Mother care

Family and visitors 1

Parent guidelines for safeguarding your baby while in the hospital 1

Your body during postpartum recovery. 2

Caesarean birth 4

Resuming activity after birth — vaginal or Caesarean. 4

Emotional changes 5

New parent stress test 6

Postpartum depression self-assessment 7

Preparing to go home. 8

Danger signs for the new mother. 9

Click here to visit the Web page with access to the rest of the Legacy guide to pregnancy, childbirth and the newborn

LEGACY
HEALTH

Family and visitors

Make yourself at home

We designed our Family Birth Centers with you and your family's comfort in mind. Throughout your entire stay, all your care is delivered to you and your baby in a cozy, home-like environment.

Because babies enter the world at all hours of the day or night, your family and friends are welcome to visit as often as you wish. In fact, we encourage your family to be involved in your birth experience to whatever degree you desire.

Parent guidelines for safeguarding your baby while in the hospital

We care about your family's safety and ask that you assist us in providing the safest environment possible by following the guidelines below.

- ***Never*** leave your baby unsupervised, even if you are just taking a shower. Babies will be attended while in the nursery.

- Do not give your baby to *anyone* without proper verified hospital identification. Ask your nurse to explain our policy. You or a family member always have the right to accompany your infant out of your room.
- Please feel free to ask any questions that you may have concerning routine nursing procedures, feeding, visiting hours and security measures.
- Question unfamiliar persons entering your room or inquiring about your baby, even if they are in hospital attire or seem to have a reason for being there. ***Alert your nurse immediately***.
- Determine where your baby will be taken for tests, and how long the tests will take. Find out who has authorized such tests.
- If your baby is being cared for in the nursery, only the person with your baby's identification bracelet may transport the baby from the nursery. Babies will always be transported in the crib.
- Each time your baby is brought to you, the numbers on your ID bands will be compared to ensure they match.
- Please do not allow visitors to carry your infant in the hallway. In an effort to help safeguard your infant, nursing staff have been directed to question anyone who is carrying a baby in their arms.

Your body during postpartum recovery

Following the birth of your baby, your nurse will need to frequently assess your vaginal bleeding. This includes pressing firmly on your abdomen to feel your uterus, checking your pad for bleeding, taking your blood pressure and checking your pulse. These assessments will be made less frequently as time progresses.

"Postpartum" refers to both the period of time and the process that your body goes through after the birth of your baby. It is important that you understand what is normal so that you will recognize when you are having a problem that might need your doctor or midwife's attention.

Warning sign: If you are expelling many large clots or experiencing an unusually heavy flow (soaking through a large pad in an hour or less), call your nurse while you are in the hospital and your health care provider once you are home.

Bleeding

- Vaginal bleeding is usually heavy and bright to dark red for three to four days.
- Small clots up to grape size are normal.
- Usually lasts four to six weeks.
- May increase if you are too active.
- Notify your care provider if you are soaking one pad per hour, or having golf ball-sized clots or bigger accompanied by increase in bright red blood.

Afterpains

- Caused by uterine contractions
- Usually strongest when you are nursing
- Usually become stronger with each pregnancy
- Help ease them by emptying your bladder frequently, pain medication every four to six hours, walk soon after delivery, drink warm liquids, use heating pad to abdomen or back

Laceration/episiotomy

- Stretching and tearing of tissue around vagina (perineum) is a laceration.
- An episiotomy is a surgical incision that enlarges the vaginal opening and may be done to facilitate the birth of your baby.
- Applying ice to perineum for the first 24 hours after giving birth will help reduce swelling.
- Keep your stitches clean; rinse with your peribottle after urinating or having stool; take this peribottle home and continue using it.
- Apply a clean sanitary pad each time you use the bathroom.
- Apply witch-hazel (Tucks) or numbing spray as needed.
- Take a sitz bath up to three times a day (fill tub with six inches of plain, warm water).
- Your stitches will dissolve.
- Pain usually peaks on the second or third day.

