

Postpartum Care Plan

Patient Information	
Patient Name:	Date:
Date of Birth:	Physician:
Gestational Age:	Delivery Date:
Address:	
Contact:	
Emergency Contact:	

Postpartum Care	Instructions
Physical Recovery	
Incision/Wound Care	
Pain Management	
Perineal Care	
Activity Level	
Emotional Well-being	
Postpartum Depression/Anxiety Screening	
Support System	
Self-care	

Nutrition and Hydration

Hydration

Nutrition

Breastfeeding

Latching and Positioning

Frequency and Duration

Engorgement Management

Follow-up Care

Postpartum Visit

Contraception

Emergency Contact Information

Obstetrician/Midwife

Hospital/Clinic

Emergency Services