

Congratulations!

The first few weeks with your new baby are exciting, and can also be overwhelming. While you are getting to know your little one, remember that you need to take care of yourself as well.

This resource includes helpful tips for your recovery.

Unless your clinician tells you otherwise, you will need to schedule your 6-week postpartum appointment as soon as possible. Call our office during your first week at home at 312.926.8811 (TTY: 711).

Medication	How Much	Instructions
lbuprofen (Motrin®, Advil®)	600 milligrams (mg) (or 3 tablets that are 200 mg each)	Take every 6 to 8 hours as needed for cramping, muscle soreness and inflammation.
Acetaminophen (Tylenol®)	650 to 1,000 mg	Take every 4 to 6 hours as needed for pain. Do not take more than 4,000 mg in a 24-hour period.
Docusate sodium (Colace®, Dulcolax®)	100 mg	Take 2 times a day as needed for constipation. You can also use fiber supplements as needed.
Narcotic pain medication (if prescribed)	As directed	Follow instructions from your clinician. These may cause drowsiness and increased constipation.
Iron	As directed	Follow instructions from your clinician.



The information on the following pages will help you understand what to expect over the next days and weeks as you recover.

Self-care

Vaginal bleeding

Postpartum bleeding and discharge (lochia) can last up to 6 weeks. It can start out bright red and heavy during the first few days and change to dark red, brown, pink or whitish-yellow.

You may notice a gush of blood when you first stand up after you have been lying down, nursing your baby or increasing your activity. This is normal. Do not use tampons.

If heavy bleeding continues after resting, or if you soak 1 thick pad per hour, contact your clinician.

Perineal care

The perineum is the area between your vaginal opening and your anus. Soreness in this area is normal following all deliveries, whether or not you have a tear.

You will usually feel the most discomfort during the first few days after delivery. Your activity level may also affect your comfort level.

It is important to keep your perineum clean after delivery. Follow these instructions:

Wash your hands before and after perineal care, urinating or having a bowel movement.

Change your pads often, at least every 4 hours while you are awake.

Remove soiled pads from front to back.

Always wipe from front to back.

Use the squirt bottle you got in the hospital or pour warm water over your perineum after urinating or having a bowel movement.

- > This will help clean the area and relieve pain after you urinate.
- > You can also use a removable showerhead to gently spray the area.

Do not use tampons or insert anything into your vagina.

Take sitz baths as often as needed.

- > Fill the bathtub with 6 to 8 inches of warm water.
- > Soak in the tub until the water cools off (about 10 to 20 minutes).
- > Do not add soaps, salts, oils or powders to the water.

Cesarean delivery

If you had a Cesarean delivery (C-section), follow these instructions:

You may remove the paper tape strips (Steri-Strips™) if they have not fallen off on their own after 2 weeks.

Keep your incision dry. Pat it dry after showering. Do not take tub baths for 2 weeks.

Wear loose-fitting clothes to prevent binding the area.

Do not lift anything heavier than 10 to 15 pounds for the first 6 weeks.

Do not drive for at least 2 weeks. Before driving, make sure you are able to brake and turn quickly if needed.

You may use stairs, but move slowly and carefully.

Call your clinician if your incision is red, inflamed or oozing, or has a foul odor.



Most patients have colostrum (the first milk) right after birth. Your milk should come in 2 to 4 days after delivery. You may notice that your breasts become quite large and uncomfortable (engorgement).

If you are breastfeeding your baby

Try to feed your baby every 2 to 3 hours to empty your breasts. Your breasts and nipples may be tender in the beginning. The following suggestions will help:

Squeeze out some colostrum/milk, rub onto your nipples and let them air dry after nursing.

Apply lanolin cream or Lansinoh® to your nipples after nursing.

To help relieve the discomfort of engorgement, you can:

- Hand express a little milk before feeding.
- Feed or pump on demand.
- Use ice and ibuprofen to reduce inflammation.

Avoid using heat, massaging your breasts or pumping too much.

Talk with your clinician about other options.

If you are bottle-feeding your baby

If you are not nursing, your body will still produce milk for your baby in the beginning. Follow the instructions below to help your body to stop producing milk.

Wear a tight-fitting bra 24 hours a day. Sports bras may be more comfortable.

Apply ice packs to your breasts. Do not apply heat to your breasts.

Try not to stimulate your breasts. Turn your back to the shower.

Take ibuprofen as directed for tenderness.

