A Guide to **Cesarean Delivery**



This guide will help you understand, prepare for and recover from your cesarean delivery. Take this guide with you on the day of your cesarean delivery and use it throughout your recovery.





by Healthcare Excellence Canada and partners

IMPORTANT

Information provided in this guide is intended for educational purposes. It isn't intended to replace the advice or instruction of a healthcare professional or to replace medical care. Contact a member of your healthcare team if you have any questions related to your care.

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Notes to readers

When you see a blank line, it is a space we left for you to fill with your information about your cesarean delivery. We are committed to gender neutrality. This is why, in this guide, we refer to both breast and chest feeding.



This material is also available through the Enhanced Recovery Canada website: www.enhancedrecoverycanada.ca



www.healthcareexcellence.ca

This guide is also available in French.

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Summary

You are reading this document because your healthcare team recommends that you have a cesarean delivery.

In this section, we summarize the information contained in this guide. We will give you a short explanation of what to expect and what you can do to participate in your own health and care. You will find more detailed information further in this guide.

Your healthcare team will discuss the information provided in this guide. It is a good idea to bring it with you when you come to the hospital.

What is a cesarean delivery?

A cesarean delivery is a surgery. Your baby is delivered through a cut in your abdomen, usually called an incision. A cesarean delivery is commonly called a C-section.

You may be having a planned cesarean delivery because:

- you have had a cesarean delivery in the past and it is recommended for you to have one again
- you have had uterine surgery, such as removal of uterine fibroids
- your baby is breech, which means that your baby is positioned bottom down instead of head down
- you have placenta previa, which means that your placenta is covering your cervix

If you, your partner, or your support person have any questions about why you are having a cesarean delivery, please speak with your healthcare team.

This guide explains what you can do to heal better and safely.

You can help at 3 important moments:

- before your cesarean delivery
- at the hospital
- at home

Before your cesarean delivery

There are different ways you can prepare for your cesarean delivery. Here is a summary of information you need to know.

Taking good care of you and your baby before your cesarean delivery

The months leading up to your cesarean delivery allow a unique opportunity for you and your healthcare professional to identify and look after any health issues that may negatively impact you or your baby.

While you may not have a specific healthcare concern, it's important to maintain or adopt a healthy lifestyle during pregnancy. Eating a healthy diet, exercising, reducing stress and sleeping well are part of a healthy lifestyle.

During your pregnancy, your healthcare professional may have treated you for common health problems, like:

- high blood pressure during pregnancy, also called gestational hypertension
- diabetes that develops during pregnancy, also called gestational diabetes
- anemia, a blood disorder that can cause severe fatigue
- anxiety
- depression
- more than typical weight gain during pregnancy



Taking good care of these health issues will better prepare your body for the cesarean delivery.

Stopping all alcohol drinking, and smoking during pregnancy and leading up to the cesarean delivery will improve your baby's health and well-being. If you're having difficulty quitting drinking or smoking, talk to your healthcare professional about reducing the number of cigarettes and drinks consumed to improve your own health and the health of your baby.

In the hours before your cesarean delivery

We will give you instructions about how to properly wash your body in preparation for the cesarean delivery. We will also tell you what food and beverages you can have in the hours before your surgery begins.



At the Hospital:

Here is what will happen once you are at the hospital.

In most cases, your partner or a support person can accompany you through the cesarean delivery. You will both meet the healthcare team.

The healthcare team will include:

- your obstetrician, the specialist in care during pregnancy and childbirth
- nurses
- the anesthesiologist, the specialist who will administer the anesthetics that will make you feel numb during the delivery
- the pediatric team

We will apply a pink cleansing solution to your skin before your cesarean delivery begins. If you're in labour, a cleansing solution will also be applied to your vagina to reduce the risk of infection.

We will also give you antibiotics before your surgery begins to reduce the risk of infection.

A cesarean delivery is usually performed under spinal or epidural anesthesia. These types of anesthesia will allow you to stay awake during the delivery and ensure that you feel no pain. Even if you only feel numb, you won't feel any pain during the surgery. You may, however, feel some pressure, especially when your baby is born.

This loss of sensation from your waist down may last for a few hours after the delivery. We will place a urinary catheter to collect urine from your bladder as it might be difficult for you to urinate while you

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still feel numb. These tubes and lines will be removed depending on your symptoms and as directed by your healthcare team.

