Post -Delivery Care Information

Baby

FEEDING:
Your baby will hopefully feed at birth—we will help you if you need help with the first latch. After the first feed, most babies will have a long sleep of 4-6 hours. After the first big sleep, your baby should nurse 8 times in 24 hours and should be awakened every 3 hours to nurse. If your baby’s eyes are open in the first 2 -3 days then you should be feeding your baby. Do not introduce a pacifier or soother until breastfeeding is well established.

CORD CARE:
The cord should be kept clean and dry. It should be out of the diaper and the diaper folded down enough in front to keep the belly button free of it. There may be a small amount of blood oozing from the cord but no active bleeding. Once it falls off, you may see a small amount of blood where the diaper or clothing rubs.

STOOL and URINE:
At first a newborn’s stool, meconium, is the colour and texture of tar. Using Vaseline on the baby’s butt will help make cleanup easier. Within a few days, the baby’s stool changes to a very loose mustard yellow. The frequency of bowel movements in a breastfed baby varies a great deal from many times a day to once every week. Both are normal if the baby is eating only breast-milk. If the baby has not urinated or passed meconium after 36 hours of birth contact your midwife. Place a piece of tissue in the diaper as a liner to look for urine, if unsure of peeing.

Baby’s urine output is:

<table>
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<tr>
<th>Day 1 - 3</th>
<th>Day 3 - 4</th>
<th>Day 5 -6</th>
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<tbody>
<tr>
<td>1 - 3 Diapers</td>
<td>3 - 4 Diapers</td>
<td>5 -6 Diapers</td>
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JAUNDICE:
If the baby becomes yellow-looking or jaundiced within the first 24 hours of life, page your midwife. This is an urgent matter so page if unsure in the first 24 hours. Most babies become jaundiced on day 3 or 4. This is a normal process and should gradually resolve after this time.
SLEEPING:
Leave your baby on the back to sleep. The current advice is to avoid a face down position or side lying position when you are not awake with the baby.

SKIN CARE:
Babies do not need a bath every day to be clean. The first bath can be done at anytime within the first days of life; limit the use of soaps and lotions because these can be drying and irritating to the skin.

CONCERNS:
If the baby has a fever, temperature under the arm of > 37.5 °Celsius, or is gasping and/or grunting with each breath page your midwife as these are urgent concerns. Normal baby Temp. is (36.5-37.5 °C).

Mother

REST:
After having your baby, adequate rest is very important; your midwife will encourage bed rest for the first 3 days and a walk outside on day 5, then gradually increasing your activity over the next two weeks.

BLEEDING:
To decrease the bleeding you experience in the first days, we will teach you to check for the hardness of the uterus. Rubbing the uterus will help the uterus to contract. Ensuring that your bladder is empty will give the uterus the space it needs to contract. Whenever you stand up, any blood that has collected in the back of the vagina may come out. Nursing makes your uterus contract and you may have a gush of blood. If you completely soak 1 pad in half an hour you should page your midwife and save the pads in case she wants to look at them. Passing the odd large blood clot is normal, if your bleeding is minimal prior to losing the clot.

SELF CARE:
Your whole vaginal area should be kept clean. Many women find that soaking in a clean warm bath several times a day eases the discomfort of abrasions or stitches. A cold pack applied after birth will help the swelling and bruising. Ice will be your friend make ice packs to apply as needed for pain and swelling. If it burns when you urinate, you can use your squirt bottle and lukewarm water over
yourself as you urinate. Try to keep your bowels loose by drinking plenty of water and eating foods that encourage you to have a bowel movement. Pain killers can help you cope with the pain; ADVIL (Ibuprophen) 400mg every 4-6 hours is very helpful.

**INFECTION:**
Preventing infection by good self care is the key to feeling well. Take your temperature every day in the week following birth; **if elevated above 38.0 Celsius, this could indicate an infection so page your midwife.** Your bleeding should smell like a period. If it smells foul, if there is any pus in the discharge, or if you have an area of uterine tenderness you may have an infection and you should page your midwife.

**BREASTFEEDING:**
When your milk comes in, your breasts may feel uncomfortably full and hard. Hot or cold compresses applied to the breasts or standing in the shower and allowing warm water to run over your breasts will provide some comfort and may speed the letdown of milk. Alternatively, cabbage leaves from the fridge placed in your bra can help with the engorgement pain. If you feel hard lumps or hot-red painful areas in your breasts, warm compresses, massage, bed rest and keeping the baby nursing frequently is beneficial in preventing breast infection.

**SUPPORT:**
When possible, it is important to have a support of family and/or friends to assist you as you adapt to early parenting. Many women commonly experience varying degrees of emotional upheaval, particularly in the first week following the baby’s birth. This may range from weepiness to feeling extremely agitated or depressed. If you feel that you are unable to cope or if you feel that you want to harm yourself or your baby, page your midwife immediately.