

1. How will you lay your baby down to sleep? (check all that apply)

- Back Tummy Side Not sure

2. Where will your baby sleep at home? (check all that apply)

- Bassinet in my room My bed Swing
 Portable crib in my room Toddler bed Car seat
 Crib in my room Twin or larger bed Don't know/not sure
 Crib in the baby's room Couch/sofa/armchair Other (specify) _____

3. Please check the items that are already in your baby's sleeping area at home, or that you plan to get for your baby's sleeping area.

- Firm mattress Loose blanket Pillow Sleep positioner
 Fitted sheet Bumper pad Stuffed toy Other (specify) _____
 Wearable blanket

4. Will you talk about Safe Sleep with others who may put your baby down to sleep?

- Yes No

Date: _____

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