After the delivery, tell your nurse if you're having any pain that prevents you from moving. This will help the team know how to control your pain. Be aware of any medications you are taking and ask if there are any side effects you should watch out for.

We will recommend that you start moving around as soon as you can after the surgery with the help of a healthcare professional. It is important to move around after the surgery to prevent complications and to speed up your recovery.

For each day you stay at the hospital, we recommend you set these goals to help your recovery:

- □ Make sure pain is under control
- □ Spend time skin-to-skin with your baby
- □ Sleep and rest as needed
- Eat and drink well
- □ Move around as much as you can
- □ Make sure you can pass gas or have a bowel movement

At Home:

Once you get home, there are many things you can do to quickly recover from your cesarean delivery.

Take your pain medication

Take your pain medication so that you can be more active and heal faster. Make sure you know when to take it and what the side effects can be.

A note of caution: it is important to control your pain safely but not to take pain medication if you don't need it.

Some pain medication may cause constipation. Exercising and eating high-fibre foods will help with bowel movements. If you don't feel well enough to eat, chewing gum may help your bowel stay regular.

Eat well

Eat a balanced diet. Eating a balanced diet means including a variety of foods from different food groups and eating 3 meals and some snacks every day. It will help you recover. Drink plenty of fluids to stay hydrated. Fluids help reduce constipation.

There is another advantage to eating well and staying hydrated: it will boost your milk production, also called lactation.

Exercise

Remember, exercising is very important for your recovery, even at home. Exercise regularly: a 10-minute walk is a good start. Increase the distance until you reach your usual activity level.



For the first 6 weeks, don't lift anything heavier than your baby. Also, avoid strenuous physical exercise such as crunches or sit-ups.

Take care of your surgical incision

Follow the care instructions we gave you for your incision so that it heals quickly and there is no infection.

Make sure you know what warning signs to look for. Also, know when you need to call your obstetrician. Have the phone number readily available.



Your healthcare team is here to help. Ask us if you have any questions!

Introduction What is a care pathway?

When you come to the hospital for your cesarean delivery, you will follow a care pathway. This will help you recover quickly and safely. Research shows that you will feel better faster if you do what is explained in this guide.

With this guide, we want to:

- help you understand and prepare for your cesarean
- delivery
- explain what you can do to feel better sooner
- show you what to expect at the hospital on a day-to-day basis
- explain what to do at home to help you recover

Take this guide with you when you come for your cesarean delivery. Your healthcare team can also review it with you if you have any questions.

Your healthcare team

What is a cesarean delivery?

A cesarean delivery, also called a C-section, is a surgical procedure used to deliver a baby.

The obstetrician, the specialist who performs cesarean deliveries, will make a low side-to-side cut on your abdomen to reach your uterus to deliver the baby. The cut, usually called an incision, is typically made above the uppermost part of your pubic hair.

Once your baby is born, you will notice that he or she will be held over you for a short time to keep the blood flowing between the placenta and your baby. This practice is called delayed cord clamping. This means that the umbilical cord isn't clamped immediately after delivery and is cut a little later.

This is important, because it allows your baby to continue receiving blood from your placenta and to store iron.

Before your baby is handed to you or your partner, a healthcare professional, such as a nurse or someone from the pediatric team, will be there to make sure your baby is healthy.

Risks associated with a cesarean delivery

Cesarean deliveries are the most common surgeries done across the world. Though your healthcare team is very well trained, all surgeries carry some risks. It is important that you be aware of the complications that may arise before or after a cesarean delivery.

These risks include:

- excessive bleeding
- uterus or bladder infection
- bladder or bowel injury
- blood clots in your legs

The baby can sometimes be injured during a cesarean delivery, but this rarely happens.

Contact information

If you have any questions, don't hesitate to phone us.

Name of your obstetrician:
Your obstetrician's phone number:

Contact Information:



Other phone numbers:

Before your cesarean delivery Preparing for your cesarean delivery



Be active

Try to exercise every day. Being physically active before your cesarean delivery can make a big difference in your recovery.

If you're already exercising, keep up the good work. If not, slowly begin adding exercise into your daily routine. Exercise doesn't need to be hard to make a difference. A 10-minute walk every day is a good start.

Eat well

What you eat is important for your health. Eating well will help your body prepare for your delivery and recover from surgery.

