



southern  
new hampshire  
health

Foundation OB/GYN



Dr. Denise McHugh  
Dr. Janine Keever  
Dr. Ann Lo  
Joyce Piccirillo, APRN  
Sara Amory, APRN  
Laura Johnson, APRN

10 Prospect Street  
Suite 402  
Nashua, NH 03060  
Phone: 603-577-3131  
Fax: 603-577-3132  
admin.fmpevgr@snhhs.org

## General Postpartum Guidelines

### If you've had a Vaginal Birth:

Don't be surprised if you tire easily for several weeks. You will never totally get your energy back until the baby sleeps through the night! Try to find some time for rest periods in these early weeks. A nap may be more important than cleaning the house or making the beds.

You should continue using the peri-bottle until the bleeding decreases to the point that it becomes unnecessary. Take care of your episiotomy stitches with continued hot soaks, particularly if you have had a large number of stitches or a 3<sup>rd</sup> or 4<sup>th</sup> degree laceration. Let the area air dry or pat it dry thoroughly. If there is some oozing or discharge from the area of the stitches, try some peroxide washes in the peri-bottle. If the stitches bleed or separate or have a bad smelling discharge, or puss drainage please call our office immediately.

Don't expect to jog or jump steps three steps at a time or do vigorous exercises until the stitches heal. This should take about two weeks. The stitches usually dissolve 7-10 days from delivery and you may see a few brown knots drop off. You can and should begin abdominal exercises and Kegel's immediately after delivery and progress to a more complete exercise program by four or five weeks.

It is OK to take a bath, if you can find the time! Sitting in clean, hot water would be good for the stitches and may help to relax you and your muscles.

You may drive or ride in a car and get out of the house as soon as you feel ready. Just remember that you and the baby have definite limits at this point, and don't plan a trip to the mall or other long tiring ventures just yet. Think twice about venturing out in bad weather.

### If you've had a Cesarean Birth:

Help is a must, not a luxury, for at least the first two weeks after you are discharged from the hospital. This helper should do the meals, cleaning, laundry and supervision of other children to allow you to take care of yourself and the baby. You will tire easily for many weeks. Nap daily. Do not drive for two weeks.

You may ride and take short trips and short walks in nice weather, don't overdo it. Pushing yourself too much will only delay your healing and may decrease your milk supply if you are nursing. Listen to your body, rest when you feel tired, pace yourself. Try not to get frustrated when your energy level stays low for many weeks. Remember, you've had major surgery and now you're "on call" every night!

Keep the incision dry and clean and open to air as much as possible. Baths are OK. Stairs are OK, but it will use a lot of muscles and can tire you quickly, so organize yourself to avoid multiple trips up and down. Do make time in your day for your exercises. These are very important to your healing and your general feeling and recovery. Be sure to include Kegel's exercises to help the vaginal muscles return to normal.



southern  
new hampshire  
health

Foundation OB/GYN



Dr. Denise McHugh  
Dr. Janine Keever  
Dr. Ann Lo  
Joyce Piccirillo, APRN  
Sara Amory, APRN  
Laura Johnson, APRN

10 Prospect Street  
Suite 402  
Nashua, NH 03060  
Phone: 603-577-3131  
Fax: 603-577-3132  
admin.fmpevgr@snhhs.org

### **After a Vaginal or Cesarean Birth:**

The bleeding will generally last from two or five weeks, tapering off to brown mucus at the end. It is OK to pass a small clot (grape or plum size) in the first week or two. You will find the bleeding comes in spurts and is generally heavier if you've been more active. **Don't use tampons** or plan to **swim** until three weeks after delivery when we know the cervix has closed again.

### **Call Us Immediately If:**

1. The bleeding is very heavy (more than a pad every two hours) or gushing, or accompanied by large clots.
2. The blood develops any type of odor.
3. You have excessive cramping.
4. You have a fever (more than 100 degrees Fahrenheit).

If you are still bleeding by your six week check, keep your appointment, and we will evaluate it then. Try to eat a nutritious diet with plenty of fluids and fiber. **Constipation** is common in these weeks so take Metamucil freely if needed (especially with episiotomies). Continue to take your prenatal vitamins, especially if you are breast feeding. You may also need to take one Iron supplement daily to restore your blood count.

### **Breast Care**

If you are bottle feeding you will be taking a drug called Parlodel (Bromocriptine) in the hospital to block the hormone that normally causes milk production. You will take home the rest of the pills to finish out fourteen days' worth. After you stop the Parlodel, there may be some breast engorgement and/or milk production. Treat this with a tight bra (day and night), ice packs and aspirin. If it is severe or persistent you can call the office and we can determine if you may need more time on the Parlodel.

If you are breast feeding you will receive a lot of advice on breast care from both the hospital nurses and from your pediatrician and his/her nurse.

### **Do Call Us If:**

1. You have signs of mastitis (a breast infection), including a red, hard painful area on the breast, and/or fever.
2. You are advised to temporarily stop nursing for some reason and need advice on pumping to maintain your milk supply.
3. If you are having problems with breastfeeding and are discouraged and feel you need support and advice beyond what your pediatrician may be providing.

When you wean the baby, whether it is at two months, nine months or 2 ½ years, do it gradually, dropping one feeding every few days to prevent discomfort.