The following symptoms may be signs of a breast infection, which may need antibiotics. Call your clinician if you develop any of these symptoms:

A breast lump that will not go away after nursing

Breast redness

Breast tenderness to the touch

Open sores on your breasts or nipples

Temperature more than 100.4 degrees F

Nutrition

The average weight loss is 10 to 12 pounds right after delivery, but this can be different for each person.

Be sure to eat a well-balanced diet and drink plenty of water. This will replace some of the fluids you lost during childbirth. If you are breastfeeding, this will help you establish and maintain breast milk production. While you are breastfeeding, you need to take in 500 to 600 more calories a day.

Uterine cramping

The contractions of the uterus after delivery are called afterbirth pains. Breastfeeding may worsen afterbirth pains since it stimulates the release of oxytocin, a contraction-stimulating hormone. Uterine contractions usually are stronger in people who have already had children.

If you have afterbirth pains, the following may give you some relief:

Keep your bladder empty.

Take warm showers or baths.

Use heat packs on your abdomen.

Try relaxation techniques.

Use over-the-counter pain medications as needed (see page 1).

Urination and bowel function

A full bladder may prevent your uterus from fully contracting. This may cause you to bleed more. Bladder fullness can also increase afterbirth pains and increase your chances of having a urinary tract infection. To lessen problems:

Empty your bladder as soon as you have the urge.

Try to urinate every couple of hours while awake in the 1st days after delivery.

Your bowel function should return to normal within a few days after a vaginal delivery. The following tips will help:

Drink plenty of water.

Eat a high-fiber diet that includes fresh fruits and vegetables.

Try mild activity, such as walking.

Do not use enemas, unless ordered by your clinician. They may recommend a stool softener or a bowel stimulant for you.

Hemorrhoids

Hemorrhoids, which can cause itching and pain, are common during pregnancy and right after delivery. Sitz baths, witch hazel compresses or Tucks®, Anusol® HC, Preparation H® and mild pain relievers may help. Try not to get constipated. Regular bowel movements can help hemorrhoids heal and lessen the discomfort they cause.

Activity

As you recover, try to slowly increase your activity as you are able. Listen to your body and do not overtire yourself. Once you are home, you can begin to take short walks and short trips out of the house.

As you increase your activities, pay close attention to how you feel. If you become tired, cut back on your activities and get more rest. We encourage you to walk. You should slowly increase the distance you walk. You may do light exercise as you are able. Check with your clinician before starting any vigorous, high-impact exercise program, or wait to discuss this at your 6-week postpartum visit.

Sexual intercourse

To help you heal, do not have sexual intercourse before your 6-week postpartum visit. At this visit, we will also discuss birth control options.

Breastfeeding alone is not an effective birth control method.

You can ovulate and get pregnant before your period starts again.

Once you and your partner have intercourse again, you may notice less lubrication in your vagina, especially if you are breastfeeding. You may use a lubricant.

Emotional adjustment

Many people in the postpartum period have concerns about their personal health and well-being, as well as the well-being of their baby. After giving birth, new parents may often have these common symptoms and concerns:

Fatigue Loss of independence

Discomfort Family needs

Difficulty moving around Relationships

Sleep problems Safety

Worries about mothering

skills

Body image issues

In addition, fatigue, not getting enough sleep, hormone changes, social isolation and the demands of caring for a new baby may lead to feelings of fear, anxiety, frustration, sadness and loss of control. Mood changes lasting longer than 14 days may be a sign of postpartum depression.

We are here to support you. We can give you the right care and referrals to clinicians who specialize in the emotional parts of postpartum care. Please call your clinician right away if you begin to have signs of postpartum anxiety or depression.

When to call your clinician

Call us right away at 312.926.8811 if you have any of these symptoms:

Heavy vaginal bleeding that does not stop, or you are passing large clots or tissue

Temperature more than 100.4 degrees F

Severe abdominal pain or cramping

Depression, crying too much and/or sleep problems

Severe pain or swelling in the area of your vaginal stitches or C-section incision

Pus-like discharge around your vaginal stitches or C-section incision, with or without foul odor

Breast pain and redness

Pain, redness or warmth in your legs with swelling

Shortness of breath

Chest pain

Severe headaches or visual changes

If your concern or question is not urgent, please call or send a message through our patient portal, MyNM. Or, you can use the MyNM® app.

If your issue is life-threatening, please call 911 or visit the nearest emergency department.

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