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After Birth Instructions for a Homebirth or Early Hospital Discharge

*****Read this handout before labor begins and have supplies ready*****

- Afterbirth pains** After birth pains can be quite uncomfortable. Ibuprofen, (Advil, Motrin, or Nuprin, etc.) can help alleviate pain and is safe while breastfeeding. Take 600mg every 6 hours around the clock for the best effect. You can also try Homeopathic Arnica, deep breathing with abdominal wall tightening on the outward breath, lying on your stomach, or a heating pad. Urinate frequently to keep bladder pressure off the uterus. Remember it will only last a few days. **Call your midwife** if your pain is not controlled with ibuprofen or if you have sudden intolerable pain.
- Bleeding** Bleeding heavier than your period, even with some clots, is normal in the first day after giving birth. The bleeding should taper off after the first day and usually ends by 4-6 weeks. To minimize bleeding: keep your bladder empty, nurse your baby often, eat nourishing foods (proteins, green leafy vegetable) and rest for at least 2 weeks. **Call your midwife** if you pass more than one peach sized clot or if your bleeding is heavy enough to fill a regular sanitary pad (maxi pad) within an hour.
- Perineum** Some swelling and soreness, especially when moving and sitting, after birth is normal. **Call your midwife** if you have intolerable or throbbing pain or if you notice a strong foul odor. Use warm water in a peri-bottle/squirt bottle/bidet to clean your perineum when you use the bathroom. Gently pat the area dry. Change your sanitary pad at least every few hours to discourage bacteria from growing. Ice may feel comforting, will help minimize swelling and is an absolute necessity for the first 24 hours if you have stitches. You can fill a glove or ziplock bag with crushed ice and wrap it in gauze, or moisten and freeze cloths or sanitary pads. After 24 hours of ice, sitz baths (a few inches of warm water in the tub or in a special plastic pan available at drug stores) are the most healing. The most effective sitz bath is 15 minutes several times a day. You can add infused comfrey and/or 1/4 cup salt. Many prepared herbal sitz baths are available online. The salt draws the tissue together and the comfrey, which contains allantoin, is an excellent healer. Tucks (or witch hazel compresses) may be helpful for itching as stitches heal. If particular areas are tender, vitamin E skin oil (or the oil in vitamin E capsules) applied to the spot may help. You may notice pieces of string from suture/stitches after a week or two as lacerations heal and some stitches fall out.
- Bowels** Drink plenty of fluids (more than 64 ounces/day) and eat plenty of fiber to keep your bowels moving. Try prunes, bran, or Metamucil if constipation is a problem. Colace is an over the counter stool softener which may be helpful.
- Hemorrhoids** Hemorrhoids that have appeared during pregnancy and/or birth can be painful and annoying. They will reduce with time during postpartum. Sitz baths can be soothing for hemorrhoids also. Tucks applied to

the area are helpful for itching and swelling. Anusol suppositories are helpful to relieve pain and itching. Homeopathic Hypercal is soothing and available in most health food stores. If possible, lubricate the hemorrhoid and gently reinsert it, recline after you do this.

Voiding

It is very important to keep your bladder empty so your uterus will stay well contracted and decrease bleeding. Get up to urinate frequently because it becomes difficult to empty when over full and your body will be diuresing (getting rid of) pregnancy swelling in the first days postpartum (which also causes excess sweating). If you are unable to empty your bladder try a shower, the sound of running water, sprinkle peppermint oil into the toilet, or squirt lukewarm water over your urethra (this will also dilute your urine, keeping it from stinging). If you have stitches pat your bottom dry do not rub. **Call your midwife if** you are unable to empty your bladder. Most women have some urine leakage in the first few days, Kegels will help. Tell the midwife at your 2 week visit if this is still a problem.

