## **Hospital Stay Checklist**

**Hospital Packing List** 

Cozy blanket

Soft pillow(s)

Comfortable robe

Date:	/ /
Documenta	tion
Drivers License	
Medical ID card	
COVID 19 vaccin	ation card
Wallet / Credit C	ard / Cash

		Medical ID card				
		COVID 19 vaccination card				
		Wallet / Credit Card / Cash				
Life Accounting						
		Full tank of gas in the car (if applicable)				
		Frozen foods / meal train for your return				
		Petcare / childcare arrangements				
		Prep sleeping area on 1st floor (if applicable)				
Other						

	Pajamas			Wallet / Credit Card / Cash			
	Comfortable clothes for going home			Life Accounting			
	Toiletries			Full tank of gas in the			
	Snacks		car (if applicable)				
	Long phone charger			Frozen foods / meal train for your return			
	Entertainment gadgets			Petcare / childcare			
	Current medication(s)			arrangements			
	Shower flip flops			Prep sleeping area on 1st floor (if applicable)			
	List of people to update						
Other							
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