Eat a well-balanced diet by following Canada's Food Guide that includes key nutrients to help you be healthy. Eating a balanced diet means including a variety of foods from different food groups and eating 3 meals and some snacks every day.



If you smoke, quitting will significantly improve your health and that of your baby. Smoking during your pregnancy involves big risks to both you and your baby.

Quitting smoking isn't easy, so talk to your doctor. You can quit even if you have smoked for many years. Your healthcare team can help you.



It is never too late to quit!



Avoid alcohol during your pregnancy

There is no safe time to drink alcohol during pregnancy. All types of alcohol are equally harmful, including beer and wine. Stopping all alcohol drinking during pregnancy will improve your baby's health and well-being.

Important: don't drink alcohol in the 24 hours before your cesarean delivery. Alcohol can change the way some medications work.

Plan ahead

You will need help after your cesarean delivery. Ask your family and friends to help with meals, laundry, bathing, housework, childcare, and transportation. Make sure you have easy-to-prepare food in the refrigerator or freezer.

If you don't have enough help at home after your delivery, talk with your community health clinic. They may provide services such as housekeeping or meal delivery.

If you are still worried about going home after your cesarean delivery, speak with your doctor or another member of your healthcare team.



Arrange transportation

You may go home as early as the day after your cesarean delivery. Check with your healthcare team to find out when you might be discharged.



Remember to arrange for a ride home.

Tell your nurse if you are worried about going home.

When to go to the hospital

You will be told what time to arrive at the hospital. You may find out as late as the day before your cesarean delivery. Usually, you must arrive 2 hours before the expected surgery time. The time of the surgery isn't exact, it may be earlier or later than scheduled.

However, there are a few exceptions you should be aware of, for example:

If your cesarean delivery is scheduled on a Monday, the hospital may call you the Friday before.

If your cesarean delivery is scheduled at 7:30 a.m., you should be at the hospital at 6 a.m.

You can write down the information regarding your cesarean delivery here:

Date of cesarean delivery:	
Hospital arrival time:	
Where to arrive:	
Where to park:	

Washing instructions before your cesarean delivery

Before hospital admission, you should take a bath or shower with a special soap. It is used to kill the germs that cause infections. Your healthcare team will tell you how to get the special cleansing soap and how to apply it.

You can bathe or shower either the night before or the morning of your cesarean delivery.

Please don't shave before your delivery because this may result in cuts to the skin and increase the risk of infection.

The night before surgery



soap and shampoo for your face and hair.

with either:

□ Special soap / special sponge given.

OR

belly button and your genital area.

 \Box an antiseptic soap

body from the neck down, including your

the area where the surgery will be done.

clothes to bed.

The morning of surgery





Do not wear lotion, perfume, makeup or nail polish.

□ Special soap / Do not wear special sponge jewelry or piercings. given

OR

□ an antiseptic soap.



Do not shave the area where the surgery will be done.



If you wear contact lenses, wear your glasses instead.



Put on clean and comfortable clothes.

What you should eat or drink

Here is some information about what to eat and drink on the day of your cesarean delivery.

You may have a light meal up to 6 hours before your cesarean delivery, such as a non-fatty food like toast.

We recommend that you drink clear fluids, that is, liquids you can see through, up to 2 hours before your cesarean delivery.

We may ask you to drink either a 500 ml bottle of clear apple or cranberry juice or a clear sports drink that contains 50 grams of carbohydrate up to 2 hours before your cesarean delivery. This drink will help you stay hydrated and provide you with the extra calories needed to recover more quickly after your delivery.



What you should bring to the hospital

Here is a list of items you should bring to the hospital:

- This guide.
- Your private health insurance information and your hospital card. In some provinces, you may also need your provincial health card.
- The list of medications you take at home. Don't forget to include doses of prescribed and over-the-counter medications.
- Your personal items: toiletries, comfortable clothing, large pads, phone and other devices, chargers, glasses and chewing gum.
- Personal items for your baby: diapers, baby wipes, clothing, and car seat.



Important to know:

Don't bring any valuable items, including credit cards and jewelry. The hospital isn't responsible for lost or stolen items.



The day of your cesarean delivery At the hospital

When you arrive at the hospital, go to the admissions area.

Admissions area

Once at the admissions area, you will sign an admission form. The admitting clerk may ask what kind of room you prefer to stay in after your delivery. You usually have the choice of a private or a semi-private room, if available.

