



# TROUBLESHOOTING MOMS LLC<sup>®</sup> HOSPITAL BAG CHECKLIST

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FOR MOM		FOR BIRTH PARTNER	
FOR MOM	<input type="checkbox"/> Insurance card	FOR MOM	<input type="checkbox"/> Shampoo
	<input type="checkbox"/> Hospital paperwork and ID		<input type="checkbox"/> Conditioner
	<input type="checkbox"/> Phone and phone charger/ Camera		<input type="checkbox"/> Lotion/moisturizer
	<input type="checkbox"/> Birth Plan		<input type="checkbox"/> Eye mask
	<input type="checkbox"/> Bath towel and bath sponge		<input type="checkbox"/> Lip Balm
	<input type="checkbox"/> Prenatal vitamins		<input type="checkbox"/> Face wash
	<input type="checkbox"/> 2 Nursing Bra/nursing tanks		<input type="checkbox"/> If you need contact lens and case and solution
	<input type="checkbox"/> Nursing Pads		<input type="checkbox"/> Eyeglasses if you need one
	<input type="checkbox"/> Comfortable socks or compression socks		<input type="checkbox"/> Sunglasses
	<input type="checkbox"/> Slippers or and comfortable shoes		<input type="checkbox"/> Books/entertainment/magazine
	<input type="checkbox"/> Bathrobe		<input type="checkbox"/> Toothbrush
	<input type="checkbox"/> Sweater		<input type="checkbox"/> Toothpaste
	<input type="checkbox"/> Comfortable pajamas/nightgowns		<input type="checkbox"/> Deodorant, hypoallergenic
	<input type="checkbox"/> Yoga pants		<input type="checkbox"/> Body wash
	<input type="checkbox"/> Underwear/disposable underwear		<input type="checkbox"/> Hair tie/ headband
	<input type="checkbox"/> Ear Plugs		<input type="checkbox"/> Hairbrush
	<input type="checkbox"/> Pillow makes you comfortable		<input type="checkbox"/> Cosmetics and skin care
	<input type="checkbox"/> Healthy snacks/drinks		<input type="checkbox"/> Comfortable going-home clothes
	<input type="checkbox"/> Heavy-duty maternity pads		
		FOR BIRTH PARTNER	<input type="checkbox"/> Pajamas
			<input type="checkbox"/> Clothes and Comfortable going-home clothes
			<input type="checkbox"/> Shampoo
			<input type="checkbox"/> Conditioner
			<input type="checkbox"/> If you need contact lens and case and solution
			<input type="checkbox"/> Eyeglasses if you need one
			<input type="checkbox"/> Sunglasses
			<input type="checkbox"/> Books/entertainment
			<input type="checkbox"/> Toothbrush
			<input type="checkbox"/> Toothpaste
			<input type="checkbox"/> Razor
			<input type="checkbox"/> Deodorant, hypoallergenic
			<input type="checkbox"/> Body wash
			<input type="checkbox"/> Hairbrush
			<input type="checkbox"/> Snacks and drinks
			<input type="checkbox"/> Slippers
			<input type="checkbox"/> Phone and phone charger
			<input type="checkbox"/> Pillow
FOR BABY			
FOR BABY	<input type="checkbox"/> Bottles	FOR BABY	<input type="checkbox"/> Footed pajamas
	<input type="checkbox"/> 0 size nipples		<input type="checkbox"/> Onesies/bodysuits
	<input type="checkbox"/> Formula		<input type="checkbox"/> Socks and booties
	<input type="checkbox"/> Bibs		<input type="checkbox"/> Going home outfit
	<input type="checkbox"/> Burp Cloths		<input type="checkbox"/> Diapers
	<input type="checkbox"/> Hat		<input type="checkbox"/> Wipes
		FOR BABY	<input type="checkbox"/> Diaper cream
			<input type="checkbox"/> Nursing pillow
			<input type="checkbox"/> Pacifier
			<input type="checkbox"/> Swaddle
			<input type="checkbox"/> Car seat
		<input type="checkbox"/> Car seat cover	