BOTTLE FEEDING RECORD

NOVA SCOTIA

KEY

Infant State	**A** - Awake/Quiet	**C**- Crying	**F**- Fussy	**S**-Sleepy
Describe Feeding	**G** - Good	**F** - Fair	**P** - Poor	
Stool	**M** - Meconium	**G** - Green	**Y**- Yellow	

Date & Time	Bottle			Urine	Stool	Initials	Date & Time	Bottle			Urine	Stool	Initials
	Infant State	Amount	Describe Feeding	✓	M G Y			Infant State	Amount	Describe Feeding	✓	M G Y	

MOTHER'S NOTES

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