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Postpartum Instructions

CARING FOR YOUR BABY

<u>TEMPERATURE</u>: Newborns cannot regulate their own temperature well. Please dress your baby in one more layer of clothing than you are wearing to feel comfortable and remember to keep a hat on your baby. Your baby's under-the-arm temperature should remain between 97.6-98.6 F. If your baby's temperature is too high, take off a layer her clothing then re-check her temperature. If she is too cold, add one layer of clothing, but remember it is normal for her hands and feet to be cool.

<u>RESPIRATIONS</u>: A newborn's breathing should not be labored but may be irregular with periods of not breathing that can last up to 10 seconds, and this is OK. The normal respiratory rate is 40-60 breaths per minute on the first day and 30-40 breaths per minute afterwards. Babies are mandatory nose breathers and if baby can nurse they are probably having no difficulty breathing.

<u>HEART RATE</u>: A newborn's heart should beat between 120-160 beats per minute. You can check baby's heart rate by feeling the pulse by placing two fingers over the sternum or on the inner side of the upper arm, below the bicep.

<u>URINE/STOOL</u>: Within the first 24 hours after birth a newborn should pass stool. During the first few days, your baby should have the same number of wet and stool diapers as he/she is days old. The baby's first stool is called meconium and is tar-like and black. Putting olive oil on the baby's bottom will help it wipe off. The meconium will last ~3 days then it will change to a yellow to brown, curdy stool. Once your breast milk is in, the baby should have 6-8 wet diapers per day and pass stool 3-5 times per day. If you can't tell about urination in a disposable diaper put a couple pieces of toilet paper in it. For girls, be sure to wipe front to back and it is normal to see a small amount of blood-tinged discharge in the first few days of life. For boys that are intact, do not push back their foreskin when cleaning them. It is normal to see dark orange-red spots in the baby's urine-these are condensed uric acid crystals.

<u>FEEDING</u>: You should feed your baby when he/she wants to eat, not according to a set schedule. At a minimum feed your baby every 2-3 hours around the clock. The more frequently your baby sucks, the sooner your milk will come in and the less likely your breasts will become uncomfortably engorged. The colostrum your baby drinks before your milk comes in is very nutritious and beneficial. Once breastfeeding is established, it is OK for baby to have a longer stretch of sleep if he/she is nursing frequently throughout the rest of the day.

<u>SLEEPING</u>: After the baby is born he/she typically has one long sleep, but after that you should be waking your baby up to feed every 2-3 hours. In order to reduce the risk of Sudden Infant Death Syndrome (SIDS), it is advised for baby to sleep on his/her back or side on a firm surface and to avoid soft bedding or pillows that could cover baby's head. It is normal for babies to wake during the night to nurse, most babies do not sleep through the night for many months.

<u>CORD</u>: The clamp will stay on for 24-48 hours and we will remove it when we come to check on you. Keep the cord clean and dry. Fold the diaper under the cord to expose it to air. It will come off faster if you put nothing on it and it should fall off in 5-7 days. It is normal for it to have a slight odor and discharge at the insertion point as it decomposes.

<u>COLOR</u>: Sometimes baby will turn yellowish around the third day after birth which is called physiologic jaundice. This is normal and usually goes away on its own, but you can help it go away by breastfeeding frequently and exposing the baby to sunlight. Sometimes jaundice is more extreme and requires treatment.

<u>CLEANING</u>: You can bath your baby in warm water. Never leave a baby or child under age 5 alone in the bath. Do not use Q-Tips in your baby's ears and do not use baby powder on babies as it can cause breathing problems.

<u>BEHAVIOR</u>: Babies like to be cuddled, held, talked to, and touched. They can hear and see objects 8-10 inches away and they love to look at faces. Because babies can move and roll they should never be left alone on a bed or high area. You can help calm a fussy baby by breastfeeding, swaddling it in a blanket, lowering the noise level and lights, or touching him/her gently.

