Our Plan for	
	(vour child's name here)

We have met with our pediatrician and have discussed our child's eating, growth, and general health. We have ruled out any potential underlying medical conditions that may be interfering with our child's sleep. Our pediatrician has given us the green light to begin sleep coaching.

After reviewing the sleep averages, we have found that our child requires on average the following amount of sleep:

After reviewing my child's eating and sleep logs over the last few days we believe his/her natural bedtime window is: _____ p.m.

We will be working toward an approximate eating and sleeping schedule as outlined below:

6:00 a.m.–7:30 a.m.	Wake-up range
Breakfast or feeding	
Window of wakefulness	
a.m. nap	Length min. and max
Lunch or feeding	
Window of wakefulness	
p.m. nap	

Window of wakefulness to bedtime_	
Snack	
Optional third nap?	
p.m.	Dinner or feeding
p.m.	Start bath/bedtime routine
	Feeding (if age appropriate)
p.m.	Lights out and in bed
1 2 3 4 5	created a sleep manner sticker chart with

OUR CHAIR POSITIONS WILL BE AS FOLLOWS:		
OUR NIGHTTIME STRATEGY:		
Will you be feeding your child during the night?		
If yes, outline the feeding plan and who will be doing it.		
OUR NAP PLAN:		
We will be using the flexible schedule we outlined above.		
We have reviewed "Nap Coaching" on page 34–35.		
We will begin nap coaching the morning after our first evening of		
sleep coaching or		

Our sh	ortened pre-nap routine will be:
1	
	BACK UP NAP PLAN IS:
OUR I	NAP PLAN AT HOME:
OUR [DAYCARE PROVIDER HAS AGREED TO THE FOLLOWING

We're ready to go! We have blocked out three weeks of our schedule and are dedicating ourselves to improving our child's sleep habits! There is sleep for all at the end of the tunnel!