

Most baby registries are too long. This one is built around what a baby actually needs, what a recovering parent actually needs, and what the evidence says about sleep and development — with a short list of popular products worth skipping.

Dr. Eva Lassey, PT, DPT reviewed the developmental, motor, and sensory sections. Safe sleep guidance follows the American Academy of Pediatrics. Nothing here is medical advice for your particular child, and your pediatrician's instructions come first.

Sleep

Safe sleep is the one place to follow the standard exactly: **alone, on the back, in a crib**, on a firm flat surface, with nothing else in it. Room-sharing without bed-sharing is recommended for at least the first six months.

- ☐ **Crib, bassinet, or play yard** that meets current federal safety standards — firm, flat, and level
- ☐ **Firm mattress that fits with no gap** at the sides, plus 2–3 fitted sheets sized for it
- ☐ **Sleep sacks or wearable blankets** in the right size — these replace loose blankets entirely
- ☐ **Swaddles** for the newborn weeks, stopped as soon as your baby shows any sign of rolling
- ☐ **Waterproof mattress protectors**, two, so a 3 a.m. change doesn't require laundry first
- ☐ **Blackout covering** for the window
- ☐ **A sound machine** if you want one — placed well away from the crib and kept at a low volume

Sleep products to skip

- × **Crib bumpers**, including mesh and “breathable” versions
- × **Sleep positioners and wedges** — these are not recommended for sleep
- × **Weighted swaddles, sacks, and blankets** for infants
- × **Loose blankets, pillows, and stuffed animals** in the sleep space
- × **Inclined sleepers**
- × **Anything that lets a baby sleep at an angle** or with the head unsupported — car seats and swings are for supervised, awake time

Feeding

Flange sizing is the single most common pumping problem and the easiest to fix. A lactation consultant can size you in one visit.

- ☐ **Bottles** — buy two or three of one kind before committing; babies have opinions
- ☐ **Slow-flow nipples** to start, sized up only when your baby tells you it's time
- ☐ **Bottle brush and drying rack**
- ☐ **Burp cloths** — more than you think, ten is not excessive
- ☐ **Bibs**, the small dribble kind for now, the full-coverage kind from around six months
- ☐ **If breastfeeding:** nursing pillow, nipple cream, nursing pads, and a comfortable place to sit with everything in arm's reach
- ☐ **If pumping:** pump, correctly sized flanges, storage bags, and a dedicated set of parts you don't have to wash between sessions
- ☐ **If formula feeding:** formula, a measured pitcher or dispenser, and a way to warm bottles
- ☐ **Around six months:** a high chair with an adjustable, supportive footrest

Why the footrest matters

A high chair with a footrest is worth more than almost anything else in this section. A baby whose feet dangle spends energy stabilizing rather than eating, and stability at the trunk is what frees up the fine motor control needed to bring food to the mouth. If the chair you have lacks one, a firm box or a folded towel under the feet does the same job.

Diapering and bathing

Never step away from a baby on a changing table, even strapped. Keep one hand on them and everything you need within reach before you start.

- ☐ **Diapers** — one box of newborn size only; babies outgrow it fast
- ☐ **Wipes**, fragrance-free
- ☐ **Changing pad** with a safety strap, plus two covers
- ☐ **Diaper cream**
- ☐ **Diaper pail or a plan** for where they go
- ☐ **Baby bath** or a sink insert
- ☐ **Two or three hooded towels** and a few soft washcloths
- ☐ **Fragrance-free wash** — one bottle does hair and body
- ☐ **Nail file or baby clippers**

Clothing for the first three months

Buy less than you think in newborn size and more in 3–6 months. Most of the newborn clothes given as gifts are never worn.

- ☐ **6–8 bodysuits** in newborn and 0–3 months
- ☐ **6–8 sleepers** with zippers rather than snaps — you will be doing this in the dark
- ☐ **2–3 pairs of scratch mittens**, or sleepers with fold-over cuffs
- ☐ **Hats** — one warm, one sun
- ☐ **Socks** that actually stay on
- ☐ **A weather-appropriate outer layer** that does *not* go under the car seat harness
- ☐ **Laundry detergent** — fragrance-free is easier on new skin

Getting out of the house

In a carrier, your baby should be high enough to kiss, with the chin off the chest and the face visible. Check it every time.

- ☐ **Car seat**, installed and checked — many fire departments and hospitals will check the installation free
- ☐ **Stroller** that fits your life, your car trunk, and your front door
- ☐ **Carrier or wrap** that supports the hips in a seated, spread-leg position and keeps the airway clear
- ☐ **Diaper bag**, or any bag you already own with a changing pad in it
- ☐ **Sun shade** for the car window

Health and safety

Call your pediatrician for any fever in a baby under three months. In a newborn, fever is treated as urgent regardless of how well the baby seems.