Obstetrics unit At the Obstetrics unit, your nurse will:

- make sure your belongings are in a safe place
- fill out a pre-operative checklist with you
- ask you to sign a consent form for care in case you need a blood transfusion during the delivery – don't worry, this rarely happens!

Preoperative waiting area

Before going into the operating room, we will bring you to the preoperative waiting area.

Once there, the nurse may:

- ask you to change into a hospital gown
- ask your partner or your support person to change into protective clothing
- take your temperature and blood pressure
- take a blood sample
- insert an intravenous line, often called an "IV"

The nurse will also:

- ٠ listen to your baby's heartbeat
- check your baby's position with an ultrasound if your baby isn't in a headdown position



🚺 It is normal to be nervous before a cesarean delivery. If you are very anxious, please tell your nurse.

Operating room Your care

We will take you to the operating room to meet your healthcare team. They will do everything possible to make sure you are comfortable during the delivery.

The anesthesiologist will insert a small needle in your back, called a spinal, that will remove the feeling of pain from your chest down to your toes. The skin will first be frozen so that you shouldn't feel more than a small pinch when the needle is inserted. You will remain awake during the surgery.

Once the spinal is in, we will ask you to lie down with your arms placed outwards at your sides. Then, we will place a urinary catheter, which is a type of tube, to help drain urine from your bladder. It will be removed as soon as possible after your surgery.

Your skin will be cleaned with a cleansing solution and a drape will cover the area of the operation. The anesthesiologist will be with you throughout the delivery.

Your baby's care

After the delivery, your baby will be held for a short time to allow delayed cord clamping. This means that the umbilical cord won't be clamped and cut immediately after the delivery.

This is important, because it allows your baby to continue to receive blood from your placenta during this time and to store iron.

We will then take your baby to a warmer, which is a type of bed with a heat source. The warmer helps to keep your newborn's body temperature constant. We will also perform a health assessment.

After the health assessment, you, your partner, or support person will be able to cuddle your baby skin-to-skin. Skin-to-skin contact with your baby helps regulate temperature, heart rate and breathing, and support breast or chest feeding.

Your healthcare team will encourage you and your partner or support person to continue skin-to-skin contact with your baby as much as possible throughout your hospital stay.

Waiting room

Your family and friends can wait for you in the waiting room. Since space is limited, please limit the number of people accompanying you.





After your cesarean delivery Post-anesthesia care unit (PACU)

After your delivery, we will take you to the post-anesthesia care unit (PACU). This is also called the recovery room.

Once there, we will put inflatable compression boots on your legs to help prevent blood clots.

Also, while you are there, your nurse will:

- check your pulse, blood pressure and temperature often
- ask if you are having pain
- ask how well you are tolerating beverages or food
- check how well you can move around
- ask if you need help with baby care and breastfeeding or chest feeding.

When you are ready, you will be moved to your room on the maternity floor. Your family can visit you there.



Make sure your call bell is always easy to reach when you are in bed or sitting in a chair. Don't hesitate to use it if you need help.

Pain control

Pain relief is important because it helps you:

- breathe better
- move better
- sleep better
- eat better
- recover faster

Your nurse will ask you to rate your pain on a scale from 0 to 10.

0 means no pain and 10 is the worst pain you can imagine. Your nurse will give you medication if your pain level is above 4.



Our goal is to keep your pain level below 4 on a pain scale of 10.

Don't wait until the pain gets too strong before telling us.

Ways to control your pain

Another word for pain control is analgesia. Medication in the spinal that was placed during your cesarean delivery will provide long-lasting pain relief.

To control pain after a cesarean delivery, most patients are comfortable with oral medication, in other words, pills.



Oral medication

We will give you pills to control pain after your cesarean delivery. We usually give acetaminophen, such as Tylenol[®] and ibuprofen, such as Advil[®]. Ibuprofen is an anti-inflammatory medication that prevents swelling.

These medications are your "base" for pain control, and you should take them regularly.

Some patients may need stronger medication. If the base isn't enough to control the pain, we will give you a stronger medication such as an opioid.



Opioid medications are safe if they are used in a careful and planned way. If you have to take these medications, we will always monitor you closely to minimize side effects and make sure you are safe.

All of the pain relief options we offer are safe to use while breastfeeding or chest feeding.

If you were taking pain medication before your cesarean delivery, your body may have developed a tolerance to the medication compared to someone who doesn't typically take pain medication. This means that you may need more medication to control your pain. If this is the case, your anesthesiologist may consult a pain management team.

