

HOSPITAL BAG CHECKLIST

FUN *cheap* OR FREE

FOR MOM		FOR DAD	
ENTERTAINMENT	<input type="checkbox"/> BOOKS, MAGAZINE <input type="checkbox"/> JOURNAL <input type="checkbox"/> IPAD WITH KEYBOARD OR LAPTOP <input type="checkbox"/> CHARGERS, CHARGING STATION <input type="checkbox"/> ELECTRONICS BAG <input type="checkbox"/> BLUETOOTH SPEAKER <input type="checkbox"/> WIRELESS HEADPHONES	ESSENTIALS	<input type="checkbox"/> ENTERTAINMENT - SEE MOM'S LIST <input type="checkbox"/> EYE MASK & EAR PLUGS <input type="checkbox"/> PILLOW & BLANKET <input type="checkbox"/> CAMERA <input type="checkbox"/> COMFY CLOTHES & PAJAMAS <input type="checkbox"/> CHANGE OF CLOTHES <input type="checkbox"/> SWEATSHIRT <input type="checkbox"/> TOILETRIES <input type="checkbox"/> SNACKS
	<input type="checkbox"/> NURSING ROBE <input type="checkbox"/> NURSING BRA <input type="checkbox"/> STRETCHY TANK <input type="checkbox"/> NURSING COVER <input type="checkbox"/> CHANGE OF CLOTHES <input type="checkbox"/> SLIPPERS & COMFY SOCKS <input type="checkbox"/> COMFY GOING HOME OUTFIT <input type="checkbox"/> NURSING PADS		<input type="checkbox"/> NEWBORN "COMING HOME" OUTFIT <input type="checkbox"/> SOFT BABY SWADDLES <input type="checkbox"/> BOWS & CAPS <input type="checkbox"/> BINKY CLIP <input type="checkbox"/> CARSEAT <input type="checkbox"/> CARSEAT COVER <input type="checkbox"/> SOCKS OR BOOTIES <input type="checkbox"/> DIAPER BAG WITH EXTRA ROOM
CLOTHING	<input type="checkbox"/> TRAVEL BRUSH <input type="checkbox"/> HAIR TIES <input type="checkbox"/> DEODORANT <input type="checkbox"/> DRY SHAMPOO <input type="checkbox"/> TOOTHBRUSH & TOOTHPASTE <input type="checkbox"/> MAKEUP <input type="checkbox"/> WATERPROOF MASCARA <input type="checkbox"/> CHAPSTICK <input type="checkbox"/> FACE WIPES <input type="checkbox"/> SHAMPOO, CONDITIONER, BODY WASH <input type="checkbox"/> GLASSES, CONTACTS, SOLUTION <input type="checkbox"/> LANOLIN <input type="checkbox"/> MEDICATION	ESSENTIALS	<input type="checkbox"/> BIRTH PLAN <input type="checkbox"/> WALLET & ID <input type="checkbox"/> PEN <input type="checkbox"/> DECK OF CARDS <input type="checkbox"/> GUM <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
	<input type="checkbox"/> OTHER		<input type="checkbox"/> OTHER
ESSENTIALS		ESSENTIALS	