

# POSTPARTUM INSTRUCTIONS

## WHEN TO CALL YOUR MIDWIFE

- **Redness or tender areas on Breast(s)/Chest**
- **Fever over 100.4 F**
- **Chills, feeling faint or dizzy**

## Rest and be cared for

- Stay in bed, even if you feel good. The more rest you get, the faster your body will heal. Limit activity to only using the restroom and bathing for the first few days. Limit visitors to conserve energy and allow for more rest. This is the time to accept help with house duties, errands and other children. Tips for rest:
- Take frequent naps
- Limit commitments
- Hire a postpartum doula or have a family member come into your home to help

## Nutrition & Hydration

Eat frequently. Meals should include oats, whole grains, leafy greens, fruits, healthy fats, iron and protein. You may also continue taking your prenatal supplements.

Hydration is very important and should be at least 1-2 liters a day. Staying hydrated will help produce adequate milk and also help with stinging from perineal tears by diluting urine. Proper hydration and nutrition also help avoid constipation.

## Breast/Chest feeding

Your breasts/chest are full of colostrum for the first few days until your milk transitions. Colostrum is the best food for a new baby and contains high amounts of protein, probiotics, fats, minerals and vitamins. Baby's stomach is small, therefore colostrum is enough. Babies should be latched every 2-3 hours or sooner and should be actively sucking for at least 10 min. Alternating breasts/chest will allow efficient drainage.

Around day 2-5, your milk will transition and your breasts/chest may feel full or engorged. This fullness may last for a few days while the body regulates and can be assisted by frequent feedings.

Other ways to relieve engorgement:

- Express milk by hand or with a pump **ONLY** until the fullness goes away (expressing too much may signal your body to make more milk).
- Apply warm compress, or take a warm shower.
- Massage the breasts/chest

### Newborn Stomach Size

Your breastmilk is all your baby needs!



Day One	Day Three	One Week	Two Weeks
size of a cherry	size of a walnut	size of an apricot	size of a large egg
5 to 7 ml 1 to 1.5 tsp	22 to 27 ml .75 to 1 oz	45 to 60 ml 1.5 to 2 oz	80 to 150 ml 2.5 to 5 oz

medela

## WHEN TO CALL YOUR MIDWIFE

- If you soak (front to back) 2 pads within an hour
- If you pass a clot larger than your fist
- If bleeding has foul odor
- If you have uterine tenderness

## RESOURCES

- Kellymom.com
- Birthingandbreastfeeding.com
- LaLecheLeague.org
- Babywearinginternational.org
- Parentingscience.com

## Bleeding

Bleeding will be like a heavy period. It will slowly taper off as the body heals. It will change from bright red with clots to pinkish brown, finally to a cream. Bleeding should be complete by 6 weeks. The more rest you take, the sooner bleeding will cease. If you have a day of activity, it is normal to have more bleeding the following day. This is your body's way of telling you to slow down. Do not use tampons and change pads frequently.

Your uterus will be located just under your belly button and should feel similar to a grapefruit.

Ways to help the uterus stay firm:

- Nurse baby on demand/frequently
- Empty your bladder frequently
- Massage the uterus by hand

## Afterpains

You may feel cramping for the first few days, especially when latching baby. This is the uterus shrinking down to pre-pregnant size.

Ways to help with cramping:

- Heating pad
- Magnesium
- Ibuprofen
- Crampbark tea or tincture

## Perineal Care

Swelling is normal and should go away within the first few days.

Ways to help heal the perineum:

- Sitz baths
- Spraying with warm water each time you use the restroom
- Use ice pads/packs for the first 24 hours- switch to warmth after 24 hours
- Witch hazel
- Kegels

## Sexual Activity

It is best to wait until all bleeding has stopped and you feel physically and psychologically ready. The first time can be intimidating, so take it slow. Vaginal dryness is common with the hormones of postpartum and lactating and can be remedied with lubricants. It is possible to ovulate within 4-6 weeks of birth, even while breast/chest feeding. Therefore, it is important to know your family's plan for contraception.

## Additional information

Please take your temperature every 4 hours for the first 3 days. A log has been included on the left side of this sheet. If you have any questions, please call your midwife.

