

# Caring for yourself after having a baby



# Your Healthcare team

## Midwife

After having your baby, the main care provider throughout the early postnatal period is likely to be a midwife.

Visits are arranged at home/postnatal clinics or in community hubs.

Care is provided for at least 10 days up until 28 days after birth.

The frequency of visits will depend upon yours or your baby's needs.






## Student midwives

On occasions a student midwife may accompany a midwife to visit you and may ask consent to assist in providing care to you.

## Health visitor

Health visitors are midwives or nurses who will make appointments to see you at home or in clinics, usually in a GP surgery. They monitor the growth and development of your baby and will ask about your wellbeing.

## My contacts

Maternity unit:	
Named midwife:	
Community midwifery office:	
Postnatal ward:	
Health visitor:	

# Postnatal visit pathway



## Visit 1:

Within 24 hrs if the baby was born at home, or day after you get home from hospital.

## Visit 2:

A midwife will visit around day 3 and is likely to weigh the baby and perform a check on the mother.

## Visit 3:

Midwife will visit and complete the newborn blood spot test. For further details on the test please see: [www.nhs.uk/conditions/baby/newborn-screening/blood-spot-test/](http://www.nhs.uk/conditions/baby/newborn-screening/blood-spot-test/)

## Visit 4:

Discharge visit around day 10 to 14. Mom and baby will both have a physical examination and transfer care to the health visitor.



# What happens when my midwife visits

There are routine checks that your midwife may complete at your postnatal visits:



They may ask about your breasts, regardless of how you are feeding your baby.



Your uterus, after having a baby, should return to its pre-pregnant state. To assess this the midwife may palpate your tummy gently.



Vaginal blood loss (lochia) is normal after having a baby. You may be asked about its colour, amount and smell.



Pregnant and postnatal women have a risk of blood clots known as a DVT (deep vein thrombosis). Your midwife may well ask about your legs and ask to see them.



The perineum (area between your vagina and anus) is often a little uncomfortable after having your baby and the midwife may ask you how it feels and inspect if there are any sutures. Over-the-counter medicine can be taken for pain relief. Speak to the pharmacist who can advise.



Your midwife will ask if you are able to pass urine normally and will ask about bowel movements. It is important to drink plenty of fluids and stay well hydrated.

# Mental Health

Having a baby can be an intense experience and may result in a wide range of feelings. Some women may feel no or mild mood changes or be a little tearful (known as the baby blues). Other women and (particularly those with previous or current mental health problems) may have more intense feelings or the symptoms may worsen.

If you are concerned about your thoughts, feelings or behaviour seek help:



Speak to your midwife , GP or health visitor



Talking therapies can help



Some medication is safe in pregnancy and when breastfeeding. If advised to take medicine and you are worried, speak to your GP.



There is no shame in asking for help...

“A problem shared is a problem halved.”



# Pelvic floor exercises

The pelvic floor is made up of the deep muscles that cover the bottom of your pelvis. They support your uterus and help control the bladder and bowel. During birth these muscles become stretched which can cause pelvic floor problems including loss of bladder and/or bowel control, pelvic organ prolapse and reduced sensation during sex.

**Pelvic floor exercises strengthen the muscles and can be done anywhere!**

## DO



Squeeze and lift your pelvic floor muscles as hard as you can



Hold for a count of 10 seconds, or if your muscles feel too weak to hold for 10 seconds, aim to build up time slowly



Repeat this exercise up to 10 times



Aim to perform sets of 10 squeezes, 3 times a day, every day

## DO NOT



Hold your breath



Clench your buttocks

# What to expect after a caesarean birth

After your caesarean your blood pressure, pulse and temperature, breathing rate and pain level will be monitored frequently. This is to check you are recovering after the anaesthetic and surgery. If you are well you can eat and drink - your midwife will advise when it is safe to do so.

Regular pain relief will be offered as discomfort after your caesarean is normal. If you feel your pain is not controlled speak to your midwife.

The catheter that drains urine away from your bladder is likely to be removed 24-48 hours after surgery, depending on your recovery.

The wound will be dressed when you leave theatre. Wash and dry the wound carefully every day. Avoid perfumed products as they may irritate the area. There is no need to redress the wound unless told to do so.

Numbness around the caesarean wound is often reported by women. This is normal as the muscles and nerves need time to heal.



Take regular pain relief to keep on top of any discomfort



Wear loose comfortable clothing and cotton underwear to keep the wound from getting too hot and sweaty



Rest! A Caesarean is major abdominal surgery and it can take time to recover; resting will help your muscles heal



Women should be discouraged from heavy lifting, which may cause discomfort and delay the healing process.



Check your car insurance after a caesarean section as your cover may be affected.

# General info

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## Screening

If you booked late in your pregnancy or declined screening, e.g. for haemoglobin or antibodies, these are recommended postnatally.

## Healthy eating

Eat a healthy balanced diet, lean meat, fish and eggs are great for protein, and carbohydrates which can help for that post birth energy lull.

## Domestic abuse

1 in 4 women experience domestic abuse in their lives and it sometimes presents or worsens in pregnancy. This could be a risk to you and your baby.

## NHS Care

Prescriptions & dental care are free during pregnancy and for 12 months after giving birth. Your child is also freely entitled to these until they are 16.