Activity

For the first few days spend your time sleeping, nursing, eating/drinking and enjoying your baby. Plan on not climbing any stairs or doing any housework for the first week. During the second week you can go up and down the stairs once a day. The more you rest in the first weeks the faster you will heal! Arrange for help at home (housekeeping, meal preparation and childcare) for at least 2 weeks.

If you notice that your bleeding increases or becomes red after turning brown or light: you have done too much that day, go back to resting more. You can begin Kegel exercises, abdominal wall tightening exercises (laying flat on your back draw your belly in, hold for a few seconds, then release; repeat a few times, increasing to 10 reps over a few days), and gentle yoga stretches as soon as it feels comfortable to you. For the first month avoid long walks, lifting anything heavier than the baby, sit ups, or any activity that causes discomfort or heavier bleeding.

Sex

You may resume intercourse when red bleeding has stopped for a week and you feel comfortable. Vaginal lubrication is decreased while you are breastfeeding (use additional lubrication like K-Y or astroglide). Maximum absorption of the sutures/stitches is between day 12-16. If you have tears, wait until after sutures are absorbed and tears are healed to resume intercourse. Review information about child spacing/contraception options and prepare to discuss this topic with the midwife at 6 week visit.

Nutrition

Remember when you are nursing you need even more nutritious food than you did when you were pregnant. (estimated 2500 Calories/day) You need an extra amount of protein, calcium (1500mg/day) and iron. Continue your prenatal vitamins, any iron supplements you are taking, and DHA/essential fatty acid/omega 3 supplements (shown to help minimize postpartum depression and boost infant neurological development).

Nursing

Nursing puts more demands on your body than the pregnancy did. Try to find time for a nap every day. Rest and excellent nutrition will help avoid breast infections.

If you have a red or sore area on your breast, you may have a blocked duct or a breast infection. Use warm water compresses with grated ginger, red pepper, or sea salt to the area. Warm water is also soothing, try massaging the breast towards the nipple while in the shower. Have your baby nurse very frequently and in varying positions on the sore side, emptying it completely. Drink plenty of fluids and try extra vitamin C, Echinacea and homeopathic Phytolacca.

Remember rest, heat and empty breast. **Call your midwife if** your fever persists for more than 24 hours above 100.4°.

Babies often have growing days when they want to nurse constantly. If your nipples get sore apply vitamin E oil, green or black tea compresses (wet tea bags), comfrey compresses, and/or Lansinoh

cream. If they become raw, cracked or bleeding, try the above measures for comfort and **seek help to improve the baby's latch from a lactation consultant or breast feeding counselor**. If the soreness, cracks or bleeding persist, **call your midwife**. She may want to check for yeast or staph infection with an office visit and lab test.

To **prevent soreness** change baby's position at each feeding, check for correct latch (should be comfortable after the first 10 seconds), break the suction at the end of a feeding with your finger before pulling baby off, rub breast milk into nipple/areola, air dry nipples, and apply lansinoh cream after each feeding.

If you experience fullness or engorgement when your milk comes in, nurse frequently even if it means waking the baby. You may find warm compresses before you nurse and cool cabbage leaves placed in your bra after nursing to be soothing. It may be difficult for the baby to latch on with engorgement. Hand express your milk until the area right behind the nipple is soft. Tylenol or advil may help.

Storing Breast milk

Human milk can be stored for various amounts of time depending on where it is stored. Label your containers with the date before storing. Be sure to wash your hands before expressing your breast milk. Wash all containers that will come into contact with your milk in hot soapy water and rinse and dry thoroughly.