Hemorrhoids

- Distended blood vessels around your rectum
- May become swollen, painful; may itch and/or bleed
- Avoid constipation by taking stool softeners once or twice a day.
- Drink six to eight glasses of water per day and eat fresh fruits, vegetables and whole grains.
- Apply ice pack for 20–30 minutes, or take sitz baths up to three times a day.

Bladder care

- Perineal area may feel numb
- Urination may be difficult due to swelling and lack of abdominal tone. You may experience incontinence when bladder is full due to decreased muscle tone.
- Drink six to eight glasses of fluids per day.
- Empty your bladder every three to four hours.
- Pouring water over your perineum may help start your stream and help decrease burning.

Call your care provider: unable to urinate, pain, burning or frequent and urgent need to urinate

Bowel care

- Bowel movement may be difficult due to decreased muscle tone and decreased activity.
- Avoid straining to expel stool.
- Take stool softeners/laxatives as ordered by your care provider until your normal bowel pattern returns.
- Drink six to eight glasses of fluids per day.
- Walk three to four times per day.

Breast changes

Whether you are breastfeeding or bottle feeding, you can expect some breast changes in the first several days after your baby is born.

If you are breastfeeding, you may experience nipple tenderness and breast fullness. (See "Feeding Your Baby" chapter of this notebook for more detail.)

If you are not breastfeeding, you may experience moderate to severe engorgement (swollen breasts) in the first few days following birth. During this time:

- Wear a well-fitting, supportive bra (such as a sports bra) around the clock.
- Apply ice packs to engorged breasts several times a day for 20 minutes. This will help reduce inflammation and increase your comfort.
- Take pain medication as needed for discomfort.

Note: Medication to suppress lactation/milk production is no longer used because of its side effects. You can call Legacy Lactation Services after discharge if you are having difficulty with engorgement.

Caesarean birth

After your surgery

- Your care provider will order pain medication so you will be able to rest, breathe deeply and cough and walk more comfortably.
- Your nurses will assist you in deep breathing exercises every two hours until you can effectively do this on your own to prevent pneumonia.
- While in bed you need to move your legs, wiggle your toes and flex your ankles every two hours.
- We will get you out of bed eight to 10 hours after surgery and slowly progress to walking in hallway four times per day to prevent pneumonia, blood clots in legs and constipation.
- You should continue walking three to four times per day after discharge (in your house if necessary).
- You will be allowed to drink clear liquids (tea, coffee, water, clear juices) after your bowel sounds return; you will be progressed to solid food after you are passing gas.
- Follow activity orders given by your care provider.

Call your doctor if you notice any of the following signs of infection:

- Redness, swelling, separation, odor or drainage from your incision
- A fever of 100.4 F or greater
- Flu-like symptoms (chills, body ache, fatigue or headache)
- Any increase in pain

Caring for your incision

- Shower only for six weeks; you can clean your incision with soap and water.
- Keep incision clean and dry
- Your stitches will dissolve.
- If Steri-Strips (strips of tape) are placed, they will usually fall off as you shower. If they have not fallen off within 10 days, remove them unless you have been instructed otherwise.
- Allow your incision to "breathe"; avoid covering with plastic, gels, oils and creams.
- Skin around incision may feel numb for several months
- You may apply heating pad to your incision as desired.
- Call your care provider if you see any signs of infection.

Resuming activity after birth — vaginal or Caesarean

- It takes about four to six weeks for your body to return to normal after having a baby.
- Allow for rest periods during the day; consider naps a necessity.
- Early walking is important to prevent pneumonia, blood clots and constipation.
- Continue walking three to four times a day after discharge.
- Avoid lifting anything heavier than your newborn until your postpartum visit with your care provider.

Nutrition and weight loss

- The average woman requires 2,000 calories each day. If you are breastfeeding you will need an additional 500 calories to produce milk.
- Do not start a weight loss diet until you have discussed exercise and weight loss diet with your care provider.

Sexual relations and family planning

- If you had a vaginal delivery do not insert anything into your vagina for six weeks.
- Discuss family planning and methods of birth control with your care provider.

