

Your Enhanced Recovery Journey at East Alabama Health

East Alabama**Health** 

WOMEN'S SERVICES

Table of Contents

General Overview.....	2
What is a C-section?	
Important Dates & Times	
Enhanced Recovery Program.....	3
Preparing for Your C-section.....	4
Medical Clearance	
General Medication Guidelines	
Activity	
Planning Ahead	
Arranging Transportation	
Preparing Your Body for Surgery.....	6
The Day Before Your C-section	
The Morning of Your C-section	
Things to Bring to the Hospital.....	8
At the Hospital.....	8
Arriving at the Hospital	
Labor & Delivery Unit	
Operating Room	
Waiting Room	
Recovery Room	
After Delivery.....	10
Pain Control	
Exercises	
Post-Operative Instructions	
Home Care Instructions.....	14
Incision Care	
Pain	
Diet	
Bowel Habits	
Activities	
Prescriptions & Refills	



General Overview

This booklet will:

- Help you prepare for your C-section
- Explain how you will play an active part in your recovery
- Give you daily goals to achieve

Research shows that you will recover faster if you follow the things explained in this booklet. There are instructions for you about eating and drinking, guidelines for physical activity, and updated methods for controlling your pain. All of these things combined will help you to feel better faster and go home sooner.

Please bring this booklet with you on the day of your scheduled C-section. Use it as a guide during your hospital stay. Hospital staff may refer to it as you recover and will review it with you when you go home.

Having surgery, in addition to having a baby, can be very stressful for you and your family. The good news is that you are not alone. We will support you each step of the way.

What is a C-section?

Cesarean delivery, also known as a C-Section, is a surgical procedure used to deliver a baby through a surgical cut in the mother's abdomen and uterus.

Important Dates & Times

Date of C-section Delivery: _____

Scheduled Time of C-Section Delivery: _____

Time to Arrive at the Hospital: _____

Date of Follow-up Appointment: _____

Time of Follow-up Appointment: _____

What is Enhanced Recovery Program (ERP)?

Enhanced recovery is an advanced surgical approach that concentrates on every aspect of your upcoming surgery to improve your recovery afterward. This approach involves your entire care team, including your surgeon, anesthesiologist, nurses, pharmacists, nutritionists and other medical professionals.

The goals of ERP include:

- Maximizing your overall surgical experience
- Preparing you for surgery
- Setting realistic expectations for your surgery and recovery
- Avoiding dehydration and maintaining optimal nourishment
- Decreasing your risk for infection following surgery
- Reducing your risk of problems related to any underlying medical issues
- Minimizing pain and helping you manage it
- Developing a plan for the time after surgery when your activity may be limited

This booklet has been developed to help you prepare for your entire surgical experience and promote optimal postoperative recovery. The following topics will be discussed:

- Preparing for your surgery and recovery
- The day of surgery and your postoperative hospital stay
- Hospital discharge and returning home
- Follow-up care plan

It is important to remember that your surgery and circumstances are unique and may be slightly different than described. ERP pathways are personalized to maximize your recovery.

Please read through this booklet as soon as you are able. It is important that you discuss any questions or concerns with your care team.



Preparing for Your C-section

Medical Clearance

- You will see your obstetrician several times in the months prior to your C-section. Depending on your health history, you may also need to see other specialists prior to your C-section.
- If you have diabetes or gestational diabetes, your provider may want you to see your primary care physician and/or endocrinologist. You will need to confirm with your physician how to handle your diabetic medications. Bring this booklet to the visit.

Medications - General Guidelines

Discuss all medications and supplements with your obstetrician. Here are some general guidelines to follow:

- Prenatal vitamins and iron: DO NOT take them on the day of your surgery. They will likely be re-started by your obstetrician after your delivery.
- Aspirin and Lovenox: discuss with your obstetrician when you should stop taking these medications before your C-section.
- Acetaminophen (Tylenol): can be taken as late as the night before surgery.
- Medications for your thyroid, seizures, depression, blood pressure, or those taken for other health issues: discuss with your obstetrician and/or the physician who prescribed the medication to determine how they should be taken in the days before your C-section.
- Herbal supplements, green tea, and over-the-counter supplements: stop these 10 days before your C-section.

My Medications:

How to Take My Medication:

Activity

Follow the guidelines from your obstetrician. It is generally not required to restrict your activity in the months leading up to your C-section. Regular activity or exercise keeps your body fit and will help you recover more rapidly afterward.