Where stored		Length of time
Room temperature-	colostrum	12-24 hours
	mature milk	6-hours
Refrigerated-	mature milk	up to 5 days
Freezer	mature milk	3 weeks
In 0 degree freezer	mature milk	6 months or longer

Postpartum shopping list for Mom:

- Sanitary napkins (large)
- Squirt bottle/peri bottle (used to rinse perineum while on the toilet)
- Thermometer (for oral and underarm temps)
- Ibuprofen (a.k.a. Advil, Motrin)
- Arnica pellets and/or gel
- Herbs for sitzbath (soaking perineum)
- Basin for sitzbath (can also use regular bathtub filled only a few inches)
- Ice pack making materials (have a few in the freezer ready to use at the birth)
- High fiber foods or supplements
- Pre-made meals, support network for food drop-off, delivery/take out menus
- Supportive nursing bras (a few in larger sizes than you would wear now)
- Nipple cream (lansinoh)
- Breastfeeding resources (books, phone number for lactation consultant)

Optional:

- Breast pump, fresh cabbage, nursing teas, breastfeeding pillows

Your Baby

Urination	Your baby should urinate at least once within the first 24 hours after birth. About six wet diapers a day indicates the baby's is getting plenty of fluid. This may not occur until your milk comes in, before that 1 wet diaper for each day of life is normal. You may notice salmon/ orange spots in the diaper these are uric acid crystals and are normal. Some disposable diapers feel very dry even if baby has urinated, place a tissue in the diaper and check often to confirm urination if you are uncertain. If your baby has not urinated in 24 hours, call your midwife.
Cord Care	The cord stump should be kept clean and dry and will fall off in about 1 week. The umbilical cord can be cleaned with alcohol, especially at the base of the cord. If there is any sign of infection (red skin around the belly button, pus) call your pediatrician.
Bowel Movements	Your baby should have her first meconium poop in the first 24 hours. The consistency will initially be black, thick, and sticky, this gradually changes over to a loose yellow stool with white milk curds in the first few days (especially once the milk comes) Some babies have a bowel movement every time they nurse and others go for a few days without a bowel movement. Before the baby is back to their birth weight (all babies loose weight in the first days and most return to birth weight by 2 weeks) consult breastfeeding books, lactation counselor or pediatrician for estimated number of expected bowel movements for your baby to estimate the baby's intake. Wet diapers are the best indicator of adequate breastmilk intake.
Temperature	Keep your baby's head covered with a hat especially for the first 24 hours. Newborns lose most of their body heat from their head. Keep your baby covered in one layer more than you are comfortable wearing if the baby is not against your skin. The baby's hands and feet should feel warm to touch. Axillary (under the arm) is an easy safe way to take a temperature on a newborn. Place the bulb of the thermometer under the armpit and hold the arm close to the body to keep the thermometer in place. The normal newborn temperature range is between 97° and 99°F. If your baby is cold or hot and changing clothes/the environment does not improve his temperature Call your midwife or pediatrician.
Breathing	You can count your baby's respirations by counting the number of times the baby's chest rises and falls in 60 seconds. Count respirations when the baby is quiet. Normal range is between 35-60 times per-minute. Normally babies have irregular breathing patterns, pausing or taking a couple of quick respirations. Grunting, groaning or laboring with each respiration is not normal. A baby's color should always be pink (especially chest and around the mouth, but feet and hands can be blue/purple in the first days). Call your pediatrician or midwife if respiration's are greater than 60, your baby is laboring with breathing or not pink.
Mucus	Healthy infants can cough up mucus. Some babies will spit up/vomit quite a bit of mucus in the first 24 hours after birth. If there is excess mucus in the baby's nose or mouth your bulb syringe can be used to gently suction it out.
Metabolic Screening	This blood test is required by Pennsylvania State Law you may refuse this test based on religious or philosophical beliefs and practices. If you would like this test, it will be performed at the home visit on day 3 or 4 postpartum. You can also have extra tests performed on the same blood sample for an additional fee. (supplemental screening, please see the

lab brochure) For hospital births this test is done in the hospital after 24 hours or by a visiting nurse or pediatrician in the first few days.

Hearing Screen

All infants should have their hearing checked because subtle hearing loss cannot be detected by other means and may interfere with development. After a homebirth this test will be offered at the 2 week office visit.