



Newborn *and* Baby Planner



scan to print more

B.loved
Baby

Date:

Day of the Week

m t w th f s s

Yesterday was

☐ great ☐ ok ☐ not so good

bonded w/ baby ☐ yes ☐ no

felt sad often ☐ yes ☐ no

had a cry ☐ yes ☐ no

bonded w/ baby ☒ yes ☐ no
 felt sad often ☒ yes ☐ no
 had a cry ☒ yes ☐ no

How baby slept last night

● great ● ok ● not so good

[illegible]

Diapers

time	pee	poop
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐

totals:

Pee Poop

[illegible]

Activities

- bath
- tummy time
- stroller ride
- massage
- _____

Medication

dose amt: _____

dose 1: _____ am / pm

dose 2: _____ am / pm

dose 3: _____ am / pm

dose 4: _____ am / pm

dose 5: _____ am / pm

Shopping List

- ☐
- ☐
- ☐
- ☐

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time	pee	poop
am / pm	☐	☐
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am / pm	☐	☐
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am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐

totals:

☐

Pee

☐

Poop

[illegible]

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Baby Log

How baby slept last night

● great ● ok ● not so good

Feeding Schedule

time	duration	breast	bottle	pump
<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
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<u> </u> am / pm	<u> </u> min	L / R	<u> </u> oz	<u> L </u> / <u> R </u> <u> </u> oz
totals:		<u> </u> min	<u> </u> oz	<u> </u> oz

[illegible]

Diapers

time	pee	poop
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐
am / pm	☐	☐

totals:

☐

Pee

☐

Poop

time	pee	poop
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
am / pm		
totals:	Pee	Poop

[illegible][illegible]

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