Together, they will find the best way to help you control your pain using a safe combination of treatments and medication.

Maternity floor

Once you leave the recovery room, you will go to the maternity floor. This is where other moms and their babies receive care until they go home.

A small number of babies need special medical attention after delivery. They may go to the Neonatal Intensive Care Unit, where they will get all the care that they need.

Goals for Day 0: the day of your cesarean delivery

To help you recover, we suggest setting goals for the days you're in the hospital.

Here are some goals you can set for yourself for the day of the cesarean delivery:

- sleep and rest, as you are able, to prevent fatigue
- drink liquids to stay hydrated, reduce constipation and boost milk production
- chew gum to help your bowels stay regular
- return to your normal food intake when you are ready
- move around see more details below under Exercise

Skin-to-skin with your baby

While awake and alert, hold your baby skin-to-skin. Your partner or support person can take over and practice skin-to-skin contact when you need to rest.

Tubes and lines

Your urinary catheter is likely to be removed on the day of the delivery. Your IV will also be removed when you are able to drink and keep fluids down without nausea or vomiting.

Breast or chest feeding

Your healthcare team will support and respect your decision about whether to breast or chest feed. If you choose not to breast or chest feed, please let your doctor know. Your doctor can give you medication to stop milk production.

Bleeding

It is normal to have moderate vaginal bleeding with small clots for the first few days after delivering your baby. While you are still in the hospital, we will check your bleeding regularly.

Exercise

It is important to move around when you have regained feeling in your legs. A member of your healthcare team will assess you to ensure you are safe to get out of bed and walk around.

Exercise is important for many reasons because it:

- improves your breathing
- helps your bowels stay regular
- contributes to your overall wellness



If you feel dizzy or feel pain while standing or walking, sit down and take a break. Do something easier, such as bending and moving your legs while sitting or lying down.

Pain control

Tell your nurse if your pain reaches 4 or more on a pain scale of 10.



You can expect to have some pain after your cesarian delivery, but this pain shouldn't stop you from moving around. If it does, talk to your nurse.

Goals for Days 1 and 2: the days after your cesarean delivery

The length of stay for a cesarean delivery is about 24 to 48 hours. It is very likely that you and your baby will be allowed to go home then.

The day of your cesarean delivery is called Day 0. Here are the goals to set for Day 1 and for Day 2, the days following the cesarean delivery:

- sleep and rest, as you are able, to prevent fatigue
- drink liquids to stay hydrated, reduce constipation and boost milk production
- continue eating as you normally would
- increase the time you spend out of bed or distance walking around

Skin-to-skin with your baby

While awake and alert, hold your baby skin-to-skin. Your partner or support person can take over and practice skin-to-skin contact when you need to rest.

Pain Control





Tell your nurse if your pain reaches 4 or more on a pain scale of 10.

Remember to arrange your ride home.

Tell your nurse if you have any concerns about going home.

Going home

Before leaving the hospital, make sure you have all the information you need to manage your care at home.

For example, make sure you have:

- a summary of your delivery information for your family doctor
- any required prescriptions
- contact information for:
 - the obstetrics unit
 - breast or chest feeding support
- follow-up appointments and home care services if needed
- answers to your concerns or questions

Also, make sure you know what to expect over the next few days regarding your health and your baby's health. Don't hesitate to ask your healthcare team about it.

At home Follow-up appointments

After going home with your baby, you will have a few follow-up appointments.

For your baby

Your family doctor should assess your baby soon after going home from hospital.

For you

You should have contact with a medical care provider within the first 3 to 6 weeks after your delivery. This initial check-up should be followed up with ongoing care as needed.

In addition, be sure to visit a healthcare professional to assess and treat any additional physical and mental health concerns required in the first 12 weeks after delivery.

Removal of your bandage and incision care

Removal of your bandage

Bandages help reduce the risk of infection. Here are some information and tips for your bandage.

To help with healing, wear loose, comfortable clothes and cotton underwear.

To make sure your incision heals well, watch for:

- fever
- signs of infection such as increasing pain, redness, or drainage
- separation of the wound

In general, the bandage can be removed from 6 to 24 hours after the delivery.

Incision care

Your incision will likely be closed with dissolvable stitches which will break down slowly and don't need to be removed. If your incision is closed with staples, they will need to be removed within a week after your delivery.

