

What to expect the day of your surgery:

- You will be admitted to your room where you and your healthcare team will discuss a plan of care.
 - An intravenous catheter (IV) will be started.
 - Blood work will be drawn.
 - Your baby's heart rate will be monitored.
- You will meet the anesthesia team who will be present at your birth. They will:
 - Describe your surgery including risks and benefits.
 - Answer any questions you have.
 - Review a consent form with you and ask you to sign it.
- You will be taken to the operating room where you will be prepared for surgery.
 - You will receive spinal or general anesthesia to keep you pain-free during the surgery.
 - Most women have spinal anesthesia during a cesarean section. If there is a need for general anesthesia, your doctor will talk to you about this ahead of time.
 - A urinary catheter will be placed in your bladder at this time
 - A drape will be up between your chest and the doctors to keep germs from the surgery area.
- The nurse will then bring your support person into the operating room to be with you.
 - Your support person will need to wear a gown and mask to help prevent the spread of germs.
 - If you have general anesthesia or there is a medical emergency during the surgery, your support person will be guided back to your room so that we can best care for you and your baby.

How will I feel during my surgery?

- If you have spinal anesthesia, you will be awake during the surgery, but will be numb from the waist down.
- You should not feel pain during your c-section but you may feel pulling and pressure.
- You may feel sick to your stomach. We can give you medicine to help.

How can I be more involved in my baby's birth?

- If you'd like, the drape can be lowered so you can see your baby being born. Please ask us about this before your surgery begins.
- Ask for your chest and arm to be free and clear to hold your baby skin-to-skin after birth. (This may mean having any electrodes or monitors placed away from your chest, etc.)
- If you and your baby are doing well in the first minutes after the surgery you may be able to breastfeed with help.



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What should I expect right after my surgery?

- After the birth you will be brought back to your room to begin your recovery.
- You will stay in this room until your pain is manageable and you can bend your knees. This usually takes about 1–2 hours. You will be connected to cardiac monitors during this time.
- Your baby will stay with you unless there is a medical reason for your baby to go to the Newborn Observation and Procedure Area (NOPA), Transitional Care Nursery, or Neonatal Intensive Care Unit (NICU).

- Once the anesthesia doctor has determined you are stable, you will be brought to Mother Baby Care where you will begin getting to know and caring for your new baby. You will spend 2–3 nights here.

Skin-to-skin is important soon after your birth and throughout your stay

- Skin-to-skin will help your baby transition to the outside world in the comfort of your arms. It will keep your baby warm and help stabilize his blood sugar. This can also help you establish breastfeeding.
- We suggest that you limit visitors while you are in the hospital so that you and your baby can be comfortable together skin-to-skin, breastfeed, and rest as you recover from surgery.

What is the recovery process like?

- As with any surgery, there's usually some degree of pain and discomfort after a c-section.
- The recovery period is usually a little longer than a vaginal birth.
- You will be up and moving around within six hours, and otherwise encouraged to rest.
- You will spend 2–3 nights on the Mother Baby Care Unit (4th Floor).

As you recover it is normal to:

- Feel tired
- Have soreness around the incision (we can help with pain medication options)
- Be constipated and experience gas pain
- Have a hard time walking or using stairs

Call your doctor if you experience any of the following:

- Fever
- Signs of infection around your incision (swelling, redness, warmth, or pus)
- Pain around your incision or in your abdomen that comes on suddenly or gets worse

- Bad smelling vaginal discharge
- Pain with urination
- Heavy vaginal bleeding (soaking more than one pad an hour for 2 or more hours, or passing clots larger than the size of a golf ball)
- Pain, swelling, or redness in your legs
- Trouble breathing or chest pains
- Painful breasts
- Feelings of depression
- Thoughts of hurting yourself or your baby

During the first 6 weeks after delivery:

- Limit exercise to just walking. Avoid heavy exercise and anything that could be hard on your belly muscles.
- Do not lift anything heavier than your baby.
- Have someone else drive you if you need to be somewhere in the first two weeks.
- Ask your doctor when it is OK for you to have sex.

Returning to normal activities

You will have a 6 week visit with your doctor to check on how you are healing and more questions and concerns can be addressed there. By six weeks your uterus will likely be healed and with your doctor's approval, you can get back to your normal routine.

We are here to help make the birth of your baby a safe and comfortable experience. We look forward to seeing you soon!

Warm wishes,
Your Labor and Delivery Team