

DAILY INFANT LOG

Date:

Weight:

Feeding Schedule

TIME	TYPE (BREAST/BOTTLE)	AMOUNT (OZ/ML)	NOTES
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Sleep & Naps

START TIME	END TIME	DURATION	QUALITY/MOOD
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Diapers & Health

TIME	TYPE (WET/DIRTY)	MEDICATION / VITAMINS / NOTES
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Daily Notes & Milestones

Special moments, concerns, or reminders for tomorrow...