

Information for Women after a Caesarean Birth



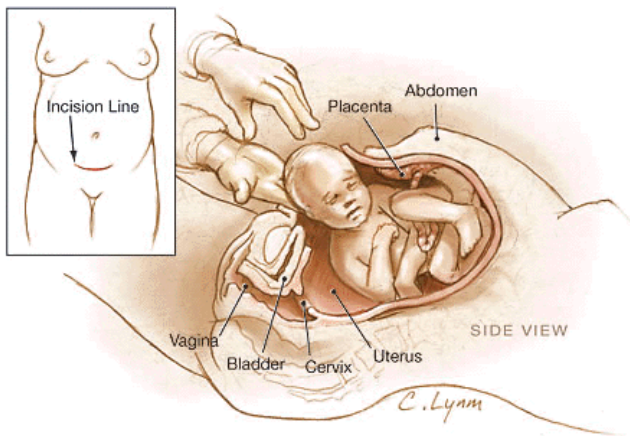
Peninsula
Health

What is a caesarean birth?

A caesarean birth is the delivery of your baby through an incision in the abdomen. This can be scheduled for a known time or can be required in an emergency situation. Your doctor will have discussed the reason for your caesarean birth with you.

Peninsula Health ensures that your choices are informed and your decisions are supported, respected and encouraged.

You are usually in hospital for approximately 3 days.



What happens in hospital after your procedure?

The doctor/midwife/nurse will have discussed the caesarean operation and what will happen before your procedure.

- On return to the ward the midwife/nurse will measure your pulse, blood pressure, breathing rate, oxygen levels and temperature frequently at first, then every 4 hours (more often if you require blood), then less often as you improve.
- Intravenous (IV) fluids will be stopped when you are eating and drinking satisfactorily, after which the needle (drip) can be removed.

- Your wound will be checked regularly and will be checked by the doctor before you are discharged.
- You may require a blood test the day after your procedure to check the iron content of your blood.
- You will have a catheter to drain your bladder until you have recovered from the anaesthetic.

Your midwife/nurse will enquire as to the severity of your pain and nausea, and ask you to score your pain regularly. Your midwife/nurse will explain the Pain Scoring system to you. Score pain from 0 to 10. (0 means No Pain - 10 means unbearable pain.)

- You will be given regular analgesia (pain control drugs). This can be through the IV drip or as an injection. When you can eat and drink you can take tablets for pain.
- You may also need medications to control nausea. If you are still feeling sick and unable to drink the IV drip may be left in until you can safely eat and drink.
- The midwife/nurse will administer your normal medications as required. Any new medication will be discussed with you by the staff including the pharmacist.
- You will be given a small injection called 'clexane' to prevent you getting blood clots – the nurse will discuss this with you. You will also be asked to wear compression stockings this also helps to prevent blood clots while you are not moving around as usual.

Please tell the midwife/nurse if you have any nausea, pain or discomfort

- You may need to rest in bed for the first 4 hours or longer, depending on the type and strength of your anaesthetic, after the surgery. Then you may be able to get up and attend to your baby with assistance. Please check with the nurse first. You may still have discomfort when you move around. You will gradually be able to return to your usual level of activity.

You will be checked each day to assess how you are managing after your birth experience.

- At this time the midwife/nurse will check your breasts, abdomen, blood loss and wound. The midwife/nurse will assist you with feeding and general care of yourself and your baby.
- You will be taught to check the level of your uterus as it returns to its normal size and what changes to expect in vaginal blood loss as well as changes in colour and amount.
- You will receive education on feeding, bathing and general hygiene of your baby, cord care, nappy changing, checking stools and urine output, caring for feeding equipment, expressing breast milk and settling your baby for sleep.

What happens before going home?

You will be discharged when medically stable. Staff will arrange your pain relief tablets, medications and advise of the need for a six-week follow-up appointment after you go home. Discharge usually takes place at 10.00am but can occur at any time during the day.

- The midwife/nurse will organise the paperwork that you need to take home.
- You will be given direction to see your GP/Specialist six weeks post birth or earlier if required.
- You will be given the opportunity to be visited by the Homecare Midwife. Staff will advise you on the date and time of their visit.
- If you are on medications, you will be given your medications with an explanation for use. Please continue to take your medication as prescribed unless advised otherwise by the doctor caring for you.
- If you require blood thinning injections after discharge this will be arranged with you. You will have education about giving blood thinning injections at home if required.
- You will be able to return to normal activity as advised by the doctor.

Before you go home you should be given information on support services such as:

- Infant Feeding Support Services
- Australian Breastfeeding Association
- Maternal Child Health Nurse
- Young Mum's Group
- PENPAC (Peninsula Post-Acute Care)
- PANDA (Post and Anti-Natal Depression Association)
- Also information on issues such as SIDS.

When you go home you should:

- Be able to attend to your own hygiene and attend to your baby's needs.
- Be able to eat and drink an adequate amount.
- Be able to pass urine without difficulty.
- Know how to care for your wound and seek help if any symptoms of complications occur such as fever, increasing pain, wound ooze, shortness of breath or pain in the calf.
- Know if you have agreed to a visit from the Homecare midwife and when the midwife/nurse will visit you.

Please discuss with the midwife:

- Any concerns you may have about managing at home on discharge.
- Read page 4 of this brochure and ask questions if you have concerns.
- **Ask us questions if you do not understand any arrangements.**

What do I need to know when I go home?

Please ask if you have questions about this information before you go home.

- It may take you several days to start feeling better. This is a normal recovery period.
- Gradually increase what you were doing in hospital.
- You should not do anything that causes your pain to increase and you should not lift anything heavier than your baby.
- Before you go home staff will advise you of the date and time the Home Care Services midwife will visit you after you go home.
- Wound care will be discussed with you prior to discharge - if you need help with your dressings this will be arranged with an appropriate community service.
- It is expected that you will have some pain. This varies with individuals. Take regular analgesia (pain relief) medication to keep you comfortable. This will be discussed with you before you go home.

You should understand:

- How to care for your breasts and nipples
- Know that you should expect vaginal loss for 2 – 6 weeks after your baby's birth. This loss will change in colour and consistency from bright red to pink and then finally to brownish.
- Know what measures to take to reduce the risk of SIDS.
- Understand what to do about contraception
- The need to arrange your six (6) week follow-up appointment with the consultant or GP.

If you experience any of the following go directly to an Emergency Department:

- Redness or ooze from the wound
- Significant worsening of pain
- Difficulty breathing or shortness of breath
- Painful swelling in the calves or legs
- Fever or chills, nausea or vomiting
- Sudden, large increase in vaginal bleeding
- Offensive vaginal discharge
- Difficulty in passing urine or pain around the kidneys or flank

Contact Numbers:

If you have general or non-urgent enquiries, please contact:

- WARD on (03) 97847450
- OR
- your Local Doctor

If you feel it is an EMERGENCY:

- call the ambulance immediately on 000
- OR
- present to the nearest Emergency Department

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Disclaimer: The information contained in the brochure is intended to support, not replace, discussion with your doctor or health care professionals.

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