<u>NEWBORN SCREENING</u>: Your midwives will perform newborn screening. It is done twice, once when baby is 24-72 hours and again between 7-14 days old. The screen is required by state law but can be waived. However, we recommend doing it because it can detect rare but treatable metabolic disorders that cause brain damage. The screen involves a heel prick to obtain a small blood sample (see the pamphlet on newborn screening for more information).

<u>CAR SEAT</u>: Your baby must be in a rear-facing, federally approved car seat when riding in a car.

<u>FOLLOW-UP INFANT CARE</u>: We advise you contact your baby's health care provider soon after birth and set up a visit according to your provider's schedule.

<u>BIRTH CERTIFICATE</u>: We will file your baby's birth certificate electronically with the Department of Health and Vital Statistics after we complete the necessary forms together. There is an order form for you to request a copy of the birth certificate in your postpartum packet. It usually takes several weeks to get it in the mail.

CARE OF THE MOTHER

REST, FLUIDS, GOOD NUTRITION: New moms should be accompanied by another adult during the first 3 days postpartum. For the first 2 weeks, try to limit your activity to caring for yourself and the baby. Avoid lifting anything heavier than your baby. Try and get at least 8 hours of sleep in a 24 hour period. Plan on taking naps during the day (nap when your baby naps) and arrange for friends and family to help with meals, household chores, and taking care of children. Limit visitors to brief stays and try to keep the baby from being exposed to others' colds and germs. Make sure to drink at least 2-3 quarts of water a day and eat a well-balanced diet, including extra protein to help with tissue healing and extra fiber for avoiding constipation. Continue with your prenatal vitamins and Omega-3 fatty acids and increase your intake of Vitamin C to 500mg 3 times/day.

<u>BLEEDING</u> (lochia): Your bleeding should be like a menstrual period at first in both amount and color. Then over the next few weeks it will decrease and change from red to brown or pink and lastly to a yellow-white discharge. This process will take ~3-4 weeks. If your flow increases or changes back to a red color, massage your uterus until firm and decrease your activity. The blood should not have a foul odor and you should not soak more than 2 pads in one hour. Also, in the first few days it is common to pass clots of blood, as long as these clots are smaller than an egg, your flow is normal, and uterus is firm-everything is OK.

<u>UTERUS</u>: Your uterus should feel firm and about the size of a grapefruit with the top edge at or below your belly button. It should get smaller quickly and by the end of the second week you will not be able to feel it from the outside by pressing on your abdomen. Most women who have given birth will experience "afterpains" or cramps when their uterus is contracting down, especially when breastfeeding. Typically afterpains last 2-3 days. To get relief from afterpains you can apply heat to your abdomen and/or use ibuprofen.

PERINEUM: If you have had stitches or a small laceration, ice helps to reduce swelling in the first 12-24 hours, as does homeopathic arnica. In addition, take daily sitz baths in a clean tub with warm water and tissue-healing herbs. Only fill tub 4-5 inches deep and soak for 15-20 minutes. You can also encourage healing by using a peri bottle filled with water or sitz bath herbs every time you go to the bathroom. In addition, exposing your perineum to warm air (try a hand held hair dryer) and light (a small lamp aimed at your perineum) will promote healing. Don't worry about having your stitches taken out, they will dissolve on their own. For hemorrhoids, use ice or cold sitz baths and apply Witch Hazel on gauze pads directly to the area. URINATING/BOWEL MOVEMENTS: Urinating may sting if you have had any perineal damage. To help with this, try pouring warm water over your pubis while urinating or urinating in the shower. In the first few days be sure to empty your bladder frequently to help with your bleeding and afterpains. Again, it is important to drink lots of water (8-10 glasses per day) to help dilute your urine and keep your bowels soft. Eating a diet high in fiber, fruits, vegetables, and whole grains will aid in constipation. Typically bowel movements do not resume until 2-3 days after birth. To make it more comfortable, you can use a washcloth to provide counterpressure to your perineum when your first bowel movement occurs.

