



Postpartum Advice and Instructions for Cesarean Delivery

Congratulations on your new baby! The postpartum period is a time for your body to heal and for you to get to know your new baby. A Cesarean delivery requires some extra care during this time. The following guide should help you during your recovery. Please contact the office with any questions or concerns.

General Activity/Rest

When you feel up to it, you may resume normal physical activity (going up and down stairs, going for a walk, and carrying the baby) during the first week. Walking is a particularly good way to reduce the chance of bowel and blood clot complications. You should try to rest often and sleep whenever your baby sleeps for at least the first two weeks. Try to limit yourself to taking care of yourself and the baby. Ask your family and friends to do the shopping, cooking, cleaning and laundry. If possible, arrange for someone else to watch your older children, especially if you have a toddler. Do not lift anything heavier than 10-20 pounds for the first six weeks. Driving a vehicle should not be attempted for at least two weeks after the surgery. Showers or tub baths are permitted immediately, but be careful getting in and out of the tub until you are steady on your feet.

Incision Care

You may get your incision wet, but avoid vigorous scrubbing of the incision line. Keep the incision area dry after bathing. Moist incisions heal more slowly. If your incision has metal staples, they should be removed by the home visit nurse or at our office about seven days after the operation. If there are no metal staples, the sutures under the skin will "dissolve" on their own. Watch for spreading pinkness around the incision, pus or bleeding coming from the incision, or more than a half inch of separation in the incision. Call us if any of these occur.

Exercise

If you are ready to start getting into shape, a 30-minute walk every day is a good way to start. You should wait until after your post-op visit with us to increase exercise beyond this.

Work

In general, we consider the six weeks following a Cesarean delivery as the normal period of "disability." However, special situations may allow for longer or shorter recovery periods. Please discuss this with us as necessary.

Breast Care

Every new mother should wear a supportive bra day and night for the first two weeks after birth.

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Breastfeeding is healthier for the baby, more economical, and provides a unique opportunity for bonding. Nursing should be attempted if at all possible. You should be given a breastfeeding guide and individual instruction by the nursing staff and lactation consultant before being discharged. If the breasts become painful, red, or swollen, call the office.

Bottle-feeding Mothers

If you decide not to breast feed, wear a tight-fitting bra and to discourage milk production/let-down. If your breasts become engorged, you should continue to wear a tight-fitting bra, use ice packs, and you may take acetaminophen (Tylenol) or ibuprofen (Advil or Motrin). Avoid nipple stimulation. When showering, let the water run down your back to prevent further stimulation of milk letdown. Do NOT try to express any of the milk from your breast - this will only make things worse. The discomfort usually goes away in 24 to 48 hours.

Vaginal Care

Vaginal discharge and bleeding (called "lochia") may continue for up to six weeks. Menstrual periods will usually resume by three months after delivery if you are not breast-feeding. Avoid tampons and sexual intercourse until your bleeding has stopped. Never douche. If you had a vaginal tear or an episiotomy, there will be stitches in the vaginal area. The stitches will dissolve on their own. Warm tub or sitz baths at home may be helpful. If hemorrhoids are a problem, Tucks pads or witch hazel may make them less painful. Hemorrhoids usually subside in 2-3 weeks. If they were not present prior to your pregnancy, chances are they will completely disappear. Avoid constipation by staying hydrated and eating a diet high in fiber.

Diet

Maintain a well balanced diet at home. Take your prenatal vitamins for at least one month after delivery. For nursing mothers, continue your prenatal vitamins and drink at least four glasses of milk daily (or 1000 mg calcium supplement) for as long as you are breastfeeding. If constipation is a problem, you should increase your dietary intake of fiber. Foods rich in fiber include grain cereals and breads, fresh vegetables and fruit. You may also supplement your fiber intake with Metamucil, Citrucel, Benefiber or Fibercon. Stool softeners may be added if needed; Colace is an effective over the counter brand. If you were treated for diabetes of any type, continue your pre-delivery diet. Discuss with us the need to continue glucose testing.

Emotions and Mood Swings

Mood swings and "baby blues" are very common after delivery. These are related to hormonal changes, fatigue, and the stress of your new role as mother. Get as much rest as possible and let your family and close friends know that you need their support, both physically and emotionally. These feelings are normal and should go away in a week or two. If you feel sad or depressed day after day and cannot function or you have thoughts of hurting yourself or your baby, call us immediately. You may have postpartum depression and treatment is available.

Sexual Intimacy and Birth Control

Once your bleeding has stopped and your vagina is no longer sore, it is okay to have sexual in-

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tercourse. However, pregnancy can occur again as early as three weeks after delivery! Start a birth control method before you have sex. If you decide to have intercourse before your postpartum check-up, call us for birth control advice. At the very least, use condoms and spermicide. If you are breastfeeding, it is not unusual to need a vaginal lubricant like K-Y Jelly. Do not be surprised if you leak milk when stimulated.

Warning Signs

Call the office if any of the following problems develop:

1. Redness, warmth, or swelling of the breast, leg, or incision line. Some leakage of pink-to-brownish clear fluid from the incision line is normal; thick or foulsmelling discharge is not.
2. Fever more than 100 degrees lasting longer than six hours.
3. Bleeding from the vagina that is more than the heaviest day of your normal menstrual period.
4. Worsening abdominal pain.
5. Burning with urination or urinating very often.
6. Any tissue passes from the vagina.
7. Severe headache not relieved by over the counter pain medications.
8. Chest pain or shortness of breath.

Follow-up Visit

Call the appropriate office as soon as possible to schedule a postpartum visit. This visit should occur between four and six weeks after your delivery.

Please call with any questions or concerns that are not addressed here.

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Lactation Consultant (443) 643-2949

Other Instructions

Patient Signature

Nurse Signature

Provider Signature

Date

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