

DISCHARGE FROM HOSPITAL

You will be discharged from hospital when you and the doctor decide that you and your baby are ready, usually between 3–5 days.



You may be transferred to another maternity unit in your home area after 48 hours, if you and your baby are well enough to do so. You will be able to travel by car and you must use a car seat for your baby as this is a legal requirement.

If you are discharged from hospital with a wound, here are some simple tips to help you heal your wound.

- **Hygiene** – shower and wash as normal, taking care when handling your wound, dry the wound thoroughly.
- **Wound care** – look for any signs of developing infection. That is pain, redness, heat, swelling of your wound, if your wound begins to smell unpleasant, if you feel unwell, hot and cold or shivery. Contact your midwife or doctor if you experience any of these signs.
- **Diet** – eat food high in energy, protein and Vitamin C such as potatoes, pasta, meat, dairy food, fresh fruit and vegetables.
- **Rest** – try and get adequate sleep – we realise that this may not be possible with a new baby. Take a nap or lie down during the day if you feel tired.

When you go home, you may still need regular oral pain relief for the first few days. Ensure this is organised before you leave hospital.

When you go home you are advised to seek your Doctor's or Midwife's advice before resuming any of these activities:

- drive a car – check with your car insurance company whether they cover you after having a caesarean operation
- vacuum/hang out washing
- wear tampons

- swim or use a spa bath
- do any heavy lifting (including lifting your baby in a car seat, lifting out groceries from the car). You need to be aware of using your abdominal muscles correctly.

It may take up to six weeks before you are able to do these activities comfortably.

A pelvic floor re-education pamphlet is available for all women.

You may have intercourse when you feel comfortable, but remember you may get pregnant, so take precautions.

Remember to make an appointment for your six-week check with your GP or Obstetric Specialist.

IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE DO NOT HESITATE TO DISCUSS THESE WITH YOUR MIDWIFE OR DOCTOR.

FEEDBACK

We encourage feedback and assurance is given that comments will not adversely affect your current or future care.

You can do this:

- through discussion with MidCentral Health staff providing your care
- by completing "Tell us what you think..." pamphlets available from all services
- by contacting our Customer Relations Co-ordinator, PO Box 2056, Palmerston North or phone (06) 350 8980
- by contacting a Health and Disability Commissioner Advocate, phone 0800 112 233

You will be given a New Zealand College of Midwives (NZCOM) feedback form to fill out prior to discharge from the hospital.



– Maternity Services –

POST DELIVERY INFORMATION ABOUT BIRTHS BY CAESAREAN SECTION



WOMEN'S HEALTH UNIT
PALMERSTON NORTH HOSPITAL

RETURNING TO THE WARD

On your return to the Maternity Ward, you and your baby will normally be placed in a single room. On return from theatre, you will be on your hospital bed.

It is great to receive congratulations from everyone, but we suggest you do not have too many visitors at this initial time. You will tire very quickly and you need to save your energy for yourself and your baby.

There is **one** ward extension phone available to use to make local calls to your family and friends, although we would appreciate it if you would make them as brief as possible.

OBSERVATIONS

You will be closely monitored after you have returned to the ward and for a period of time afterwards. We will be observing your:

- comfort level & pain score
- temperature
- pulse
- blood pressure
- oxygen saturation levels
- wound dressing
- vaginal bleeding
- a redivac (wound drain) if used
- urine catheter bag
- intravenous fluids.

Once your condition is stable, the monitoring will be reduced. The catheter and IV fluids are usually removed within 24 hours.

PAIN RELIEF

When you return from theatre and before your initial analgesia is wearing off, we have pain relief options available.

These may include:

- Patient Controlled Analgesia (PCA) pump
- Oral pain relief or rectal suppositories.



PLEASE DO NOT HESITATE TO ASK FOR PAIN RELIEF. It is part of the care provided to ensure that you are as comfortable as possible. **IF YOU CONTINUE TO BE UNCOMFORTABLE, PLEASE LET STAFF KNOW AND ALTERNATIVE PAIN RELIEF CAN BE GIVEN.**

As soon as possible, you will be provided with your own boxes of medications to administer for pain management. This increases your independence.

WOUND CARE

In most instances the dressing will be removed after 24 hours depending on the doctor's instructions for your care. The wound will be left uncovered and you will be able to have a shower. The wound will be looked at each day by a midwife and usually the sutures used do not need to be removed, but have the ends snipped only. Occasionally some stitches are used that have to be removed around the sixth day. Surgical clips are occasionally used instead of stitches.

DIET

On return to the ward from theatre, you will be encouraged to suck ice and have small frequent sips of water. If you are not feeling nauseated (sick) post delivery, you may be able to eat a light meal. We will still be checking to see when you pass wind as this tells us your digestive system has begun to work again. Your appetite should return to normal within a few days. Usually within 24 hours your intravenous fluids will be removed.

BREASTFEEDING

Staff are here to encourage, assist and support with breastfeeding. They will carry out the baby cares until you are able to do them yourself. It is suggested you ask visitors to allow you and your baby to be alone at feeding times so you can get to know each other and establish breastfeeding.

Due to your surgery, you may find it more comfortable to lie on your side, or hold the baby in the football position for the first few days. The staff will be there to help and support you.



We promote skin to skin to establish bonding and this will commence in recovery. Expect to room in with your baby in the ward as this enhances bonding and breastfeeding.

VAGINAL BLEEDING - LOCHIA

You will lose blood vaginally as with any other birth and this may occur for up to six weeks. Initially it will be like a heavy period, and you may lose some clots the first time you get out of bed. The vaginal loss will gradually lessen, and change colour to pink then brown. We advise that you do not use tampons during this time. If you continue to lose clots or your vaginal loss gets heavier or has an offensive smell, inform your midwife or doctor.

EMOTIONS

With childbirth, your emotions may fluctuate from a euphoric (high) state to a low state often called the 'blues'. This is normal. Becoming overtired will increase the chance of developing the 'blues' and tearful spells. Remember that you have had major abdominal surgery and it takes time to recover, especially with broken sleep, learning many skills as a new parent and a change in lifestyle.

Some women may develop a sense of frustration, disappointment or guilt at not being able to have a vaginal delivery. If this happens to you, or if you find that you do not bounce back from the 'blues' and become depressed, you should seek help promptly from your Midwife or Doctor.