

# Postpartum Checklist

Check if Completed	Category	Details to Consider	Notes/Actions
<input type="checkbox"/>	Physical Health Check	Assess overall physical recovery, including wound healing if applicable.	
<input type="checkbox"/>	Emotional Well-being	Screen for postpartum depression and anxiety.	
<input type="checkbox"/>	Breastfeeding Support	Evaluate the breastfeeding process and address any concerns.	
<input type="checkbox"/>	Nutrition and Hydration	Advise on a balanced diet and adequate fluid intake.	
<input type="checkbox"/>	Sleep and Rest	Discuss strategies for managing sleep with a newborn.	
<input type="checkbox"/>	Physical Activity	Provide guidelines on postpartum physical activity and exercise.	
<input type="checkbox"/>	Follow-up Appointments	Schedule postpartum follow-up appointments.	
<input type="checkbox"/>	Family Planning	Discuss contraception and future family planning.	
<input type="checkbox"/>	Infant Care Education	Provide guidance on newborn care, including safety and basic needs.	
<input type="checkbox"/>	Community Resources	Inform about available community resources and support groups.	
<input type="checkbox"/>	Emergency Contacts	Provide information on whom to contact in case of an emergency.	

## Doctor's Acknowledgment

Name of Doctor: \_\_\_\_\_

Signature: Jefferson \_\_\_\_\_

Date: \_\_\_\_\_