## Nap Log

Baby's Name: _____

Age: _____

Date: _____

| Time baby fell asleep | How baby fell asleep | Where baby fell asleep | Where baby slept | How long? |
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1. Review Table 2.1 on page 48:
   How many naps *should* your baby be getting? _____
   How many naps is your baby getting *now*? _____
   How many hours *should* your baby be napping? _____
   How many hours is your baby napping *now*? _____
2. Do you have a formal nap routine? _____
3. Are your baby's naptimes/lengths consistent every day? _____