

# Hospital packing list

|                          | Item                                                    | Packed |
|--------------------------|---------------------------------------------------------|--------|
|                          | FOR YOU                                                 |        |
| <input type="checkbox"/> | Birth plan and hospital notes                           |        |
| <input type="checkbox"/> | Loose, comfortable clothes for labour                   |        |
| <input type="checkbox"/> | Dressing gown, and slippers or flip-flops               |        |
| <input type="checkbox"/> | Nightwear, front-opening if you plan to breastfeed      |        |
| <input type="checkbox"/> | 3 changes of comfortable clothes, socks and underwear   |        |
| <input type="checkbox"/> | Nursing bras and breast pads                            |        |
| <input type="checkbox"/> | Maternity pads                                          |        |
| <input type="checkbox"/> | Wash bag, towels and your own pillow                    |        |
| <input type="checkbox"/> | Snacks, drinks and a water bottle                       |        |
| <input type="checkbox"/> | Any medicines you take; spare glasses or contact lenses |        |
| <input type="checkbox"/> | Phone and charger                                       |        |
|                          | FOR THE BABY                                            |        |
| <input type="checkbox"/> | Bodysuits, vests and sleepsuits                         |        |
| <input type="checkbox"/> | An outfit for going home, with a hat, mittens and socks |        |
| <input type="checkbox"/> | Diapers, wipes or cotton wool, and muslin cloths        |        |
| <input type="checkbox"/> | A blanket, and a snowsuit if it is cold                 |        |
| <input type="checkbox"/> | Car seat for the trip home                              |        |
|                          | FOR YOUR BIRTH PARTNER                                  |        |
| <input type="checkbox"/> | A change of clothes and toiletries                      |        |
| <input type="checkbox"/> | Phone, charger, snacks and drinks                       |        |
| <input type="checkbox"/> | Change for parking and vending machines                 |        |