

**NEWBORN:** *Now What?*

# *Congratulations!*

YOU ARE GOING HOME AS A FAMILY!

As you return home, your life will have changed dramatically. During your hospital stay, you probably found security having the doctors and the nurses close at hand. Now, you may feel an overwhelming responsibility, sometimes joyful and sometimes frightening, as your new role as a parent unfolds. Keep in mind that the first two weeks are the hardest part of the initial adjustment period. Even though you may have new responsibilities, frustrations or fears, you will also experience new discoveries and new joys that you may have never been able to imagine!



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# NEWBORN: *Now What?*

## TRANSITION INTO PARENTHOOD

Parenthood is a major adjustment and the first two weeks are the hardest. Since Seton Medical Center is aware of this, you will receive a follow up phone call to check on your progress and answer any questions you may have. But in the meantime, how do you make it through this time as you get to know your new little one? The following are a few suggestions to help with the transition.

- Accept help from family and friends - cleaning, meals, grocery shopping and caring for the baby after feedings
- Have a family member or support person stay in your home for the first week or two
- Sleep when the baby sleeps
- Decrease your visitors during the first two weeks
- Take time for you: long baths, shower, groom and relax while someone else watches the baby
- Communicate with other people that you trust for advice on baby care issues- your pediatrician, your mother, your sister, neighbors or other people with children
- Don't sit at home and worry! Seek help if questions arise.
  - a) If you have any questions about the new mother's recovery, don't hesitate to call your OB doctor and keep your six week appointment (or one or two week appointment if you had a cesarean section).
  - b) If you have questions about the baby's health, call your pediatrician. Be sure to take the baby to the pediatrician during the first or second week of life.

## You may be thinking, "When should I call for breastfeeding help?"

The following are tips on signs that the baby is breastfeeding well and signs of when to call the lactation nurse:

### Signs that the baby is doing well:

- 8-12 feedings in 24 hours
- 6-8 wet diapers a day
- 3-4 yellow bowel movements a day
- You hear swallowing during the feeding
- Baby is satisfied after most feedings
- Baby gains 4-7 ounces a week

### Signs that you need to call for assistance:

- Fewer than 6 wet diapers a day
- No bowel movements for 24 hours
- Sore, cracked or bleeding nipples
- No swallowing during feeding
- Sore, red breasts

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## FREQUENTLY ASKED QUESTIONS

### **SHOULD THE BABY BE IMMUNIZED?**

Immunizations are an important part of your baby's health care because they protect him/her from potentially harmful diseases. For questions regarding the immunization schedule please refer to your pediatrician or log on to the Advisory Committee on Immunization Practices at [www.cdc.gov/nip/acip](http://www.cdc.gov/nip/acip) or the American Academy of Pediatrics at [www.aap.org](http://www.aap.org). It is important for you to keep your own record at home to ensure that your baby gets all the recommended vaccines and at the proper times.

### **WHAT SHOULD I DO WHEN MY BABY CRIES?**

Crying is a normal part of every baby's day. This is the only way they can communicate their needs. If your baby is crying, try nursing him, changing the diaper and burping him. If the baby continues to cry, hold him closely. A newborn baby cannot be spoiled. They need to be held! Speak softly in a low tone, play a radio, take them outside, or utilize an infant swing, but NEVER SHAKE THE BABY. Try to remain calm. Sometimes, it is helpful to place your baby in the crib for a few minutes while you go somewhere else to calm down. If your baby's crying continues and you are concerned, don't hesitate to call your health care provider.

# POST PARTUM: *Now What?*

## **POSTPARTUM PHYSICAL CHANGES**

Whether you have had a vaginal or a cesarean birth, your body needs time to recover. You will experience many changes as your body returns to its usual state from the physical stress of pregnancy.

### **LOCHIA**

Immediately after birth, the vaginal discharge is bright red and heavy. It should lighten in color and amount each day until the color becomes clear, then it will stop altogether. Although most moms will have this discharge for about four to six weeks, any bright red bleeding or passing of clots after the tenth day should be reported to your physician.

### **MILK**

Between three and five days after birth, mom's milk supply will come in. If you nurse your baby soon after birth and frequently from the start, your breasts may not become engorged. But if they do feel swollen, hard, or painful, heat packs or warm water from a shower will help. Nurse your baby often to relieve the pressure.

### **UTERUS**

The uterus takes about six weeks to shrink to its normal pear-sized shape. You may feel mild contractions as this happens. While this is normal, if it becomes too uncomfortable or if your pain is not relieved by pain medications given to you at discharge, contact your physician.

### **SEX**

Your physician must give you the OK before you can become sexually active again. You can usually start having sex after six weeks, or once vaginal flow has stopped.

### **EXERCISE**

You should continue to do Kegel exercises for the pelvic floor muscles. This can improve bladder control and increase awareness and pleasure during sex. Begin these soon after birth. Strenuous physical exercise should not begin until six weeks after delivery. However, walking may be done as soon as you feel up to it.