BREASTS: Most sore nipples are caused by incorrect position and latch of the baby on the breast. Make sure you and the baby are belly to belly with the baby's nose and chin touching your breast. The baby's mouth should be open wide enough to take in the nipple plus some of the areola (dark skin around the nipple). Varying your positions helps reduce sore nipples and prevents mastitis. Nipple care includes not washing them with soap, air-drying them after bathing and putting breast milk or pure lanolin (Lansinoh) on them if they are sore. Your breasts will produce colostrum immediately after the baby is born and then by day 3 or 4 it will change to mature breast milk. Frequent nursing will help prevent uncomfortable engorgement. Your body will produce the perfect amount of milk your baby needs. It is better not to introduce any artificial nipples or bottles until after breastfeeding is well established. Make sure to contact us immediately if you have any breastfeeding problems. Solving breastfeeding problems early will prevent bad habits to become firmly engrained and will reduce your chance of having breast discomfort.

SEXUAL RELATIONS: It is advised to put nothing in your vagina until your bleeding stops. After that, resume intercourse when you and your partner desire it. Use lots of lubrication since breastfeeding can decrease your vaginal discharge, go slowly and stop if there is any pain. Don't forget contraception as you can become pregnant even without having a period and nursing exclusively. Diaphragms and cervical caps need to be refitted before being used again after having a baby. It is normal for women not to have renewed desire for sex for many months. This postpartum time is good opportunity to foster intimacy in other ways of physical expression. EXERCISE: It is good to begin pelvic floor exercises (Kegels) following the birth, other more strenuous exercises, should be started gradually, being careful not to overdo it. Pay attention to your bleeding and if your flow increases or changes back to a red color massage your uterus and decrease your activity. Walking and postpartum yoga is a good way to start up exercising and building up core body strength.

<u>EMOTIONS</u>: After the baby is born it is normal to have some crying, anxiety, and irritability for no reason. This is most likely caused by the huge hormonal shifts that occur as you transition from pregnancy to non-pregnant and breastfeeding. Please keep us informed if it seems like you are having more bad days than good ones or if your sleep or appetite is affected.

<u>FOLLOW-UP CARE</u>: We will contact you at 24 hours and check-in to make sure you and baby are doing well. Then we typically see you at home on day 3 and 1 week after birth. At 3 weeks there is an optional office visit and our final visit is at 8 weeks to ensure that your baby is healthy and you are completely recovered.

PLEASE CONTACT US IMMEDIATELY IF:

BABY

- ♦ Has an armpit temperature of less than 97.6F or greater than 98.6F.
- Has respirations fewer than 30 or more than 60 breaths per minute.
- ♦ Has labored breathing with grunting, retractions of the chest, flaring nostrils, or blue/grey coloring around mouth and/or face.
- ♦ Has a pulse outside the range of 120-160 beats per minute.
- Does not pass urine or stool in the first 24 hours after birth.
- ♦ Is unusually fussy.
- ♦ Is difficult to wake.
- Is unable to nurse or has a poor suck.
- Is yellow on the first day of life or is getting more yellow after the third day plus the whites of the eyes are yellow.
- Has redness, swelling, heat, and/or smelly discharge (pus) or bleeding around the cord stump.

MOM

- ♦ Has a temperature is more than 100.4F after drinking lots of water.
- ♦ Has a pulse greater than 100 beats per minute while resting.
- Soaks two big pads in 1 hour and/or passes a blood clot larger than an egg.
- ♦ If the lochia smells foul.
- If the uterus remains soft and does not harden with massage or breastfeeding.
- If the uterus is tender or painful to the touch.
- ♦ Is unable to urinate or have a bowel movement.
- ♦ Is fainting, has a severe headache, has pain in the abdomen or chest, or see spots before her eyes.
- If there is a sharp pain in the back of the leg, with or without swelling.
- Perineum is becoming more painful each day, instead of less.
- Has any signs or symptoms of a breast infection (reddened, sore, hard/engorged)
- Feels depression, great anxiety, or the inability to cope.

*****Please contact us anytime if you have questions or concerns. If urgent, don't hesitate to page us at 425-388-2600.

ENJOY YOUR NEW BABY AND THIS NEW PHASE OF LIFE!!