

Bryan Cox, M.D.  
Christine Delagarza, M.D.  
Shannon Gallagher, M.D.  
Brian Harle, M.D.  
Elizabeth de la Garza, M.D.

Heidi Heck, M.D.  
Parke Hedges, M.D.  
Annaliese Kistler, M.D.  
Tiffany Satterfield, D.O.

## **POSTPARTUM INSTRUCTIONS**

Again, congratulations on the birth of your child. We know you are very excited and maybe a little anxious regarding the new family life but with rest and time everything should work out well. These first few weeks are going to result in some dramatic changes and we want to list a few special instructions for you with regard to the next four weeks. If you have any questions, please feel free to ask the nurses at the hospital before discharge or you can call us at the office. Please call the office for follow-up appointment.

### **Activities**

Limit your expectations during the first two weeks after the delivery, primarily taking care of yourself and your baby. Arrange for someone else to maintain the majority of the housework and abstain from heavy lifting (approximately 20 lbs). You will find during this time period that you have significantly less energy than normal due to interrupted sleep and recovering from post partum changes. You should set aside time during the day to at least relax or even take a short nap. As your energy increases you may begin exercising walking and stretching at first and increase as your endurance returns.

Please limit yourself to showers only during the first week after delivery. Doing the sitz baths as you did in the hospital will promote healing of your perineum and provide significant comfort. If you have had a cesarean section you can still shower with the steri strips or glue on the incision. If the steri strips have not come off on their own within two weeks you can remove them however if there is a suture under the skin please wait until your appointment. You may resume driving when you are comfortable wearing a seatbelt and able to move your feet quickly to be a safe driver.

If you are traveling during the six weeks following the delivery please be sure to stop and stretch your legs every 1-1 ½ hours. There is an increased risk of forming a clot in the leg called a deep vein thrombosis (DVT) during the post partum period and that is why you are encouraged to be moderately active. If you have significant swelling and or tenderness in one leg more than the other please contact the office.

### **Perineal Care**

Continue rinsing the perineal repair area as you were doing in the hospital for the first two weeks until the area feels normal. Tucks pads and Dermaplast spray can be used as needed for comfort. Hemorrhoid creams may also be used if needed.

**Continued...**

### **Breast Care**

We encourage you to try breastfeeding and recommend using a well fitted supportive nursing bra. Remember to apply the lanolin cream or other type of breast cream on your nipples following each feeding and then again wipe clean before the next feeding. If you have any difficulties with breast feeding, please contact the Lactation Center phone# 210-575-0261 or the office. If the breasts are red, very tender and you develop a fever > 100.4 please call the office and the physician on call can be contacted even after hours.

If you are bottle feeding you should wear a well fitting bra both during the day and at night for the first week. Binding the breasts with a 4" to 6" ace bandage will decrease the changes of engorgement. Ice packs, cold cabbage leaves and acetaminophen may help with pain.

### **Vaginal Bleeding**

Sporadic bleeding with a bloody mucous discharge is common for the first week or two after delivery. You may even pass occasional clots the size of a quarter. The bleeding may persist for up to six-eight weeks but should progressively get lighter. If you are bottle feeding or supplementing your first period may start within six to eight weeks. If however, you are breast feeding you will most likely not have cycles for the first six months or until you stop breastfeeding. This is not a reliable method of birth control and you will ovulate prior to your first period. The first few cycles may be rather heavy with cramping but improve with time.

### **Diet**

Maintaining a good, well-balanced diet during the post partum period will enhance the recovery from your pregnancy and delivery. Whether you are bottle feeding or breast feeding, you should continue taking prenatal vitamins and any iron supplement for at least six weeks. If you are lacking calcium in your diet daily calcium supplements are recommended.

Constipation is a common problem during post partum and you may refer to the pregnancy pamphlet you received at the beginning of your pregnancy for suggestion to prevent and treat as needed.

### **Medication**

If you are bottle feeding there are not restrictions about medications. However, if you are breast feeding most of the over the counter meds on the list and the pregnancy pamphlet are safe in breastfeeding. Most of the narcotic pain medications have acetaminophen in them so be cautious about taking additional acetaminophen. The maximum amount of acetaminophen is 4 gms (8 extra strength) tablets daily. You may use alternative pain meds such as ibuprofen (Motrin, Aleve, Advil, Naprosyn) even while breast feeding and they are very effective for the cramping pain and will not make you drowsy.

### **Sexual Activity**

Please abstain from intercourse until the bleeding has completely stopped, and preferably until the post partum office visit. We will discuss options for contraception at that time.

### **Baby Blues**

Most women will experience some emotional swings but hopefully with rest and family support these feelings will pass. If you feel overwhelmed, have continuous crying spells or are distancing yourself from the baby please contact us or refer to the information you receive from the hospital regarding post partum depression.