

WHITESIDE COMMUNITY HEALTH CLINIC
FAMILY PLANNING PROGRAM

REPRODUCTIVE LIFE PLAN

You can choose **if** or **when** you would like to have a baby. Please mark one of the following sentences to help guide our staff in your healthcare.

- I don't know if I ever want to have a baby.
- I would like to have a baby someday but not now.
- I would like to have a baby in the next year.
- I don't ever want to have a baby.

Please discuss your thoughts with the medical care provider to help you achieve your goal.

Your Reproductive Life Plan may change at any time. You can notify our office whenever you need assistance with your plan.