Plan Ahead

You may need help with your new infant, other children, meals, laundry, bathing, or cleaning when you first go home from the hospital. Stock your fridge and freezer with food that is easy to reheat. Make plans with your family and friends so you will have the help you need. If you have children you wish to bring to the hospital with you, you must have a responsible adult, other than you, to care for them at all times. Children are not allowed to stay overnight. Our hospital will have visitor restrictions during flu season (October-May).

Arrange Transportation

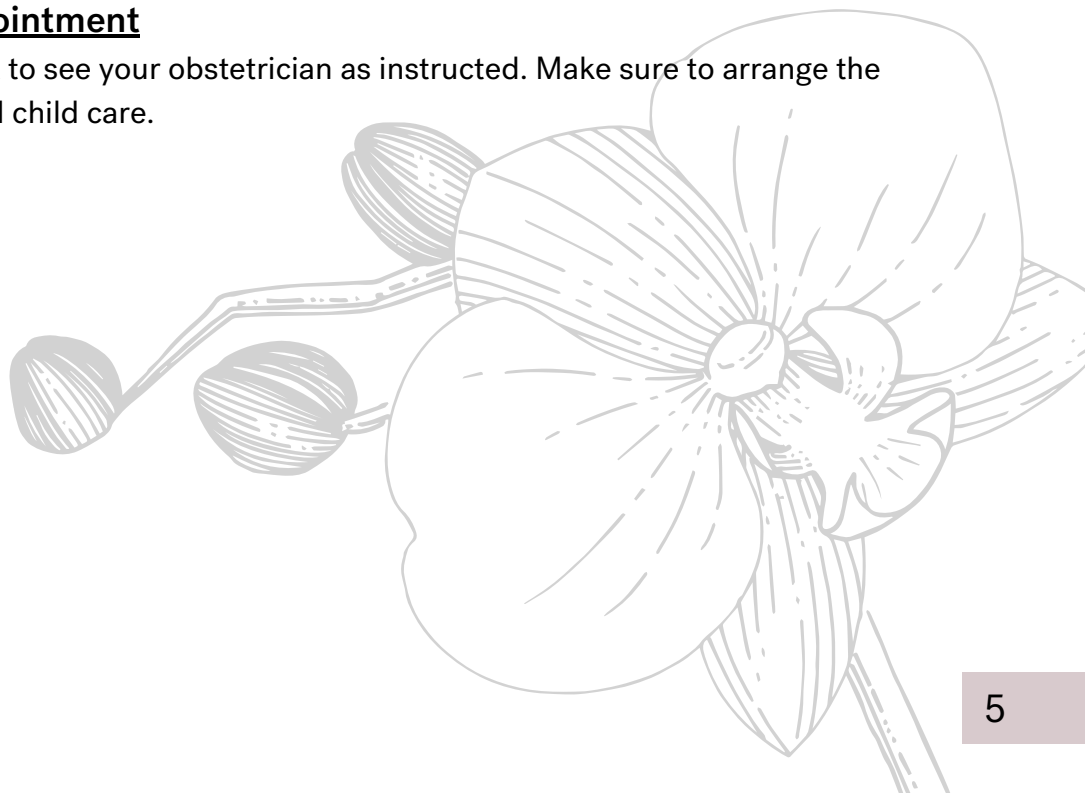
The day of your C-section is designated as Post-Operative Day 0. The plan is for you to go home when you meet the discharge criteria, which will most likely be on Post-Operative Day 2. Please make arrangements for a ride. You will not be able to drive yourself.

Expect Our Call

The day before you are scheduled to come to East Alabama Health, a team member/unit secretary from Labor and Delivery will call you to review your pre-procedure instructions. The team member will confirm the date and time you are to arrive as well as your instructions about eating and drinking. Please have this packet ready and fill in the date and times on Page 2. You will have an opportunity to ask any remaining questions you may have.

Arrange Follow-Up Appointment

Please make an appointment to see your obstetrician as instructed. Make sure to arrange the necessary transportation and child care.



Preparing Your Body for Surgery

The Day Before Your C-section

Diet

You may eat your normal diet the day before your C-section.

- You may continue to eat solid foods up until eight hours prior to your scheduled C-section time.

