



Post-Delivery Instructions

San Diego Perinatal Center

ACTIVITY: Physical activity should be as you can tolerate. Allow for rest periods, especially the first 2 weeks. If you would like to exercise - walking is recommended. Jogging and swimming are okay after 6 weeks. Do not return to full activity (aerobics, tennis, employment) until after your postpartum check-up -- and no sit-ups or weight lifting for at least 3 months after a cesarean, until your scar has healed to a thin white line.

SLEEP: Make sure to get adequate rest. Your baby will wake you a lot at night, so try to nap while baby is sleeping during the day. Don't be afraid to ask for help from your partner, family and friends.

DIET/VITAMINS: Continue to eat well-balanced meals as you did during your pregnancy. Prenatal vitamins and iron supplements should be continued until your postpartum check-up or as long as you are breast-feeding. Even after completing breast-feeding, we recommend a multiple vitamin containing both

folate and iron.

NURSING MOTHERS: If nipples become sore or cracked:

1. Expose nipples to air as much as possible. The flaps of your nursing bra can be left open when leaking is not a problem.
2. Wash nipples only with water. Other cleansing products are unnecessary, and may taste bad leading to improper suckling.
3. Use breast milk to lubricate nipples after feeding.
4. A commercial product such as unmedicated lanolin should be used only when the nipple is cracked (e.g. Lansinoh). If you have breastfeeding questions, the Lactation Team at the Hospital can be very helpful. Their phone number is: (858) 939-4127.

BOTTLE-FEEDING MOTHERS:

After delivery until breasts return to normal you should wear a tight bra, (a jogging bra is best) even at night. An ACE wrap, instead of bra may be helpful. Do not express milk from your breasts, or let hot water

from the shower run over them for a long time. Stimulation of any kind cause more milk production. It can produce temporary relief but not long term relief. If breasts become painful and firm:

1. Decrease your fluid intake.
2. Apply an ice bag wrapped in a thin towel to the breasts.
3. Two Aspirins or Advil may be taken very 4 hours if needed.
4. Cold cabbage leaves (not cooked) tucked inside bra.

BREAST INFECTION

(Mastitis): Can occur during breastfeeding, or after you stop nursing. Typically an area on the breast will be red, hard and hot to touch and you will have a fever over 100.5 degrees. If this happens, please call!

CONSTIPATION: Eat foods rich in fiber and increase your fluid intake. Bulk forming laxatives such as Metamucil® are very helpful. Milk of Magnesia at bedtime may be used as a laxative. To make stools softer use Colace or Pericolace 100mg two or

three times a day. These are available over the counter.

HEMORRHOIDS:

Use the sitz bath 2-3 times a day. Apply an over the counter hemorrhoid preparation such as Anusol-HC, Preparation H, Tucks, or ice packs as needed. Make sure to keep bowel movements soft. If the hemorrhoids become hard discolored (purplish) or extremely painful, call.

VAGINAL BLEEDING: It is normal to have a bloody vaginal discharge after delivery, and you may pass blood clots for several days. The amount may increase with breast-feeding or with increased activity. Overall, you will bleed off and on for 6 weeks and some women up to 12 weeks. It is not unusual for it to stop and then start again. It will gradually change from red to a yellow-grey. Heavy bleeding is described as saturating a Maxi Pad (one an hour) of bright red blood. If this occurs, you need to call.

MENSTRUATION: This varies from woman to woman. Periods might not return until breast-feeding is stopped. Most breastfeeding moms have a period within about 6 months. For the bottle feeding mother 6-10 weeks is the usual.

HOT FLASHES AND NIGHT SWEATS: These are common

after delivery. They will usually stop within a few days. Make sure to check your temperature if they persist.

AFTER PAINS: These occur as the uterus contracts and returns to a pre-pregnant size. They usually last 4-7 days. Breast-feeding will intensify the cramping. Tylenol or Advil, 1-2 tablets, every 4 hours may be used to relieve discomfort.

