
POSTPARTUM INSTRUCTIONS

Congratulations on your new baby!

Today is a big day! It is a life changing event to bring a new baby home, whether it is your first baby or a new sibling in the family. We would like you to be successful at this transition both physically and emotionally. The following are guidelines and helpful tips to make this next 6 weeks a smooth transition for all.

Cramping: Cramping is a normal process that will ensure that your uterus will return to its normal size. The uterus which started out the size of a light bulb has been stretched to accommodate a pregnancy. Cramping can cause significant discomfort. This discomfort can be noted after or while breastfeeding, as the suckling stimulates uterine contractions. The discomfort may require pain medication. If pain medication is needed try and take it after breastfeeding. This will minimize the amount of medication in your breast milk at the time of the baby's next feeding. These contractions are generally felt on and off for several days but gradually decrease in intensity. Patients who have had a second baby or more may experience stronger "after pains" than they remember with the other children; this is normal as the uterus has to contract harder to return to normal size.

Bleeding: Postpartum bleeding, called lochia, is also normal after a vaginal or Cesarean section. The bleeding is heavier over the first 24 hrs and tapers off after that. The average blood loss is 2 cups for a vaginal birth and 3 cups after a C/Section. This blood loss does not cause any problems because your body has increased its blood volume by about 40% over the course of the pregnancy. Much of the dietary requirements for iron have been directed toward this increase in blood production.

Some deliveries are associated with more than average blood loss. After these deliveries iron can be lower than your body can tolerate, causing nausea, dizziness, and a drop in your blood pressure when standing. If needed you will be given an iron supplement.

You can expect the lochia to change over the next few weeks. The discharge becomes dark red or brown, then white or yellow in color. This process can take 2-4 weeks. If the lochia is increasing this may indicate that you may be doing too much. Increase activity is common when you go home, please try to rest and relax over the first week to decrease the chance of increase bleeding.

Fever: which is temperature rise above 100 degrees should not be ignored. It may signify an infection or other inflammatory process. If your temperature goes above 100.5 degrees please call us. Please let us know of any other symptoms that you are having such as pain, leg soreness, painful urination, or breast tenderness.

General instructions given at the time of discharge from the hospital will also include refraining from inserting anything into the vagina until you are seen for your postpartum visit. This includes tampons, or douching. When recovering from a perineal laceration you should wait at least 3-4 weeks before resuming intercourse. Most women will wait till their postpartum visit to discuss reliable contraception prior to resuming intercourse. Remember that you may ovulate at any time and that breast feeding is NOT a reliable form of birth control.

Showering: is permitted anytime after a vaginal delivery and a day or so after a C/Section . Tub baths should be avoided for a few days after delivery except for a sitz bath.

Driving: is not advised for at least 2 weeks after a vaginal delivery. It takes at least this amount of time for your pregnant state to revert somewhat to normal. You may sit in a car as a passenger without driving.

Breastfeeding: Before leaving the hospital, be sure you feel comfortable with proper breastfeeding techniques. Lactation consultants are available to give you additional instructions if needed. They are also available once you go home by phone or personal consultations. You may call the Birthing Inn at any time for these numbers. Proper feeding technique will help prevent cracked or painful nipples that may cause infection or cessation of nursing. Be advised everything you ingest transfers to your breast milk in small amounts. Call your pediatrician prior to taking any medications.

Hemorrhoids: can afflict many mothers as a result of the pregnancy and particularly the pushing phase of a vaginal delivery. Swelling of the hemorrhoid may occur and it may require pain medication. Mild discomfort and itching can be treated with hydrocortisone cream 1% which can be obtained over the counter. Use no more than twice a day for no longer than 2 weeks. Stool softeners such as docusate sodium (colace, dialose) prevent straining during bowel movements. They reduce the aggravation of hemorrhoids. If hemorrhoids are causing severe pain unrelieved by conservative measures, please call us.

Nutrition and hydration: both essential in not only recovery from the birth but important in the production and maintenance of breast milk. You need to increase your caloric intake by 500 calories per day while breastfeeding. Remain drinking at least 8-10 glasses of water a day. Continue to take your Prenatal vitamins while you are breast feeding

Exercise: It is important to rest and exercise only gently during the first 6 weeks after your delivery. You may take walks if you feel up to it. Please refrain from heavy exercise till we see you at your postpartum visit.

Postpartum blues and depression: it is possible that you may experience a mixture of feelings after delivery. You are happy that the pregnancy has ended and anxious about your new responsibilities. Sleep deprivation and lack of energy may make you irritable and frustrated. Feelings of agitation, guilt, fear of isolation, uncontrollable mood swings and crying spells may occur in the first few days to few weeks. While all of these feelings are not what you are expecting, they are not unusual. In a milder form this is called postpartum blues and in it's more severe form it is know as postpartum depression. One out of ten women will experience significant depression symptoms, usually by the third week after delivery. The cause is unknown but has been attributed to shifts in hormonal levels or deficiencies in certain proteins. If you feel uncomfortable with your feelings please call us so we can help.

Follow up: you will need to be seen six weeks after your delivery. Please call after you get home to make this appointment. If you have had any complication you may need to be seen sooner, the midwife who discharges you will inform you if that is the case.

Know that we are only a phone call away! We hope your birth and time in the hospital was all that you hoped for. Enjoy you newest addition to your family as it is truly a gift from God.