You should drink one (10-12 oz.) clear carbohydrate drink in the evening prior to bed unless you have diabetes.

- The following are allowed clear carbohydrate drinks:
 - Apple juice
 - Cranberry juice
 - Gatorade
 - Water
- If you have diabetes or gestational diabetes, the following are allowed clear carbohydrate drinks:
 - Water
 - Tea without milk
 - Coffee without milk

Please select one of the following:

☐ I am NOT diabetic.

My drink preference is _____

☐ I have diabetes or gestational diabetes.

My drink preference is _____

Hygiene

Shower or bathe normally using approved soap or soap provided by your doctor to wash your abdominal area. You should not shave or wax the area below your belly button for at least 48 hours prior to your C-section.

Medications

Take your regular nighttime medications as discussed with your obstetrician and/or specialists.

Preparing Your Body for Surgery

The Morning of Your C-section

Diet

You may eat solid food up until eight hours before the time your C-section is scheduled to start.



Your C-section will be delayed or cancelled if you eat any solid food or drink liquids within the eight hours right before your scheduled C-section start time.

Hygiene

If you bathe or shower in the morning, remember to use approved soap or soap provided by your doctor. Do not shave or wax the area below your belly button. Do not use lotion on or near your abdominal or hip area.

Other Preparations

Contact lenses and eye makeup should not be worn. Remove all jewelry, including body piercings. Do not use nail polish on fingernails. Toenail polish is permitted.



Things to bring to the hospital

- This booklet
- Photo ID (driver's license or state ID) and insurance card
- Two packages of sugar-free gum, which can help speed up your bowel recovery (for after surgery)
- Loose, comfortable clothes (t-shirts, sweatpants, pajamas, etc.) and slip-on shoes to wear home
- Toothbrush, toothpaste, soap/shampoo, deodorant, and other toiletries
- Books, tablets/iPads, computer, cell phone, and chargers
- Favorite pillow and/or blanket, if desired
- Copy of your advance directive, if you have one
- If you wear contact lenses, please arrive to the hospital wearing your glasses and pack your contacts in your bag.

Please do not bring anything of value, including credit cards and jewelry. The hospital is not responsible for lost or stolen items.



At the Hospital

Arriving at the Hospital

After completing the check-in process, you will be escorted to your private room in Labor and Delivery or the OB Observation Unit where you will meet the nursing staff. They will complete your preparations for your C-section. Family members are free to use our Family Waiting Room.

Labor & Delivery Unit

The nurse will ask you to change into a hospital gown and complete a pre-operative checklist with you. An intravenous catheter (IV), a tube that is placed in your vein, will be inserted. You will also see and speak to your obstetrician.

You will receive several medications from your nurse that have been prescribed by your physician team. These medications will help prevent pain, nausea and vomiting, and decrease the risk of infection after your C-section.

Your family will be able to stay with you at this time.

Operating Room

You will likely receive a regional anesthetic, either an epidural or a spinal. A regional anesthetic is an injection in your lower back (your back will be numbed) that allows you to remain awake during your C-section without feeling any pain in your lower body. It is usually safer for you and your baby. It allows you and your birth partner to experience the birth of your baby together. After your regional anesthetic is in place and you are numb, a tube will be placed in your bladder to keep your bladder drained during the procedure and for a short time afterwards. Occasionally a general anesthetic may be more appropriate for your C-section. Your anesthesia provider will discuss this with you ahead of time. You will be awake and able to communicate with the anesthesia team during the entire C-section unless you require a general anesthetic.

You may notice some chest heaviness or pressure at various times after the regional anesthetic is placed, and you may feel some pressure, especially as the baby is being born. You may also feel some movement during the procedure. You will not experience pain.

You may experience some nausea. Please inform the anesthesia provider if you feel nauseated and they will work to make you feel better.

Waiting Room

You may have one support person with you in the operating room during the C-section, if you have a regional anesthetic. If you have general anesthesia, no visitors will be allowed in the operating room. Other family members or friends can wait in the Family Waiting Room just outside of Labor and Delivery.

ATMs are located near the cafeteria. The Terrace Cafe and The Gift Shop are available for the purchase of food/beverages, and vending machines are located on the first floor in the cafeteria.

Recovery Room

You and your baby will be moved to the Recovery Room in Labor & Delivery after your delivery. You will have the opportunity to bond and breastfeed your baby. You can expect a 1 hour stay.

