

# **Bedrest Activity Checklist**

Use this chart to work with your physician on the appropriate level of activity for each stage of your pregnancy:

### **Overall Activity**

- Normal
- Slight decrease
- Significant decrease
- Complete bedrest

### **Driving**

- Drive as normal
- Drive only as needed
- Passenger only
- Ride only to appointments

**Employment** (Physician should know what your job entails: physical requirements like how much time you spend standing, stress level, details of your commute, etc.)

 Work full-time as usual	
 Work part-time for only	hours
 Work from home for only _	hours
In what position:	
chair recliner	lying on side
 Other	
 Stop working completely	

### **Child Care**

- Care for children as usual
- No breastfeeding
- No carrying children
- No lifting children
- No bending or stooping
- Need childcare provider

#### Leisure

- Normal activities
- Stop intense activities like jogging, climbing, etc.
- Short walks only
- Sit at desk/table only
- Recline: watch TV, talk on phone, read
- Activities lying down only

General Mobility (Physician should know if you live in a multi-story house or walk up several flights of stairs to your apartment.)  — Normal mobility  — Limited (sitting mostly)  — Lie down hours per day  — May go up/down stairs times  — Light walking only  — Sit to eat only  — Recline all day  — Lie flat all day (on left or right side?)  — Use wheelchair
Bathroom Privileges  — Normal bathroom privileges  — Avoid constipation  — Must use bedside toilet  — Must use bedpan  — Short showers only  — Shower sitting down only (using shower chair)  — Reclined bath only  — Bedside sponge bath only

## **Sexual Relations**

- Normal relations
- Occasional relations only

— Other \_\_\_\_\_

- Avoid intercourse
- Avoid female stimulation/orgasm
- No sexual relations

## **Household Activities**

<ul> <li>Heavy: laundry, vacuum, change bed shee</li> </ul>	ets
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- Prepare meals, wash dishes (standing)
- Light: dusting, straighten beds
- Grocery shopping
- Other \_\_\_\_\_