox"/>	9. Personal Care Items I need for myself	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>	10. Online Grocery List and Passwords, Person whom can do shopping	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>	Anything I'd like to remember in case I forget	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		