Your support person will follow you to the Recovery Room. No one under the age of 12 is allowed. A nurse will check your vital signs often, check your abdomen, and make sure you are comfortable.

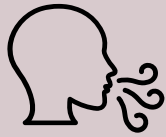
The tube draining your bladder will be removed as soon as you regain the ability to move (approx. six hours after surgery). A regular diet will be permitted as early as two hours after surgery.

After recovery, you will be transferred to the Mother/Baby Unit. Your family will be able to visit per current visitation policies.

After Delivery

Pain Control

It is important to control your pain because it will help you:



Take deep breaths



Move more easily



Eat better



Sleep well



Recover faster



Do things that are important to you

Your nurse may ask you to describe your pain using a number between 0 and 10. 0 means no pain and 10 is the worst pain you can imagine. The goal is to keep your pain at or below a score of 4 out of 10.

Exercises

You should move around while in bed. Movement helps to prevent complications including lung problems, pneumonia, blood clots, and muscle weakness. Start this when you get to your room and continue during your hospital stay.

You will be up out of bed with assistance and walking in the hallway 4 to 5 times daily. There is always a risk of getting blood clots after surgery. The risk is decreased with walking and exercise.

Leg exercises are important to your recovery. Repeat the following exercises 4 to 5 times every half hour while you are awake:

- Rotate your foot to the left and right
- Wiggle your toes and bend your feet up and down
- Stretch your legs out straight

Your meals should be eaten while sitting in a chair and not in bed.

Post-Operative Day 0

Pain Control

Please inform your nurse if you have pain. We want to help keep your pain as well controlled as possible. We plan to give you additional medication as part of the regional anesthetic for surgery. This is a long-acting pain medication that will help control your pain for the first 24 hours. You will also be receiving regularly scheduled pain medications, such as acetaminophen and ibuprofen, to keep your pain under control.

Activities

Do your leg exercises 4 to 5 times every half hour while awake. You also will be ready and encouraged to walk in the halls the day of your surgery.

Eating & Drinking

You may drink liquids 30 minutes after surgery, and start eating regular food two hours after surgery. Chew sugarless gum for 30 minutes, 3 times a day if you are not able to drink or eat. This has been demonstrated to help your bowels return to normal more quickly after surgery. Should you feel nauseous, tell us. We use a number of methods (both medication and non-medication) to prevent post C-section nausea and vomiting.

Tubes & Lines

An intravenous line (IV) will be giving you a small amount of fluid, if needed. You will also have a tube in your bladder to drain and measure your urine. Most patients have their IV removed when they are able to get up out of bed and are able to drink fluids, but there are some patients who need to keep IV access longer.

Vital Signs

Your temperature, breathing, blood pressure, and heart rate will be checked regularly.



Post-Operative Day 1

Pain Control

You will continue to receive the scheduled oral pain medications around the clock while in the hospital. These may be continued as scheduled medications after discharge for up to a total of seven days.

Activities

Your goal is to be out of bed, on and off, for a total of eight hours throughout the day.

- Walk in the hallway 4 to 5 times per day (with help if needed).
- Sit in a chair during all meals.
- Feed your baby while sitting in the chair.

An abdominal binder may be ordered by your obstetrician as you increase your activity.

You may take a shower the day after delivery. Let the water run softly over your incision(s) and wash the area gently. Do not scrub your incision.

Eating & Drinking

Drink plenty of liquids.

You will be eating solid foods. The best choices are fruit, vegetables, milk, calories to support breastfeeding, and fiber to prevent constipation. You need an additional 500 calories a day for this.

You will be asked to continue chewing gum for 30 minutes, 3 times per day if you are not eating and drinking normally.

Tubes & Lines

Your IV and the tube in your bladder will be removed if they are still in place.



Post-Operative Day 2

Pain Control

You will continue receiving scheduled medications to prevent pain including acetaminophen (Tylenol) and ibuprofen (Motrin).

Activities

Be out of bed, on and off, for a total of eight hours as tolerated.

- Sit in a chair during all meals.
- Walk in the hallway 5 times today, with help if needed.
- Feed your baby while sitting in the chair.
- Visit with your guests while sitting in the chair or walking in the hall.

Eating & Drinking

Drink liquids, and eat solids as tolerated. Chew gum for 30 minutes, 3 times per day if you are not eating and drinking normally.