Emotional changes

- Up to 20 percent of all women experience some depression or anxiety in pregnancy or in the first two years after birth. The second parent can also experience these.
- Call your care provider anytime you do not like the way you feel: sad, anxious, angry, confused, numb, cannot sleep, lack motivation to care for your infant, having disturbing thoughts or fears
- Having pregnancy or postpartum depression does not mean you are failing as a mother, but that you need help to recover from a challenging, temporary condition.

Ten facts about depression and anxiety in pregnancy and postpartum

1. You are not alone. You are not to blame. With help, you will feel better.
2. You need regular breaks from taking care of your children and your house.
3. Postpartum depression does not go away fast: there is no quick fix or cure.
4. You will feel better if you reach out to understanding people and say how you feel.
5. You will feel worse if you judge your life on a bad day.
6. You will find what works for you. It might be different from what works for other women.
7. You will feel better if you get outside as much as you can. Even a little bit helps.
8. Recovery from postpartum depression or anxiety has ups and downs.
9. Be true to yourself and trust that you will find your way.
10. Good mothers can get depressed.

For more detailed information: Wendy N. Davis, Ph.D., Postpartum Support International, **www.postpartum.net**

New Parent Stress Test

While stress is impossible to avoid, you can learn how to recognize and manage stress build-up early. However, in 10–15 percent of families, it may be more than stress. To find out where you stand, take a few moments to answer the following questions. Write a number in the blank at the left of each statement below, based on this scale. To what degree is each of the statements *like* or *unlike* your family? Family includes you and your spouse or partner.

1	2	3	4	5	6	7	8	9	10
Very much ***unlike*** *my family*									*Very much* ***like*** *my family*

_____ 1. Fatigue is a bigger problem for us than we expected.
_____ 2. Our exercise habits have suffered quite a bit recently.
_____ 3. We seem to have a lot more temper flare-ups than we used to.
_____ 4. One or the other of us sometimes seems to get upset because the baby prevents us from having time together.
_____ 5. The workload around the house, including baby care, seems unfairly divided between us.
_____ 6. Our different styles in caring for the baby have caused friction between me and my spouse or partner.
_____ 7. Having the baby has led to disagreements about money.
_____ 8. Communication between us has suffered recently.
_____ 9. We feel we have no time for ourselves anymore.
_____ 10. We don't openly show much appreciation for each other's efforts in caring for the baby.
_____ 11. We are definitely not getting enough sleep and rest.
_____ 12. We are not eating as well as we used to.
_____ 13. We are not as considerate as we should be of each other's emotional needs and frustrations.
_____ 14. My spouse or partner and I don't seem to have as much emotional closeness as we used to.
_____ 15. We disagree quite a bit about how to be "good parents."
_____ 16. We can't seem to find the time anymore to get even the basic household chores done.
_____ 17. Having the baby has caused more of a financial strain than we expected.
_____ 18. We don't seem to find the time just to talk about personal things.
_____ 19. Caring for the baby and doing our other work seems to take up every minute we have.
_____ 20. We seem to criticize each other more than we used to.

_____ Total *(Add up the numbers in the column to determine your total score.)*

If your total score is more than 111, your family is showing more signs of stress than the typical new parent family. You may want to also take a few moments to answer the postpartum depression self assessment questionnaire on the next page. If your score is between 61 and 110, then you are handling the added responsibilities of new parenthood about as well as most families. Build on the strengths of your family (where you scored 1–3). Also choose difficulties where you feel you could make improvements (where you scored 7–10). If your score is under 60, then you are showing fewer signs of stress than most new families. Build on your strengths.

New Parent Stress Test developed by Richard Earle, Ph.D., Canadian Institute of Stress

Postpartum Depression Self-Assessment

Edinburg Postnatal Depression Scale

This self assessment scale has been found through research to be a useful tool in detecting postpartum depression. Please circle the answer which comes closest to how you have felt in the past seven days, not just how you feel today.

