

2 week check

Baby's Name _____

(please circle all that apply)

My baby's birth weight was: _____

Since the last visit my baby has been fed:

only at the breast only the bottle breast and bottle other

We are having trouble with the feedings:

yes no

My baby is spending more time awake:

yes no

My baby moves one side of its body more than the other:

yes no

My baby's personality seems to be:

easy/laid back hard to please/fussy other

The family is getting into a manageable routine with this baby:

yes no

Baby sleeps on its:

back side tummy

Do you have any question or concerns? (if yes, Please list)