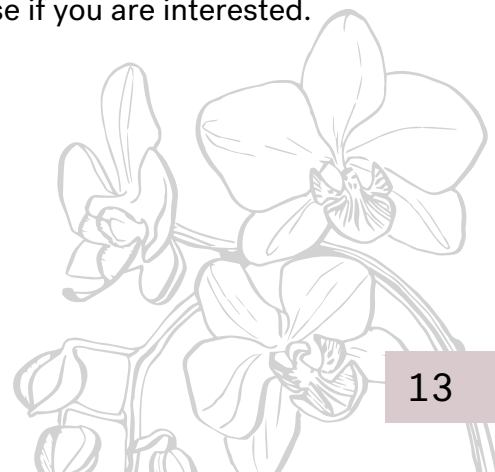
Goals for Discharge

Our shared goal is to have you feeling prepared to go home by noon on Post-Operative Day 2. The following will be used to help us determine if you are ready to go home:

- You are able to eat a diet without feeling nauseous or experiencing any vomiting.
- Your pain is controlled.
- You are getting out of bed and walking without help.
- You have a normal body temperature (no fever).
- You are able to care for your baby.
- You have had all of your discharge questions answered and know what to do at home and when to follow up with your provider(s).

Please confirm your previously scheduled follow up appointment with your obstetrician. You will need to be seen about one to three weeks after discharge from the hospital.

Any prescriptions needed at discharge can be sent to the East Alabama Apothecary and will be delivered to your bedside before discharge. Please talk with your nurse if you are interested.



Home Care Instructions

Incision Care

Your incision(s) may be slightly red and uncomfortable for 1-2 weeks.

You may take a shower. Let the water run softly over your incision(s) and wash the area gently. Do not scrub. Do not take a tub bath, use a swimming pool, or a hot tub for two weeks. If your incision has surgical glue, you do not need to remove or peel it off. It will come off on its own within 1-2 weeks.

It is normal to have a small amount of yellow or pink discharge coming from the C-section incision. Call your obstetrician if your incision becomes warm, red, hard, or you see pus or other drainage coming from it.

Pain

You may have some pain that continues for a few weeks after your C-section. Take acetaminophen (Tylenol) and ibuprofen (Motrin) medications to relieve your pain. If your pain is not controlled by acetaminophen (Tylenol) and the ibuprofen (Motrin), please call your obstetrician's office.

Ibuprofen should always be taken with food. If the ibuprofen (Motrin) or other pain medications are causing a burning sensation or pain in your stomach, stop taking them and call your obstetrician.

If you have severe pain that is not relieved with the medicine that has been recommended for you, call your obstetrician. Your obstetrician or nurse may ask you to keep a record of your pain and the medications you take at home. You can do this in the "Notes" section at the end of this booklet.

Diet

No special diet is necessary unless ordered by your healthcare team. Resume a healthy, balanced diet.

Do not take ANY unprescribed medications. This includes "natural" remedies and oils.



Bowel Habits

Your bowel patterns may change after your C-section. You may have loose stools, become constipated, or have more frequent bowel movements. This should settle into a normal pattern over time.

To help your bowels stay regular:

- Drink 8-10 glasses of water daily
- Ask your obstetrician about what exercise you should do and when to start
- Take stool softeners if your doctor tells you to do so

Warning signs to call your surgeon:

- Stop passing gas for more than 12 hours
- Significant diarrhea
- Worsening nausea or vomiting

Activities

Do not lift, push, or pull anything greater than or equal to 20 lbs. for 2 to 3 weeks after your surgery. For comparison purposes – a gallon of milk weighs about 9 lbs.

You may gradually work your way back to your normal activities over the six weeks after your C-section.

Do not drive for two weeks after your C-section, but you may be a passenger in a car. Use your seatbelt as you normally would. You also should not drive if you are taking any narcotic pain medications. Examples of these medications include Norco, Morphine, Percocet, and Dilaudid. Do NOT use alcohol when on narcotic pain medications.

Prescriptions and Refills

If you need refills for prescription medications, please call the doctor who originally prescribed the medication.

If you need to call your obstetrician for refills, please do so during regular business hours. Do not wait until you are out of medication to call.



Notes

Please use this page for any notes or questions you may have during your journey with East Alabama Health.

[illegible]



East Alabama**Health** 

WOMEN'S SERVICES

eastalabamahealth.org