



Post partum Instructions

Congratulations again on your new arrival. We were very happy to be a part of this special time in your life.

It is difficult, if not impossible, to set down any hard and fast rules concerning what to do and what not to do when you go home from the hospital. Individuals differ, just as their home and their responsibilities do. However, here is some general information you should know.

Vaginal bleeding and discharge: It is normal for bleeding to last up to 4-6 weeks. Small clots are normal. As long as you are not bleeding more than a normal period there is no need to worry. Call the office immediately if you are having excessive vaginal bleeding (soaking one or more pads per hour for more than one hour), passing large clots or noticing a foul vaginal discharge.

Your first period usually comes 4-8 weeks after delivery if you are not nursing. It may be heavier or lighter than normal.

Activity: It is important to rest. Try to nap when the baby is sleeping, day or night. Do not drive for the first two weeks. Increase activity gradually over the six weeks following delivery. If you had a cesarean section, do not lift anything heavier than the baby for 4-6 weeks.

Exercise: No vigorous exercise until after your 6-week postpartum visit. Kegel exercises should begin soon after delivery to prevent problems of involuntary urine loss. To do Kegel exercises, pull or tighten the muscles of the pelvis as if you are trying to stop your stream of urine. Perform Kegels lying in bed with knees flexed. It is most convenient to do them when you go to bed at night and wake up in the morning. Try to tighten the muscles for 5 seconds and then relax for 5 seconds doing 10 repetitions. Once your strength builds you may add more repetitions but do at least 10.

Baths/showers: Shower for the first two weeks after delivery. You may take warm un-medicated baths after that. When showering after cesarean section do not vigorously scrub over the incision where the steristrips are. Simply wash that area and pat dry with a towel.

Diet: A well balanced diet high in protein, fruits, vegetables and fiber is important. Stay well hydrated with juice, water and milk. Breastfeeding moms need an additional 300 calories per day and plenty of extra fluids.

Keep bowel movements soft. If constipated use Milk of Magnesia, Senakot or Metamucil. Increasing fiber with whole grains and bran will also help. You may also use colace (docusate) as a stool softener.

Medication: For pain, use extra-strength Tylenol (2 tabs) and/or Ibuprofen (Motrin, Advil, etc) 600mg every 6hrs as needed for cramps or incision pain. Continue prenatal vitamins until your 6week postpartum visit or as long as you are breastfeeding. If you were given iron supplement prenatally or in the hospital, then continue that as well.

Breast Care: If breastfeeding, use a good maternity bra. After each feeding, air dry your nipples and massage the breasts to express any excess milk. If cracking of the nipples occurs, apply breast milk or lanolin ointment as needed. If engorged, use warm compresses. Call the office if redness, pain or fever occurs.

If you are not breastfeeding, apply a tight binder (such as ACE bandage) or a prepregnancy bra for the first few days. You may apply ice or use Tylenol if breasts become engorged. Do not pump or attempt to empty breasts by expressing milk.

Perineal Care: Keep the area clean and dry. Change pads frequently. Do not use tampons during the first six weeks. Tucks medicated wipes, Anusol suppositories or ointment can be used for hemorrhoidal pain. Sitz baths may be used any time for perineal discomfort from painful stitches and hemorrhoids.

Cesarean Section: In addition to the previous instructions:

If your skin incision was closed with sutures they will dissolve on their own. If staples were used, they will be taken out about one week after surgery. Please call the office to schedule an appointment for staple removal.

The incision should be left uncovered. Clean the incision with mild soap and water. Shower for the first two weeks after delivery and avoid soaking the incision in water for long periods of time.

Do not lift anything heavier than the baby. Stairs are okay but take them slowly. You may drive after the first two weeks but refrain if you are still in considerable pain.

Mederma cream may be used on your skin incision, which may decrease scar formation.

Intercourse/Contraception: We recommend that you abstain from intercourse for six weeks after delivery. When beginning relations again, appropriate contraception is important. This can be discussed at your postpartum appointment or at anytime. Remember, it is still possible to get pregnant even if you have not gotten a period or are breastfeeding.

Postpartum Appointment: Please call the office (phone numbers above) to schedule a postpartum visit. Generally, you will follow-up after 6 weeks for a vaginal delivery and one to two weeks after cesarean section. Often, the provider may ask you to be seen within two weeks after vaginal delivery, especially if this was your first birth.

Call the office if your experience any of the following:

1. Fever (over 100.5 degrees Fahrenheit), chills, heavy vaginal bleeding, yellow or green vaginal discharge, foul odor, persistent nausea or vomiting, diarrhea or difficulty breathing.
2. Redness or severe pain of the breasts or incision, vaginal tear or episiotomy.