



## **Postpartum Instructions for Mom**

- Stay in Bed! You have only four jobs: feed and hydrate yourself with food and beverage others have prepared and brought to you, feed your baby at least every 2-3 hours, sleep when baby sleeps, and get up to pee frequently - ideally every 2 hours when you are awake.
- Please do not lift anything heavier than your baby for at least 4-6 weeks.
- Nursing and sore nipples: Milk should come within 2-4 days following the birth. Nursing can be tender, but should not be painful. Pain can almost always be corrected by fixing the baby's latch. Focus on a good deep latch on to the breast tissue, you should be "BREAST-feeding" not "NIPPLE-feeding." Nipple creams, olive oil, or coconut oil can be used on sore nipples. Allow nipples to air dry as often as possible. Call your midwife if you have any nipple damage or bleeding.
- Bleeding: Your bleeding should lessen steadily after the first few days when discharge is heavy and dark red. If fresh red bleeding persists or returns after the first few days, decrease your activity level and call your midwife. Call if you fill more than one heavy menstrual pad in one hour or if the discharge becomes foul smelling. Small clots may be passed, especially when getting up after you have been lying down, if they are larger than your fist please call. Empty your bladder and massage the top of your uterus if your bleeding picks up during the first few days. It should feel like a grapefruit at or below the level of your navel.
- Perineum: It is normal for the perineum to be swollen and tender for several days, especially if a tear occurred. Use your peri-bottle when you urinate with warm water or sitz herbs, and pat dry after-- do not wipe. An ice or heat pack can help with swelling (10 minutes on, 10 minutes off, as needed) also you may take ibuprofen.
- Bowel care: Be sure to drink lots of water daily and eat plenty of fiber in order to avoid constipation.
- Resumption of normal activity: Stay in bed as much as possible the first week. The first few weeks postpartum you will likely be very tired. Listen to your body and slowly increase activity level after the first few weeks. With adequate rest and nutrition, your bleeding will cease, energy will increase, and your body will recuperate. Intercourse can usually be resumed 4-6 weeks after birth, once bleeding has ceased for at least 3 days, your vagina/perineum has had a chance to heal, and you feel emotionally ready.

## **WARNING SIGNS Call the midwife immediately at 480-447-3435 if you experience the following:**

- **Heavy bleeding-** soaking heavy menstrual pad in under 1 hour - especially with **foul smell, uterine pain, or fever.**
- **Fever** greater than 100.4F; chills, or flu-like symptoms.
- Any sign of increasing **swelling, tenderness, or infection** of your vagina or breasts, especially if accompanied by foul odor, body aches, or fever.
- Discomfort or **burning when you urinate**, difficulty urinating, feeling unable completely empty bladder;
- **Severe headache;**
- **Blurred vision or dizziness**, with or without a headache;
- Persistent **pain in the right upper quadrant** of your abdomen
- Sudden onset of **swelling of your extremities.**
- **Sharp pains** in your abdomen, chest, or breast;
- **Crying spells or mood swings** that feel out of control or do not get better with more sleep, rest, and nutrition;
- **Thoughts of harming** yourself or your baby.



## **Postpartum Instructions for Baby**

- **Feeding:** It is normal for a newborn to nurse every 2-3 hours or more often, for 20-40 minutes each time. You cannot over-feed a breastfed baby, do not withhold the breast! Remember that colostrum, the first milk, is small in quantity but extraordinarily nutritious and provides all needed nutrients for your baby until your milk comes in.
- **Breathing:** Often irregular even when sleeping. Baby takes 40-60 breaths per minute but the time between breaths can vary. However, breathing should not be labored or difficult. It is normal for newborns to cough and sneeze and sound snuffly for a few days as they clear their passages. If the baby is able to nurse well, then he/she is probably not having any difficulty breathing.
- **Cord care:** The cord stump dries and falls off in 4-10 days. Make sure the cord remains outside the diaper and do not allow to get wet. The skin surrounding the umbilicus should not be red or have noticeable swelling. If the base of the cord is not drying adequately, you can sprinkle goldenseal powder on it or set your hair dryer to cool and use to help the drying process.
- **Urine and stool:** Both should happen within 24 hours of birth. Stools are dark and tarry initially and transition in a few days to a yellow or greenish color. The normal consistency of the stool ranges from curd-like to runny. We want to see bowel movements every day along with one wet diaper in the first 24 hours; two wet diapers in the next 24 hours, and three wet diapers on the third day. After your milk is in, baby should have at least 6 wet diapers in 24 hours along with daily bowel movements.
- **Genital care:** Male babies- do not retract or allow anyone including a physician to retract the foreskin. This causes damage. Clean only what you can see. Female babies- wipe front to back, mucousy discharge or spotting is normal in the weeks following the birth.
- **Jaundice:** It is very common in breastfed babies and most often of no clinical importance. Jaundice usually develops between days 2-7 after birth. Jaundice is caused by a normal build-up of bilirubin in baby's blood; bilirubin is excreted in stool. Nursing stimulates pooping, so keep feeding! If jaundice develops in under 24-48 hours, it is of concern and you should call the midwife immediately.
- **Weight:** It is normal for a newborn to lose up to 10% of their body weight in the week following birth but should be back up to birth weight during the second week. The midwife will weigh baby to ensure weight gain is sufficient.
- **Follow-up infant care:** After the baby is born, it is recommended you schedule a routine examination for the baby with your pediatrician. Your midwife does not provide vaccinations, but can provide vitamin K injection, erythromycin eye prophylaxis, newborn screening including blood spot testing, CCHD screen, and breastfeeding/weight checks for the first six weeks. Your baby's records can be faxed to the pediatrician upon request.
- **Insurance:** Please make sure to add your baby to your policy immediately. A delay in adding baby will result in a delay in processing or denial of any claims.

## **WARNING SIGNS Call the midwife immediately at 480-447-3435 if your baby has any of the following:**

- **Inability to maintain normal body temperature-** > 99.4° or < 97°F (rectal preferred for accuracy)
- **Respiration** difficulty- grunting, flaring nostrils with each breath, **blue** torso or head, rapid respirations.
- **Skin: Bruising** or unusual bleeding or **Jaundice- Yellow skin** or eyes within the first 24-48 hours.
- **Lethargy-** Won't wake even with stimulation, is very tired, or baby will not feed.
- **Seizures-** Possible signs seizure eyes rolling upward or fluttering; stiffening of the body; movements of the tongue, lip smacking or excessive sucking; uncontrolled jerking movements or body twitching; staring spells or periods of unresponsiveness
- **High-pitched cry** – different from baby's usual cry