Your incision may be slightly red and uncomfortable for several weeks after your cesarean delivery.

You can take a shower 48 hours after your cesarean delivery. Here is what you need to know:

- let the water run softly over your incision and gently wash the area
- don't scrub
- keep your incision dry until it is healed
- don't apply creams and bandages, as they may cause a skin infection

Your incision should be completely healed within 6 weeks after your delivery. You will then be able to resume all your daily activities.

Contact your doctor if:

• your incision becomes warm, red, and hard



- your incision opens
- you see pus or drainage from your wound



- you have a fever above 38C or 100.4F
- you have flu-like symptoms

Pain Management

You will feel pain and discomfort for a few weeks after your cesarean delivery. This is normal, but it will get better. Take your pain medication as directed by your doctor.

If you breast or chest feed your baby, and we sent you home on opioids, you should watch your baby for these signs:

- drowsiness
- difficulty breathing
- constipation
- difficulty feeding

The medication may not suit your baby. You should seek medical assistance if you observe either of these signs.

If you are in severe pain and your medication isn't helping, call your obstetrician's office. If you can't reach someone, go to the emergency department.

Pain medication may cause constipation.

To help your bowels stay regular:

- drink more liquids
- eat more whole grains, fruits, and vegetables
- exercise regularly: a 10-minute walk is a good start
- take stool softeners or a laxative if your doctor recommends it

Food and beverages

You should eat a well-balanced diet by following Canada's food guide to support your nutritional needs for good health.



Eat foods that contain protein to help your body heal. Beans, nuts, lentils, chicken and dairy products are good sources of protein.

Drink fluids to make sure you are well-hydrated, to reduce constipation and boost milk production if needed.

You should also take a daily multivitamin and mineral supplement containing vitamin D and folic acid. According to your specific needs, additional supplements, like iron, may be recommended.

If you have any special dietary needs, restrictions, or concerns, speak with your healthcare team before you leave the hospital.

If you breast or chest feed

In addition to these recommendations, if you are breast or chest feeding, be sure to include fatty fish such as salmon and tuna in your diet. Fatty fish in your diet helps increase the amount of omega-3 and influences the healthy fat composition in breast milk. You should also include an additional 350–400 calories every day to boost milk production.

You should avoid or limit your caffeine and alcohol intake.

Physical activity and exercise



It is a good idea to exercise and move around. After leaving the hospital, you can gradually resume your daily activities, such as light housework and running errands.

For the first 6 weeks after delivery, lift nothing heavier than your baby. Also, avoid strenuous physical effort, including core exercises like crunches or sit-ups.

Get regular exercise: a 10-minute walk is a

good start. Increase the distance until you reach your usual activity level.



If you are experiencing pain with activity, and your medication isn't working, contact your healthcare team.

Don't hesitate to ask your family and friends for help with:

- childcare
- transportation
- meal preparation
- laundry
- grocery shopping
- house cleaning

Reasons to seek urgent medical care

Contact your doctor if you have the following problems. Problems with your incision, such as:

- an opening in your incision
- pus or drainage coming from your incision
- a warm, red and hard incision

Other health problems, such as:

- trouble peeing or you think you may have a urinary tract infection
- difficulty breathing or an unexplained cough
- leg symptoms, such as a painful, swollen calf muscle
- a fever above 38°C or 100.4°F
- flu-like symptoms
- heavy bleeding, which means you are soaking a pad every hour

Vaginal bleeding after your cesarean delivery is called lochia. Lochia can last for up to six weeks and may increase when standing or moving around or while breast or chest feeding. Generally, lochia will get lighter over time and doesn't require urgent medical care unless it is heavy or irregular.



Preventing infections in your hospital room



Websites of interest

Facts on Pregnancy and Childbirth

The Society of Obstetricians and Gynaecologists of Canada

www.pregnancyinfo.ca/

Breast or chest feeding

Public Health Agency of Canada

www.canada.ca/en/public-health/services/publications/healthy-living/ maternity-newborn-care-guidelines-chapter-6.html

Nutritional resources

Canada's Food Guide

https://food-guide.canada.ca/en/

Hospital resources

Internet access

Free Wi-Fi is available at the hospital.



Connect to:

Network:	
Username:	
Password:	

Other resources:

Coffee shops:	
Cafeteria:	
Bank machines:	
Library:	
Prayer and	
meditation room:	



Notes