

Pregnancy Checklist

Checklist · 112 items · 8 sections

The full 9-month pregnancy plan. Covers pre-pregnancy prep, every prenatal appointment and test, foods and activities to avoid, vaccines, labor signs, postpartum recovery, maternity leave, and insurance paperwork. Built from ACOG, CDC, Mayo Clinic, and March of Dimes guidance. Cross-reference with the Birth Plan Checklist for delivery preferences, the Hospital Bag Checklist for the bag, the Baby Registry Checklist for purchases, and the Newborn Checklist for the first month.

Open the editable, AI-powered version online:

<https://genechecklist.com/checklist/pregnancy-checklist>

PRE-PREGNANCY / TRYING TO CONCEIVE

- Start a prenatal vitamin with 400-800 mcg folic acid at least 1 month before conception

HIGH

CDC: folic acid prevents 50-70% of neural tube defects.

- Book a preconception visit with your OB or family doctor

HIGH

ACOG: review meds, vaccines, family history, chronic conditions.

- Update vaccines: MMR, varicella, Tdap, flu, COVID-19, hepatitis B

HIGH

Live vaccines (MMR, varicella) need 1 month before conception.

- Stop alcohol, cannabis, and nicotine; ask about prescription med safety

HIGH

No known safe amount of alcohol in pregnancy (CDC).

- Get to a healthy BMI range if possible (18.5-24.9)

BMI affects fertility, miscarriage risk, gestational diabetes.

- Track your cycle and identify your fertile window

Ovulation typically 12-14 days before next period.

- Request carrier screening for genetic conditions (cystic fibrosis, SMA, Tay-Sachs)

ACOG: offer to all patients planning pregnancy.

- Check dental insurance and book a cleaning before conception

Gum disease is linked to preterm birth (March of Dimes).

- Review your health insurance maternity coverage and in-network hospitals

HIGH

Confirm OB, hospital, and NICU coverage.

- Stop hormonal birth control 1-3 months early if tracking cycles matters

Cycles may take 1-3 months to regulate after IUD or pill.

FIRST TRIMESTER (0-13 WEEKS)

- Take a home pregnancy test 1 week after missed period
HIGH
First-morning urine gives the clearest result.
- Calculate your due date (LMP + 280 days); confirmed by dating ultrasound
HIGH
- Book your first prenatal appointment for 8-10 weeks
HIGH
ACOG: dating ultrasound 8-13 weeks.
- Continue prenatal vitamin daily with folic acid, iron, DHA, vitamin D, calcium
HIGH
Look for 400-800 mcg folic acid, 27 mg iron, 200 mg DHA.
- Schedule first-trimester bloodwork: blood type, Rh, CBC, HIV, syphilis, hep B, rubella
HIGH
- Discuss NIPT (non-invasive prenatal testing) from 10 weeks onward
HIGH
Screens for trisomy 21, 18, 13 and can reveal sex.
- Decide whether to do nuchal translucency scan at 11-14 weeks
- Tell your employer when you are ready (no legal requirement on timing)
FMLA protection starts once you notify in writing.
- Manage nausea with small frequent meals, ginger, B6, and Unisom if needed
HIGH
ACOG approves doxylamine-pyridoxine (Diclegis) for morning sickness.
- Hydrate aggressively, especially if vomiting; call OB if you cannot keep fluids down
HIGH
Hyperemesis gravidarum affects 1-3% of pregnancies.
- Sleep on your side once second trimester starts; left side improves blood flow
Avoid back-sleeping after 20 weeks.
- Cut caffeine to under 200 mg per day (about one 12 oz coffee)
HIGH
ACOG limit; higher amounts linked to miscarriage risk.
- Avoid changing cat litter (toxoplasmosis risk)
HIGH
- Avoid hot tubs, saunas, and core body temp above 102.2°F
HIGH
Linked to neural tube defects in first trimester.
- Get the flu shot if pregnant during flu season
HIGH

CDC: safe in any trimester.

- Track first-trimester miscarriage warning signs: heavy bleeding, severe cramping

HIGH

Call OB if bleeding soaks a pad in an hour.

- Start a pregnancy journal or photo log if you want one

SECOND TRIMESTER (14-27 WEEKS)

- Schedule anatomy scan (level 2 ultrasound) at 18-22 weeks

HIGH

Checks all organ systems, placenta, amniotic fluid.

- Decide whether to learn baby's sex at the anatomy scan

- Book glucose tolerance test (GTT) for 24-28 weeks

HIGH

ACOG screens all pregnancies for gestational diabetes.

- Get the Tdap vaccine between 27 and 36 weeks

HIGH

Protects newborn from pertussis.

- Get the RSV vaccine (Abrysvo) between 32-36 weeks if pregnant Sept-Jan

HIGH

CDC recommendation as of 2023.