## Benefits

Having a baby can be an expensive time. The money advice service offers lots of helpful information: [www.moneyadvice.service.org.uk](http://www.moneyadvice.service.org.uk)

If you are employed, your employer should provide options on maternity leave and pay. Child benefit is available for children up to the age of 16.

## Support groups

Breastfeeding	<a href="http://www.nhs.uk/start4life/baby/feeding-your-baby/breastfeeding/breastfeeding-help-and-support/">www.nhs.uk/start4life/baby/feeding-your-baby/breastfeeding/breastfeeding-help-and-support/</a>
NCT	<a href="http://www.nct.org.uk/">www.nct.org.uk/</a>
Womens aid	<a href="http://www.womensaid.org.uk">www.womensaid.org.uk</a>



# Planning for next time



There are no rules about when to start having sex again after you have given birth. It is advisable though to wait until after the bleeding has stopped for a few days and until you feel ready. This allows time for healing to take place and reduces the risk of infection.

You can get pregnant as soon as 3 weeks after the birth of your baby, even if you are breastfeeding. It is important to use contraception each time you have sex until you are ready to get pregnant again.

For information on contraception visit:  
[www.fpa.org.uk](http://www.fpa.org.uk)



Folic acid is a vitamin that is essential for the healthy development of a baby in the womb. This vitamin is vital to support the development of a baby's brain and spinal cord. It is advisable to start taking 400mg of folic acid when you start trying for a baby or as soon as you get a positive pregnancy test. If you have diabetes, epilepsy and some other conditions you will require a higher dose of 5mg.

It's a good idea to check that you are fully protected against measles, mumps and rubella before getting pregnant again. Rubella infection in pregnancy can lead to serious birth defects. If you are not sure whether you have had two doses of the MMR vaccine, ask your GP surgery to check for you.



# Websites for further reading

**Urinary incontinence (NHS):** [www.nhs.uk/conditions/urinary-incontinence/](http://www.nhs.uk/conditions/urinary-incontinence/)

**Your body after the birth (NHS):** [www.nhs.uk/pregnancy/labour-and-birth/after-the-birth/your-body/](http://www.nhs.uk/pregnancy/labour-and-birth/after-the-birth/your-body/)

**Your post-pregnancy body (NHS):** [www.nhs.uk/conditions/baby/support-and-services/your-post-pregnancy-body/](http://www.nhs.uk/conditions/baby/support-and-services/your-post-pregnancy-body/)

**Breast pain and breastfeeding (NHS):** [www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding-problems/breast-pain/](http://www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding-problems/breast-pain/)

**Coping with stress after having a baby (NHS):** [www.nhs.uk/conditions/baby/support-and-services/coping-with-stress-after-having-a-baby/](http://www.nhs.uk/conditions/baby/support-and-services/coping-with-stress-after-having-a-baby/)

**Keeping fit and healthy with a baby (NHS):** [www.nhs.uk/conditions/baby/support-and-services/coping-with-stress-after-having-a-baby/](http://www.nhs.uk/conditions/baby/support-and-services/coping-with-stress-after-having-a-baby/)

**Sleep and tiredness after having a baby (NHS):** [www.nhs.uk/conditions/baby/support-and-services/sleep-and-tiredness-after-having-a-baby/](http://www.nhs.uk/conditions/baby/support-and-services/sleep-and-tiredness-after-having-a-baby/)

**Back pain (NHS):** [www.nhs.uk/conditions/back-pain/](http://www.nhs.uk/conditions/back-pain/)

**Feeling depressed after childbirth (NHS):** [www.nhs.uk/conditions/baby/support-and-services/feeling-depressed-after-childbirth/](http://www.nhs.uk/conditions/baby/support-and-services/feeling-depressed-after-childbirth/)

**Your 6-week postnatal check (NHS):** [www.nhs.uk/conditions/baby/support-and-services/your-6-week-postnatal-check/](http://www.nhs.uk/conditions/baby/support-and-services/your-6-week-postnatal-check/)

**Services and support for parents (NHS):** [www.nhs.uk/conditions/baby/support-and-services/services-and-support-for-parents/](http://www.nhs.uk/conditions/baby/support-and-services/services-and-support-for-parents/)

**Expressing and storing breast milk (NHS):** [www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding/expressing-breast-milk/](http://www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding/expressing-breast-milk/)

# Mother's page

Use this page to write down any questions you may wish to ask your health care professionals

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You may wish to discuss aspects of your pregnancy, birth or postnatal experience with your care providers. If you have any thoughts or comments, use the space below

*Pregnancy:*

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*Birth:*

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*Postnatal:*

# Signs to look out for and seek assistance

If your blood loss becomes heavy, you begin to lose clots or there is an offensive smell to your lochia (vaginal discharge after childbirth)



If you have a high temperature or feel clammy, these can be signs of infection



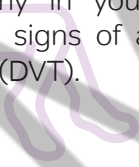
If you feel that your pulse is racing quickly, this is another sign there may be an infection



Rapid breathing



Pain, swelling or redness may be of concern particularly in your calves. These can be signs of a deep vein thrombosis (DVT).



Red or painful breasts may be due to infective or non infective mastitis



Persistent tiredness, feeling faint and or heart palpitations may be a sign of anaemia