In the past seven days:

A. I have been able to laugh and see the funny side of things:
0 — As much as I always could
1 — Not quite as much now
2 — Definitely not quite as much now
3 — Not at all

B. I have looked forward with enjoyment to things:
0 — As much as I ever did
1 — Rather less than I used to
2 — Definitely less than I used to
3 — Hardly at all

C. I have blamed myself unnecessarily when things went wrong:
3 — Yes, most of the time
2 — Yes, some of the time
1 — Not very often
0 — No, never

D. I have felt worried and anxious for no good reason:
0 — No, hardly at all
1 — Hardly ever
2 — Yes, sometimes
3 — Yes, very often

E. I have felt scared or panicky for no good reason:
3 — Yes, quite a lot
2 — Yes, sometimes
1 — No, not much
0 — No, not at all

F. Things have been getting on top of me:
3 — Yes, most of the time I haven't been able to cope at all
2 — Yes, sometimes I haven't been coping as well as usual
1 — No, most of the time I have coped quite well
0 — No, I have been coping as well as ever

G. I have been so unhappy that I have had difficulty sleeping:
3 — Yes, most of the time
2 — Yes, sometimes
1 — Not very often
0 — No, not at all

H. I have felt sad or miserable:
3 — Yes, most of the time
2 — Yes, sometimes
1 — Not very often
0 — No, not at all

I. I have been so unhappy that I have been crying:
3 — Yes, quite a lot
2 — Yes, sometimes
1 — No, not much
0 — No, not at all

J. The thought of harming myself has occurred to me:
3 — Yes, quite often
2 — Sometimes
1 — Hardly ever
0 — Never

_____ Total score

Add your scores for each response. If your score is 14 or greater, talk with your health care provider.

Preparing to go home

Discuss with your doctor or midwife when you can go home. After an uncomplicated vaginal birth, you can expect to go home in one to two days. Mothers who have had a Caesarean birth usually stay in the hospital three or four days. Your doctor and your baby's doctor will write instructions for your discharge that are appropriate for you and your baby.

Items to complete before you leave the hospital

Mother

☐ Discharge order written by your doctor or midwife
☐ Mother & Baby Care Teaching Record signed by you and your nurse
☐ Birth certificate information completed
☐ Rhogam given, if indicated
☐ MMR vaccine, (measles, mumps, rubella) if indicated
☐ Home medication list

Baby

☐ Newborn exam and discharge order by your baby's doctor
☐ Feedings started
☐ Schedule outpatient appointment with Legacy Lactation Services (if needed)
☐ Hearing screening done
☐ Newborn blood screening test done
☐ Hepatitis B given (if ordered)
☐ Souvenir birth certificate
☐ Know correct use of car seat

Mother and baby follow-up phone call

A Legacy Health resource nurse will telephone your home two to four days after you leave the hospital. The nurse will inquire about how you and your baby are doing and answer any questions you may have. If indicated, they will offer referrals or a variety of resources as needed.

Postpartum Care Center at Legacy Salmon Creek

Families delivering at Legacy Salmon Creek Medical Center

During your hospital stay, a nurse will schedule you and your baby for a follow-up visit in the Postpartum Care Center, located on the Family Birth Center.This appointment is usually scheduled for two to three days following your discharge from the hospital. If you are scheduled for a visit to the Postpartum Care Center, you will not receive a postpartum follow-up call.

Danger signs for the new mother

After your discharge from the hospital, it is important to be aware of signs that might indicate a problem. Please call your physician or midwife if any of the following occur:

- Oral temperature above 100.3 F
- Sudden onset of severe pain or pain that does not go away
- Heavy bleeding; enough to soak through a large pad in an hour or less (not slim or mini pad)
- Passing clots that are the size of a golf ball or larger followed by heavy bleeding
- Inability to urinate, pain, burning or urgency of urination
- Foul-smelling vaginal discharge
- Foul or bloody discharge from an incision
- Swollen, red, painful area on the leg (especially the calf) that is hot to the touch
- Cracked or bleeding nipples
- Tenderness and red, warm, swollen area on the breast, especially with fever or flu-like symptoms
- Feelings of depression, anxiety or inability to cope

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