INTERCOURSE: Intercourse may be resumed after the bleeding has completely stopped and your stitches are healed, but not before 4-6 weeks after delivery. The hormonal changes after delivery may make the vagina seen dry, especially if you are breastfeeding. This sensation often lasts until regular periods start up. Astroglide or a similar water-soluble lubricant may be used. Remember to use contraception!

You can get pregnant even if you are breast-feeding!

DOUCHING: Not safe until 8 weeks after delivery or cesarean.

CONTRACEPTION: The possibility of becoming pregnant exists after delivery whether your periods have returned or not, even when nursing. **Breastfeeding does not prevent pregnancy.** If you have intercourse before your check-up, use foam and condoms. If you would like to use Depo-

Provera (the birth control shot), this can be given two weeks after delivery for most women.

DRIVING: Driving may be resumed when the discomfort from your C-Section incision or episiotomy has decreased enough to allow you to quickly and firmly apply the brake. You should not drive until at least two weeks after a cesarean, and do not drive while you are taking Vicodin, Tylenol with Codeine, or any other narcotic medication.

EPISIOTOMY CARE: It is important to practice good hygiene to prevent infection.

1. The stitches will dissolve by themselves within a couple of weeks. Tiny pieces of suture, like thread, may come out of the vagina as this occurs. This is normal.
2. Do not be afraid to look at your vaginal area. If you are experiencing increased pain, check for redness, increased swelling, or drainage from your episiotomy site.
3. Showers are encouraged.
4. Change your sanitary napkin every 4-6 hours. Make sure it's secured properly to avoid sliding back and forth.
5. Remove your sanitary pad from front to back to keep germs from the rectum from entering the vagina.
6. Continue to use the spray bottle on your perineum after urinating. Pat dry and always from front to back. For comfort, warm sitz baths

may be done 2-3 times a day. Avoid long periods of sitting or standing. Local anesthetic sprays may be used on your stitches (e.g. Epifoam, Dermoplast).

C-SECTION INCISION:

Use the prescription given to you on discharge from the hospital for severe pain. Plain Tylenol or Advil may be used for lesser pain. Remember that most prescribed pain medications cause constipation, so try the Tylenol or Advil first. The level of discomfort you have should decrease daily. 2. You or your partner should look at the incision daily. It should appear to be healing. A small amount of yellowish-red discharge is normal but if continuous drainage occurs, a physician should be called.

3. Showers are OK, but avoid prolonged exposure of the incision to moisture that could increase the risk of infection. Let the water run over the incision, but DO NOT scrub it for 14 days.

4. If steri-strips were used, they will eventually start peeling off. Trim them with scissors, but do not pull them off. They will usually come off on their own within 2-3 weeks.

5. Abnormal symptoms include increased swelling, redness, purulent discharge from incision or if the area becomes hot to touch and painful.

EMOTIONAL HIGHS AND LOWS/MOOD SWINGS:

Many women will experience emotional highs and lows or mood swings after giving birth. The

mildest form is called the "baby blues". This is caused by your body's hormones dropping back to a pre-pregnancy level and is normal. However, a few women will have more severe mood swings or depression. Even though this is also caused by a change in hormones, it may require treatment. If you feel the symptoms are worsening and affecting how you function or feel you are losing control, please call.

POST-DELIVERY CHECK-

UP: Call the office the first weekday after you are home to schedule your appointment. It should be 4-6 weeks after delivery or cesarean unless you are instructed otherwise.

Please call if you have:

1. FEVER (above 100.4 or greater) OR CHILLS--CHECK YOUR TEMPERATURE BEFORE CALLING.
2. EXCESSIVE OR PROLONGED BLEEDING (more than 1 saturated pad per hour).
3. REDNESS, SWELLING, INCREASE IN PAIN, OR OPENING OF YOUR EPISIOTOMY OR C-SECTION INCISIONS.
4. MARKED DEPRESSION OR ANXIETY.
5. FREQUENCY AND/OR BURNING WITH URINATION.
6. SEVERE ABDOMINAL OR PELVIC PAIN.
7. PAINFUL, REDDENED, HARD AREAS ON THE BREAST

Please have your pharmacy's phone number ready, and have a pencil handy for instructions. Thanks!