- Start tracking fetal movement; first kicks usually felt 18-25 weeks

HIGH

Daily kick counts begin around 28 weeks.

- Buy maternity clothes once regular clothes stop fitting (16-20 weeks)

Bra size often changes 1-2 cups by mid-pregnancy.

- Start your baby registry around 20 weeks

Most retailers offer welcome boxes and completion discounts.

- Research childbirth classes and book for the third trimester

Lamaze, Bradley, hospital-based, or hypnobirthing.

- Choose a pediatrician and book a meet-and-greet

HIGH

Many practices want you confirmed before birth.

- Tour potential delivery hospitals and confirm L&D admission process

- Discuss VBAC, planned C-section, or vaginal birth preferences with OB

- Start pelvic floor exercises (Kegels) daily

Reduces incontinence and tearing risk (ACOG).

- Continue 150 minutes of moderate exercise per week unless restricted

ACOG: walking, swimming, prenatal yoga, stationary bike.

- Get your second-trimester dental cleaning

Safest window for dental work is 14-20 weeks.

- Track weight gain: target 25-35 lbs total for normal BMI

Underweight: 28-40 lbs. Overweight: 15-25. Obese: 11-20 (ACOG).

- Watch for preeclampsia signs: severe headache, vision changes, upper-right abdominal pain, sudden swelling

HIGH

Call OB immediately; preeclampsia can develop from 20 weeks.

- If Rh-negative, schedule RhoGAM injection at 28 weeks

HIGH

Prevents Rh sensitization affecting baby.

THIRD TRIMESTER (28-40 WEEKS)

- Switch to biweekly OB appointments at 28-36 weeks, then weekly from 36 weeks

HIGH

- Do daily fetal kick counts starting at 28 weeks

HIGH

ACOG: 10 movements in 2 hours is reassuring; call OB if fewer.

- Schedule Group B Strep (GBS) swab at 36-37 weeks

HIGH

Positive result means IV antibiotics during labor.

- Confirm Tdap (27-36w) and RSV (32-36w if applicable) are done

HIGH

Maternal antibodies cross placenta to protect newborn.

- Write your birth plan and share with OB at 32-34 weeks

HIGH

- Tour the labor and delivery unit

Confirm entrance, parking, and triage process for after-hours arrival.

- Complete childbirth, breastfeeding, and infant CPR classes by 36 weeks

HIGH

Most run 4-6 weeks, so start by week 30.

- Install the infant car seat by 35 weeks and get it inspected

HIGH

Free inspections at fire stations and NHTSA CPS technicians.

- Pack your hospital bag by 36 weeks

HIGH

- Pre-register with the hospital and submit insurance paperwork

HIGH

Saves hours during labor admission.

- Stock the freezer with 2-4 weeks of postpartum meals

Soups, casseroles, breakfast burritos freeze well.

- Set up the nursery: crib, bassinet, changing area, swaddles, sleep sacks

AAP: bare crib, firm mattress, no bumpers or loose bedding.

- Wash all baby clothes 0-3M and 3-6M in fragrance-free detergent (Dreft, All Free Clear)
- Decide on cord blood banking, delayed cord clamping, vitamin K, erythromycin eye ointment
Add decisions to birth plan.
- Choose between breastfeeding, formula, or combo feeding
If pumping, order pump through insurance (covered under ACA).
- Learn the 5-1-1 rule for going to the hospital
HIGH
Contractions 5 minutes apart, lasting 1 minute, for 1 hour.
- Recognize labor signs vs Braxton Hicks: regularity, increasing intensity, no relief with rest
HIGH
- Know when to call OB immediately: water breaks, bleeding, decreased movement, severe pain
HIGH
- Discuss labor induction options with OB if pregnancy reaches 39-41 weeks
ACOG ARRIVE trial supports elective induction at 39w for low-risk pregnancies.

LABOR AND DELIVERY PREP

- Save OB, L&D triage, doula, and pediatrician numbers to your phone favorites
HIGH
Add to partner's phone too.
- Map the fastest route to the hospital and a backup route
Test it at rush hour.
- Arrange backup childcare for older kids and pet care
HIGH
Have a 24/7 contact who can be there within 30 minutes.
- Decide who is allowed at the hospital and who you will call after birth
Hospital may limit support people to 1-2.
- Discuss pain management preferences: epidural, nitrous oxide, IV meds, unmedicated
HIGH
Decisions can change during labor; document preferred default.
- Confirm cord blood banking kit is at home and bring to hospital
Only if signed up with a private or public bank.

POSTPARTUM CARE (FIRST 6 WEEKS)

- Book baby's first pediatrician visit for 3-5 days after birth
HIGH
AAP: weight check and jaundice screen.
- Schedule your 6-week postpartum OB visit (ACOG also recommends a 3-week check-in)
HIGH
- Watch for postpartum depression signs: hopelessness, intrusive thoughts, inability to bond
HIGH

HIGH

Affects 1 in 7. Call OB or 988 if symptoms appear.

