



## Postpartum Instructions for Mom and Baby

**Call us immediately if you have any concerns!**

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### MOM

1. Rest, fluids and good nutrition: These are essential to a speedy recovery. Plan to take naps when baby is sleeping. Arrange for household help (laundry, cooking, shopping, cleaning, childcare) for a week and try to stay in bed or on the couch for the first three days. Drink at least two liters of water every day, with a glass beside you when you begin a nursing session. Limit visitors.
2. Bleeding: Call the midwife if you fill two pads in one hour or if the discharge becomes foul-smelling. In the first few days after birth, bleeding will be similar to a heavy menstrual period, both in color and amount. Clots may be passed, especially when getting up after you have been lying down. Massage your uterus if you are bleeding heavily during the first 24 hours and as often as you think of it the first few days. It should feel like a grapefruit at or below the level of your navel.
3. Infection prevention: Wash your hands each time before you change your pad. Check your temperature if you feel any cold or flu-like symptoms. Uterine pain and/or foul-smelling discharge with a fever are signs of uterine infection. A tender breast with body aches and fever may indicate mastitis. Call the midwife if you have any of these symptoms.
4. Perineum: It is normal for the perineum to be swollen and tender for several days, especially if a tear occurred. Use your peri-bottle with iodine water or herbal tea when you urinate to prevent stinging. An ice pack can help with swelling (10 minutes on, 10 minutes off, as needed). Sitting in a CLEAN tub of 4-5 inches of very warm water with sea salt and/or herbal pack several times a day helps healing. Start your kegels right away.
5. Bowel care: You may not have a BM for 2-3 days. Be sure drink at least 2 liters of water daily and eat plenty of fiber in order to avoid constipation. Prune juice (6 oz, twice daily) is very helpful in relieving constipation.
6. Resumption of normal activity: Use common sense. The first few weeks postpartum you will likely be very tired. As you provide adequate rest and nutrition, your energy will increase. Kegeling, abdominal exercises, and walking should be your first exercise. Intercourse usually resumes 4-6 weeks after birth, once the perineum has had a chance to heal, or when both partners desire it. Contraceptive options will be discussed at your 6 week visit, or when you call the midwife with questions.
7. Nursing and sore nipples: Sore nipples can almost always be corrected by fixing the baby's latch. Let him get a big "bite" of the entire areola, keep his tummy pressed firmly and directly up to yours with his back and head in one straight line. We'll review the position together at birth because we want to avoid sore nipples. The treatment depends on the severity of the problem, but can usually be achieved in 2-3 days. Drink a glass of water at each nursing session.

**BABY**

1. **Feeding:** During the first 24 hours, your baby should nurse at least every 3 hours. This ensures everything is working well. Some babies sleep for one 5-hour period that first day—but we need to make sure he eats before he sleeps and again right when he wakes up. After the first day, nurse your baby when he/she wants to eat or at least every 3 hours. It is normal for a newborn to nurse every 2 hours, for 20-40 minutes each time. Feeding schedules are not healthy or helpful. 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.
2. **Respirations:** Breathing is often irregular even when sleeping. This means the baby is taking 30-50 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 air passages. If the baby is able to nurse well, then he/she is probably not having any difficulty breathing. Nursing also helps with air passage clearing.
3. **Temperature:** Take the baby's temperature every 4-6 hours for the first 48 hours. Normal temp is 97.9-99.5 F under the arm. If the baby's temp is low, add warm blankets, more clothing, and/or a heating pad; retake temp in 30 minutes. If the baby's temp is high, make sure baby is not overdressed; retake temp in 30 minutes. If the irregular temp continues, call the midwife.
4. **Cord care:** The cord dries and falls off in 4-10 days. Make sure the cord remains outside the diaper. You can clean the skin and umbilicus with a moist, clean cotton ball if gunk develops. We often use an herbal preparation on the cord at birth to help with healing.
5. **Urine and stool:** Both should happen within 24 hours of birth. Stools are dark and tarry initially and transition to a yellow or greenish color. The normal consistency of the stool ranges from curd-like to runny. After your milk is in, baby should have 6-8 wet diapers in 24 hours and may have a bowel movement as often as every feeding. The addition of formula will change the consistency, frequency and odor of baby's stool.
6. **Jaundice:** The yellowing of the skin and whites of eyes. It is very common, most often of no clinical importance, and usually develops between days 2-7 after birth. The jaundice is caused by a build-up of bilirubin in his blood. Excess bilirubin is excreted in stool. Nursing stimulates pooping. If jaundice develops in under 24 hours, it is of concern and you should call the midwife immediately.
7. **Follow-up infant care:** We encourage you to contact your baby's health care provider soon after the birth to arrange for an examination of the baby. We do not provide vaccinations or hearing tests, but we do provide vitamin K, eye prophylaxis, and newborn screening.
8. **Birth certificate:** We will submit the birth information to the state, once you have provided it to us.
9. **Insurance:** Please make sure to add your baby to your policy.

## WARNING SIGNS

Call the midwife immediately if **you** have any of the following:

- **Fever** greater than 100.4F;
- Any sign of localized **swelling or tenderness** in your breasts, especially if accompanied by body aches or fever. These are symptoms of a breast infection;
- Tender or **sore nipples** when nursing. These are signs of a poor latch that can be fixed very quickly in order to avoid nursing problems;
- Any sign of **swelling or infection** around the vagina, especially if you had a tear;
- Discomfort or **burning when you urinate**, having difficulty in urinating, or being unable to completely empty the bladder;
- **Sharp pains** in your abdomen, chest, or breast;
- **Blurred vision or dizziness**, with or without a headache;
- **Headache**
- **Pain in your legs**, especially the calf muscles, when you extend your foot.
- A **foul smell** or unexpected change in your bleeding (heavy bleeding and/or clotting after the first week) especially with uterine pain and fever.
- **Bleeding** lasting more than six weeks;
- Any strong sense that **something is “wrong”** with you or the baby;
- **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.

Call the midwife immediately if **your baby** has any of the following:

- **Temperature** over 99.5 degrees or under 97.9 degrees;
- **Respiratory** difficulty (noisy “grunting” on the exhale, flaring nostrils with each breath, ribs stick out when inhaling) or becomes **blue** or grey in the torso and head;
- Becomes **yellow** in the first 24 hours;
- **Lethargy or seizures**;
- Develops **high-pitched cry**;
- Baby **will not feed**;
- **Skin bruising** or unusual bleeding, especially post-circumcision;
- **Failure to thrive**

### Recording Your Temperature

Please record **baby's** temperature here:

Date	Time	Temp	Notes

Please record **your** temperature here:

Date	Time	Temp	Notes