- ☐ **Digital thermometer** — rectal is the standard for infants under three months
- ☐ **Nasal aspirator** and saline drops
- ☐ **Infant acetaminophen**, only if your pediatrician has advised it and only at the dose they give you
- ☐ **First aid supplies** and your pediatrician's after-hours number written somewhere you can find it at 2 a.m.
- ☐ **Smoke and carbon monoxide detectors**, tested
- ☐ **Outlet covers, cabinet latches, and furniture anchors** — install the anchors before your baby is mobile, not after

Play and development, by stage

Reviewed by Dr. Eva Lassey, PT, DPT. Toys are described by what they need to do rather than by brand — what matters is the demand a toy makes, not who made it.

Newborn to 3 months

- ☐ **A firm surface for tummy time** — a play mat or a blanket on the floor. Start with short sessions from the first days, several times a day
- ☐ **High-contrast cards or a simple mobile.** Newborn vision is limited, and bold contrast is what registers
- ☐ **Your face.** It is the most interesting thing in the room and it costs nothing
- ☐ **A rattle or crinkle toy** light enough to hold once grasping begins

3 to 6 months

- ☐ **Toys that reward reaching** — something suspended at arm's length over the play mat
- ☐ **Textured and mouthable toys.** Mouthing is how a baby explores at this stage, not a habit to redirect
- ☐ **A mirror** at floor level, which makes tummy time considerably more popular
- ☐ **Toys that make a sound when moved,** so cause and effect become obvious

6 to 12 months

- ☐ **Stacking cups and simple nesting toys** — two-handed work and early problem solving
- ☐ **Containers to fill and empty.** A bowl and some blocks will occupy longer than most bought toys
- ☐ **Board books,** which are as much about turning pages as about reading
- ☐ **Push toys and stable furniture** at the right height for pulling to stand
- ☐ **Balls,** which are the most versatile developmental object there is

Floor time beats equipment

Bouncers, swings, and seats all hold a baby in a position rather than letting them find one. They are useful for keeping a baby safe while you do something else, and that is a real need — but time in them is time not spent working against gravity. Where you have the choice, put your baby on the floor. Rolling, pivoting, and pushing up are built there, and a baby who spends most of their waking time on a firm flat surface gets far more practice at all three.

On containers and helmets: if you notice a persistent flat spot, a strong head-turning preference to one side, or your baby resisting tummy time consistently, mention it at your next visit. These are common, and they respond well to being addressed early.

For the person recovering

Recovery from birth takes months, not weeks. Persistent pain, leaking, heaviness, or pain with intercourse are common but not something you have to live with — pelvic health physical therapy treats all of them, and you can ask for a referral.

- ☐ **Pain relief** as advised by your own clinician — you are a patient too
- ☐ **Peri bottle, pads, and comfortable high-waisted underwear**
- ☐ **Stool softener,** which almost everyone wishes they had bought in advance
- ☐ **Water bottle you can open one-handed,** and snacks within reach of wherever you feed
- ☐ **A few meals in the freezer,** or a list of people who offered to help and haven't been asked yet
- ☐ **Your own follow-up appointments** in the calendar, not just the baby's

Call your pediatrician or seek urgent care

- ✓ **Any fever in a baby under three months**
- ✓ **Difficulty breathing** — flaring nostrils, pulling in at the ribs or neck, grunting, or pauses in breathing
- ✓ **Blue or gray color** around the lips or face
- ✓ **Unusual sleepiness**, or difficulty waking
- ✓ **Poor feeding**, or far fewer wet diapers than usual
- ✓ **Persistent inconsolable crying** unlike their normal
- ✓ **Any fall from a height**, or any head injury

For the parent: heavy bleeding, fever, severe headache, vision changes, chest pain, shortness of breath, or thoughts of harming yourself or your baby all need to be acted on the same day. Postpartum depression and anxiety are common and treatable, and telling someone is the whole first step.

DrSensory · drsensory.com — pediatric and adult therapy guidance, and a directory of occupational, physical, and speech therapists. Reviewed within scope by **Dr. Eva Lassey, PT, DPT**. Feeding, sleep, and safety standards follow published guidance from the American Academy of Pediatrics and the Consumer Product Safety Commission. **This checklist is general information, not medical advice, diagnosis, or treatment.** Talk to your pediatrician about your own child.