- Take the Edinburgh Postnatal Depression Scale at 2, 4, and 6 weeks

HIGH

Score over 10 warrants follow-up.

- Watch for postpartum hemorrhage: soaking a pad in under an hour, dizziness, large clots

HIGH

Call OB or 911 immediately.

- Watch for postpartum preeclampsia (up to 6 weeks): severe headache, vision changes, swelling

HIGH

CDC: more dangerous than pregnancy preeclampsia.

- Use peri bottle, witch hazel pads, dermoplast for perineal recovery (vaginal birth)

HIGH

Ice packs for first 24 hours.

- C-section incision care: keep dry, watch for redness/discharge, no lifting over 10 lbs for 6 weeks

HIGH

Call OB for fever over 100.4 or pus.

- Take stool softener (Colace) for the first 1-2 weeks

Iron and pain meds cause constipation.

- If breastfeeding, book a lactation consultant for week 1

HIGH

Many insurers cover IBCLC visits 100% under ACA.

- Continue prenatal vitamin while breastfeeding

- Sleep when baby sleeps; accept all help offered

HIGH

Sleep deprivation worsens PPD risk.

- Resume light walking once cleared (usually 1-2 weeks vaginal, 4-6 weeks C-section)

No core or pelvic floor work until 6-week clearance.

- Avoid sex, tampons, submerged baths until cleared at 6 weeks

HIGH

Infection risk before cervix closes.

- Discuss postpartum contraception at 6-week visit

Ovulation can return before first period.

PRACTICAL ADMIN (LEAVE, INSURANCE, FINANCES)

- Request FMLA paperwork from HR by week 20

HIGH

FMLA: 12 weeks unpaid job-protected leave.

- Check state paid family leave (CA, NY, NJ, MA, WA, CO, OR, CT, RI, DC)

HIGH

Paid benefits vary by state.

- Apply for short-term disability if your employer offers it

HIGH

Typically covers 6-8 weeks of partial pay.

- Confirm maternity leave start date and return date in writing with HR
HIGH
- Order birth certificate and Social Security card at the hospital
HIGH
Hospital usually handles forms before discharge.
- Add baby to health insurance within 30-60 days of birth
HIGH
Birth is a qualifying life event; missing the deadline = no coverage.
- Update your tax W-4 to add a dependent
- Set up a 529 college savings plan or custodial account if planned
Can wait until SSN arrives (2-4 weeks).
- Update your will, life insurance beneficiaries, and guardianship designation
HIGH
Do this before maternity leave ends.
- Apply for WIC if eligible (income-based, covers formula and food)
USDA program; apply during pregnancy for prenatal benefits.
- Research and tour daycares if returning to work (waitlists 6-18 months)
HIGH
Start at 20 weeks pregnant; popular centers fill fastest.
- Set up a postpartum meal train or grocery delivery for the first 4 weeks

FOODS AND ACTIVITIES TO AVOID

- Avoid alcohol entirely (CDC: no known safe amount at any stage)
HIGH
- Avoid raw or undercooked fish, sushi, raw oysters (listeria and parasite risk)
HIGH
- Avoid high-mercury fish: shark, swordfish, king mackerel, tilefish, bigeye tuna (FDA/EPA)
HIGH
- Limit canned light tuna to 2-3 servings/week; albacore to 1 (FDA 'Best Choices' list)
- Avoid deli meats and hot dogs unless heated to steaming (165°F): listeria risk
HIGH
- Avoid unpasteurized soft cheeses: brie, feta, queso fresco, blue cheese
HIGH
Check label for 'pasteurized.'
- Avoid raw or undercooked eggs (homemade Caesar, raw cookie dough, runny yolks)
HIGH
- Avoid raw sprouts (alfalfa, mung bean, clover): bacterial contamination risk
HIGH

- Avoid unpasteurized juice and milk (E. coli, listeria risk)
HIGH
- Avoid changing cat litter and gardening in soil without gloves (toxoplasmosis)
HIGH
- Avoid hot tubs, saunas, and overheating during exercise
HIGH
- Avoid contact sports, scuba diving, skiing, horseback riding, high-fall-risk activities (ACOG)
HIGH
- Avoid cannabis including edibles and CBD (ACOG/CDC: linked to low birth weight)
HIGH
- Avoid x-rays unless medically necessary; tell every provider you are pregnant
Dental x-rays with abdominal shielding are generally safe.
- Avoid retinoids (isotretinoin, topical retinol), high-dose vitamin A, certain acne meds
HIGH
Teratogenic; check every Rx and OTC with OB.