# NEWBORN CARE

## WHEN TO CALL YOUR MIDWIFE

- Your baby's lips or area around the mouth is dusky/purple
- Your baby has respirations faster than 60 breaths per minute
- If your baby appears to have trouble breathing
- Baby has a temperature of 100.4 or higher

## WHEN TO CALL YOUR MIDWIFE

- If a pustule breaks open
- If you are concerned about any rash

## Congratulations

Now that you are a parent, you may have some questions regarding your new baby. Your midwifery care includes well baby care for the first 6 weeks. Please make sure to call your pediatrician to let them know your baby has arrived and to make your initial appointment. The first appointment should be scheduled within the 1st week. Your midwife may perform the metabolic screen at your first postpartum visit.

## Newborn respirations

Newborns breathe faster than adults and their respirations (breaths) are at times irregular. The average respiration amount is 30-60 breaths per minute. Congestion, snorting, sneezing and gagging up mucous is normal, you may use a bulb syringe or nose Frida to help.

## Keeping baby warm

Skin to skin is the best way to regulate a baby's temperature. When dressing baby, add one more layer than what you are wearing to keep them warm. It is normal for baby's hands and feet to be blue/purple- this is not always a sign that they are cold, rather a normal process of blood circulation. Take baby's temperature every 4 hours for the first 3 days. Utilize the chart on the left side of this sheet.

## Umbilical cord care

You can expect the umbilical cord to dry and fall off anywhere from 4-14 days of birth. Keep the stump dry, this will allow it to heal faster. You may clean the outer edge of the skin with a Q-tip if desired. It is normal for it to have a slight smell while healing. If there is oozing or bleeding from the cord, alert your midwife.

## Bathing your baby

Babies do not need to be bathed right away, and too much bathing could dry out their skin. Using a wet cloth, you may wipe them clean. Keep areas behind the ears and in the neck folds clean. These areas can gather milk and spit-up frequently.

## Skin

Baby's skin changes rapidly as it transitions from the water to air. It is normal for baby to have dry peeling skin- you may help this by applying oil to the skin. Pimple-type rashes are normal.

## WHEN TO CALL YOUR MIDWIFE

- Your baby has not urinated in more than 24 hours
- Your baby has not had a bowel movement in 4-5 days

### NORMAL POOP



MECONIUM



BREAST/CHEST  
FED



FORMULA FED  
OR EATING  
SOLIDS



TEETHING,  
STOMACH  
BUG

### ABNORMAL- CONTACT MIDWIFE



LIVER  
FUNCTION



BLOOD  
STAINED



POTENTIAL  
BLEEDING



LIVER  
FUNCTION

## Elimination

Your baby should urinate within the first 24 hours. Babies should poop and pee the same frequency as their age (example: 2 pees & poops on 2nd day of life). Use the output log on this page to keep track of pees and poops for the first week.

Sometimes uric acid crystals may show up in the diaper- they have a orange/red color- this is normal. Some female babies may have mucous and blood discharge- this is also normal.

Your baby's first bowel movements are dark, tar-like excretion called meconium. Coating the baby's genitals with oil at each diaper change will help meconium clean off easily. As your milk transitions, meconium changes to green-brown then to yellow-green. Stool color can give information on gastrointestinal wellbeing. Refer to stool guide on this page for further information.

## Jaundice

Yellowing of the skin around 2-8 days from birth is normal. This is due to baby ridding the body of excess red blood cells made in utero, leaving higher amounts of bilirubin in the blood. This bilirubin turns the skin yellow. You can help your baby expell excess bilirubin by feeding them frequently and putting them in indirect sunlight for 20 min/day.

## Breasts/chest & genitalia

All babies can have engorged nipples, and pale white secretions. This is a result from parental hormones in pregnancy. These hormones may also enlarge the scrotum or swell the labia.

## Eyes

Red spots on the whites of the eyes(sclera) are broken blood vessels from birth, and will go away by week 2. Baby's tear ducts are not fully developed. This allows bacteria to grow, leaving a yellow-green discharge or crust. A warm washcloth or wet cotton ball can be used to clean the area. Breast/chest milk may also be sued, as it has antibacterial properties.

## Gas/ stomach issues

Gas and spitting up are normal in the newborn. Not all babies need to be burped, a baby that has gas may benefit from being burped. If baby is inconsolable and in pain- contact your midwife.

Ways to help with gas:

- Gently but firmly massage baby's belly in a clockwise, circular motion.
- Bicycling or rolling baby's legs up to the chest to move gas.
- Warm bath

