Postnatal Discharge Advice

Doctors Appointment – If you haven't already been given a 6 week check-up appointment please call and make one soon after you leave hospital. If you would like a Pap smear smear at this time, please tell my receptionist when you make this appointment and it will be arranged.

Length of stay – As a general rule, if you had a vaginal delivery you will go home on Day 5 after birth, Day 6 if you had your baby by Caesarean Section. If all is well you may choose to leave earlier. You must have a medical reason to stay longer.

Child Health nurse – It is advisable to phone your clinic within the first week of arriving home to make an appointment. The phone number is in your purple book.

Immunisation – Hepatitis B immunisation is now offered to all babies on Day 3 in hospital. Your child health nurse will discuss subsequent immunisation. Your baby's first triple antigen and polio immunisation is due when your baby is 2 months old.

Uterine bleeding – May continue for 6 weeks post delivery. It sometimes increases following breast feeding or exercise and may vary in colour from dark red to pale pink or brown. This should not be excessive, offensive in odour or consist of large clots.

Perineal sutures- Keep area as clean and dry as you can. The sutures will usually fall out between weeks 4-6. If you are concerned about the wound make an appointment to see Dr Harris.

Caesarean wound – Keep clean and dry. Continue anti-inflammatory medications +/-Panadol as long as you need. Firm binding over the area often helps discomfort. Watch for areas of redness, heat or swelling suggesting infection, if this occurs please call and make an appointment with Dr Harris.

Mastitis – If an area of your breast becomes red, flushed and or very tender and you have flu like symptoms (hot/cold or feel unwell) continue breastfeeding but seek medical advice immediately.

Breast feeding difficulties –

Contact Joy, Lactation Consultant on 9447 0111 – Glengarry patients. SJOGH patients contact hospital Lactation Consultant

Emotional changes – Bringing baby home from hospital creates lots of new experiences and many parents find it takes time to adapt to their new role. If you feel you are having difficulty coping or adjusting to the demands placed on you or you are feeling depressed it is important to speak to your GP, Obstetrician or Child Health nurse.

Activity and Exercise – After childbirth, all women should make pelvic floor exercises part of their daily routine. Normal daily activity or walking can be resumed immediately but no vigorous exercise programs or sports should be commenced for 6 weeks to allow you body to get back to normal. If you want to swim as part of a regular exercise program avoid public pools and swim only in the ocean until 6 weeks.

Driving – After having a Caesarean Section it is advisable to avoid driving long distances for up to 6 weeks. It is OK to drive short distances when you feel ready.

SIDS Prevention strategies –

- Lay baby on back to sleep
- ❖ Do not smoke near baby
- ❖ Make cot up at bottom so baby can't wriggle down and cover head
- ❖ No doonas, bumpers or soft toys in cot
- Breast feed if possible

Food Fibre and water – Eat a well balanced diet including plenty of fresh fruit and vegetables. Aim to drink 8 glasses of water a day. This will help to keep you feeling good and your bowels regular.

Tampons— You can start wearing tampons with your first period **if you feel comfortable**. The first period can occur as early as 6 weeks (but often later if breast feeding) and any stitches you have had should have healed by then.

Sexual activity – Unless advised against it, sex can be resumed when your loss has stopped or **when you feel ready and comfortable.** Some couples find a water based lubricant makes sex more comfortable. To prevent an unplanned pregnancy, use a reliable method of contraception.

Contraception – Contraception will be discussed at your 6-week check up if not already decided on. If sexual activity is resumed prior to this some form of contraception is recommended, as some women may already be fertile. Condoms can be used as soon as sexual activity is resumed other options to be considered are the pill, the mini-pill, a diaphragm, Depo Provera or an IUCD. Natural family planning is difficult to use until periods return to normal.