

PREGNANCY JOURNEY TRACKER

Name: _____ Due Date: _____

FIRST TRIMESTER (WEEKS 1-12)

Positive Pregnancy Test *Date:* _____

First Prenatal Visit *Date:* _____

Heard Baby's Heartbeat *Date:* _____

Morning Sickness Peak *Date:* _____

SECOND TRIMESTER (WEEKS 13-26)

Gender Reveal / Discovery *Date:* _____

First Flutters (Quickening) *Date:* _____

Anatomy Ultrasound *Date:* _____

Visible Baby Bump *Date:* _____

THIRD TRIMESTER (WEEKS 27-40)

Nursery Completed *Date:* _____

Hospital Bag Packed *Date:* _____

Baby Shower Celebration *Date:* _____

The Final Countdown *Date:* _____

SELF CARE & PREP

Maternity Photoshoot *Date:* _____

Birth Plan Drafted *Date:* _____

Prenatal Yoga / Exercise *Date:* _____

Selected Pediatrician *Date:* _____

PERSONAL MEMORIES & NOTES