

COORDINATING CARE: PRENATAL RECOVERY PLANNING SHEET

A supportive tool to organize your care,
team, and recovery goals during pregnancy.



MEDICAL & PRENATAL CARE TEAM

Who are the key people on your care team right now?
Are there appointments you still need to schedule?
Do you have a birth plan or recovery-informed preferences?



SUPPORT SYSTEM & COMMUNICATION

Who do you feel safe turning to for emotional support?
Is there someone you'd like to bring to appointments
or meetings?
How can others best support you (e.g., listening, rides, childcare)?



RECOVERY & RELAPSE PREVENTION

What helps you stay grounded on hard days?
What warning signs tell you you're struggling?
Do you have a plan if cravings or setbacks show up?



YOUR VOICE & YOUR BOUNDARIES

What's something you want providers to understand
about you?
Are there words, topics, or approaches that feel harmful?
What helps you feel safe and respected in your care?



Underrated
Superhero

PRENATAL RECOVERY PLANNING

BASIC PRENATAL CARE

Due date: _____

Prenatal provider(s): _____

Planned birthing location: _____

SUPPORT SYSTEM

Trusted support people _____

Who can I call in a hard moment? _____

SUBSTANCE USE & RELAPSE PREVENTION

Substances I've used in the past: _____

Triggers or high-risk moments I expect: _____

Strategies I can use to cope _____

MEDICAL & LEGAL CONSIDERATIONS

What I want my providers to know: _____

Concerns I have about CPS, testing, or documentation: _____

A reminder I want to carry with me: _____