# POST PARTUM: *Now What?*

## **CALL YOUR DOCTOR IF YOU EXPERIENCE ANY OF THE FOLLOWING:**

- Lochia becomes too heavy (filling one pad or more per hour)
- Lochia turns bright red instead of dark red to brown
- Lochia changes to a foul smelling odor
- Lochia contains blood clots larger than golf ball size
- Pain when urinating
- Cramping in legs, arms, chest or abdomen
- Your breasts develop painful lumps, reddened areas or streaks, or feel hot and tender
- Your abdominal incision begins to separate, develops drainage or red streaks, or if pain increases
- You are unable to have a bowel movement
- Difficulty breathing
- Fever over 100.4
- Blurred vision
- Severe headaches (not relieved by medication)
- Postpartum depression lasting more than 2 weeks

# POST PARTUM: *Now What?*

## POSTPARTUM EMOTIONS

The emotions that sometimes surface after birth can be a challenge. These “baby blues” are a combination of many factors including hormonal changes, physical discomforts, and fatigue. Some women may feel let down if birth didn’t go as they had hoped or if breastfeeding proves to be more difficult. Others are disappointed by not immediately regaining their pre-pregnant shape. Both parents may have anxiety about taking total responsibility for an infant. Mom may not adjust well to staying home with the baby, feeling bored or lonely. She may worry about returning to work if she wants to stay home. Sometimes it seems that there are not enough hours in the day to get everything done.

These “baby blues” can last days for some women and weeks for others. The most important thing to remember about this period is that it is normal to have negative and “blue” feelings from time to time. Know that it will get better. Usually by 6-8 weeks postpartum, your strength returns, your family develops new routines (which include the needs of the baby).

70-80% of women have the “baby blues” with feelings of worry, crying, sadness, sleep problems, mood swings and fatigue.

## HERE ARE SOME SUGGESTIONS FROM OTHER NEW MOMS:

- Let your emotions out! If you feel like crying, go ahead and cry. Share your feelings with your partner or family. They may also be experiencing many of the same feelings.
- Be a superMOM! Don’t try to be a superwoman. Housework, social commitments, volunteer, and work-related activities should all take a backseat to becoming a mom. Take care of yourself as you recover, bond with your baby, get breastfeeding off to a good start, and enjoy your new family.
- Wear pajamas all day if it makes you comfortable! If you aren’t dressed, you’ll be more likely to go back to bed when the baby naps and perhaps visitors will stay a shorter time.
- Plan to nap daily for the first six weeks, especially if you are nursing.
- Get help with the housework and cooking. If a friend asks what she can do to help, tell her to bring a meal.
- Realize that almost all babies have their days and nights mixed up at first and that almost all babies cry much more than you expect. It’s OK to have occasional sad feelings and to wonder why you ever wanted to do this. Talking with friends who have young children or getting to know others from your childbirth class can be comforting. It is helpful to know that they have had similar joys and frustrations.

# POST PARTUM: *Now What?*

When these “baby blues” last longer than a month, or disrupt daily life, health professionals call this Postpartum Depression.

## **WARNING SYMPTOMS THAT REQUIRE PROFESSIONAL HELP ARE:**

- Worry, guilt, or crying that interferes with daily activities
- Trouble sleeping, or changes in eating habits
- Feelings like the baby dislikes you
- Scary or bizarre thoughts that come “out of the blue,” especially regarding harm to the baby
- Panic attacks with powerful anxiety, fear, rapid breathing and heart rate
- Agitation
- Seeing or hearing things that others do not see or hear

**IF YOU OR SOMEONE YOU KNOW HAS THESE SYMPTOMS,  
IT IS IMPORTANT TO TALK TO YOUR PHYSICIAN.**

# GROUP B STREPTOCOCCUS (GBS)

## WHAT IS GBS?

Group B streptococcus (GBS) is a type of bacteria that is commonly found in many healthy adults. GBS is not the same species of bacteria as group A streptococcus which causes strep throat. People with GBS often carry the bacteria but don't feel sick or have any symptoms. For healthy adults, GBS is usually harmless. However, a pregnant woman who carries GBS can pass it to her baby during labor and delivery, which can put her baby at risk of developing life-threatening infections. Fortunately, with proper screening and treatment, a mother can generally reduce her baby's risk of illness.

## WHAT ARE THE SYMPTOMS OF GBS DISEASE IN A NEWBORN?

Symptoms of GBS disease include: fever, difficulty feeding, breathing problems, difficulty waking, limpness, and irritability. These symptoms are also typical of many other illnesses in newborns. If you think that your baby is sick, contact your health care provider immediately.

## WHAT ARE THE POSSIBLE COMPLICATIONS OF GBS DISEASE?

If a baby develops GBS disease, the complications can be life-threatening and may include:

- Sepsis (a condition that occurs when infections travels through the bloodstream)
- Pneumonia (an infection that occurs in the lungs)
- Meningitis (an infection of the fluid and linings around the brain and spinal cord)

## HOW CAN I HELP PROTECT MY BABY FROM GBS?

Fortunately, most cases of GBS disease in newborns can be prevented. When you are 35-37 weeks pregnant talk to your physician about the GBS test. The health care provider will use a swab to collect samples from your vagina and rectum. The results determine if you are a GBS carrier. If you are a GBS carrier, you should receive antibiotics through an IV during labor. Antibiotics can help prevent the passing of GBS from you to your baby. Taking antibiotics before you go into labor will not prevent the transmission of GBS because the bacteria can grow too quickly.

## WHAT SHOULD I DO IF MY TEST SHOWS I AM A GBS CARRIER?

Talk to your physician about a plan for labor. Tell your labor and delivery nurse that you are GBS positive. Expect to receive antibiotics when you are admitted for labor.

## WHAT SHOULD I DO IF I GO INTO LABOR BEFORE BEING TESTED FOR GBS?

If your water breaks or you go into labor before you have had a GBS test, tell your labor and delivery nurse that you have not been tested. Let them know if you are allergic to any antibiotics.