Parent’s Guide
Congratulations on the new addition to your family and thank you for choosing the LaChance Maternity Center at Heywood Hospital as the place to have your baby!

Every member of our staff understands that the birth of a child is one of life's most precious moments, and we are delighted to be part of this exciting time in your life.

Our staff is committed to providing you and your family with the highest quality, individualized care. We consider every birth, every newborn, and every family special.

We believe that the most satisfied patients are those who are well-informed. This guide, therefore, provides you and your family with helpful information for once you leave the hospital. Please read this booklet and keep it handy. While it cannot replace the information you received from your care team, it will be a helpful reference for you.

Please know that we respect and appreciate the trust you have placed in the LaChance Maternity Center at Heywood Hospital. If you have any questions or concerns, call our Maternal Child Practice Leader at (978) 630-6475.

Thank you for choosing the LaChance Maternity Center at Heywood Hospital.

Win Brown  
President and CEO  
Heywood Healthcare

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Vice President Patient Care Services/CNO
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Creating an exceptional birth experience is our passion at the LaChance Maternity Center. Our expert team of physicians, nurses and doulas provide personalized attention that promotes a tranquil and memorable delivery.
General Activity

The postpartum period begins with the baby's birth and lasts about six to eight weeks before your body completely returns to normal. It is a time of physical and emotional readjustment. By understanding these changes, you will more likely be able to successfully cope with them. Keep your expectations realistic. Recovery is a progressive process and you will feel better and stronger day by day. For the first couple of weeks at home, you should only take care of yourself and your baby. Fatigue and weakness are common during this time and you will need to rest to regain your strength. Rest when you can, nap when the baby is sleeping. Resume your activity and household tasks gradually. Heavy lifting and social activity should be avoided and driving is not recommended in the first couple of weeks, or while taking any prescribed narcotics.

Visitors

Keep visitors to a minimum, and for those close friends and family that do come, allow them to help with some of the responsibilities associated with meal preparation and housework. This is a good thing! People carry all kinds of germs and illnesses, so avoid large crowds for the first few weeks. If you know that someone has a contagious illness, keep them away from your baby. Be sure to ask people to wash their hands before holding or touching your baby.

Abdominal Cramps – After Birth Pains

By the time you go home, the so called “after birth pains” should have nearly disappeared. This sensation of “menstrual cramping” is normal as the uterus returns to it’s former size. Cramping is usually more uncomfortable with your second or third baby or if you are breastfeeding. It is your body’s way of returning to your pre-pregnant state and helping to reduce blood loss following birth. It is sometimes helpful to use your labor breathing and empty your bladder. If they are still causing you some discomfort, you may find ibuprofen (Advil) or acetaminophen (Tylenol) helpful. Check with your doctor before starting any medication.

Lochia (Vaginal Discharge)

Some vaginal discharge, or lochia, is normal for the first few weeks after delivery. At first it will be bright red, changing gradually to brownish color and then in about 10-14 days become yellowish or white in appearance. It will have a slight odor, often described as “fleshy, musty or earthy”. The odor should not be bad or offensive. If you notice a “foul smelling” discharge, you should notify your physician.

Lochia will generally disappear in about three to six weeks. Sometimes, with excessive activity, the lochia may return to a red color for several days. This is your body’s way of saying you may be doing too much, so you need to slow down and rest.

Occasionally you may pass a clot that is dark red. It may be small or as large as a golf ball. The clots are either from old blood in the uterus or from blood sitting in the vagina while resting in a flat position, this is known as a “pooling” clot. These clots are normal and pose no concern. If, however, the clots are larger than a golf ball or if your bleeding increases after passing a clot, or you are using more than one pad per hour due to the bleeding, call your physician.

Douching is not necessary and in no case should it be started before your six week check-up. Tampons should not be used before six weeks either. Avoid pools and hot tubs until the lochia has ended. Use sanitary pads only. Change sanitary pads frequently to absorb the discharge and avoid infection. Your episiotomy and any tears or lacerations that occurred during the birth will heal quickly if kept clean and dry.

Episiotomy/Perineum Care

The perineum is the area between the vagina and rectum where an episiotomy may have been performed to enlarge the opening for the birth of your baby, or you may have received some stitches in this area to repair any tears or lacerations. These stitches will dissolve on their own and will not have to be removed at a later date.

It is important to keep this area clean to prevent infection. You should wash your hands before and after going to the bathroom. You should also continue to use warm water in a peri (squeeze) bottle to cleanse this area for as long as you have any vaginal discharge. Remember, after urinating or having a bowel movement, to always clean and wipe from front to back (never from back to front).

Ice is often used for the first 12-24 hours to help reduce swelling. After 24 hours, the use of a sitz bath, taken two or three times a day for 15-20 minutes, is then recommended. A sitz bath is a bath, up to your waist, in a tub of water that is comfortably hot. Do not add anything to the water. A small plastic sitz tub that fits onto your toilet can also be used for this. Sitz baths are good for healing, cleaning and for painful hemorrhoids or stitches. Topical medications, such as witch hazel compresses (Tucks pads) or an anesthetic numbing spray, may have been recommended by your doctor to help minimize discomfort.

Kegel exercises may be started immediately after delivery to promote circulation to the area, help promote healing, and help maintain the tone of the muscles that support your vagina, bladder and bowels. These pelvic floor exercises are done by tightening the muscles around your vagina (as if you were stopping your urine flow), holding for five seconds and then releasing. Repeat this 10 times and repeat often throughout the day.

Discomfort in this area should resolve in about six weeks.
**Cesarean Sections (C-sections)**

If you had a C-section you must remember that not only did you have a baby, but abdominal surgery as well. The C-section incision will take two to six weeks to heal. At first, moving, lifting or walking may be somewhat painful or difficult, but the pain should lessen with each day. As your body heals, you should keep strenuous activity to a minimum. Therefore, avoid lifting anything heavier than the baby, limit stair climbing and get plenty of rest. Although rest is important, it is also important to get up and move around on a regular basis to prevent blood clots in your legs and constipation.

Your doctor may have used staples to close the incision. These staples usually are removed before discharge from the hospital and replaced with steri strips. As your incision begins to heal, the steri strips will gradually loosen and fall off. If they haven’t fallen off within a week, you may gently remove them.

Your incision can be cleansed with soap and water during your daily shower and then dried afterward. Cotton underpants are usually more comfortable than nylon because they allow the skin to breathe as it is healing. Avoid elastic pressing right on the incision. If you should notice any redness, drainage, increased pain, hot areas, an opening of the incision or you develop a fever of 100.4˚F or higher, you should call your doctor.

**Bladder, Bowels and Hemorrhoids**

After giving birth, your bladder sensation and muscle tone may be weaker. It is important to begin doing Kegel exercises soon after giving birth to make your bladder stronger. Also, urinate often. Try to empty your bladder every 3-4 hours. Don’t wait until your bladder feels full. Because your body will be getting rid of extra fluid from having been pregnant, you will notice that you will urinate large amounts in the first few days post partum.

If you experience any burning or frequency with urination or you can’t urinate much, notify your doctor.

Hormones, medications, dehydration, perineal pain and decreased physical activity may make bowel function sluggish after you have a baby. You can usually expect to have your first bowel movement by the second or third day post partum. Constipation is not uncommon in the first few weeks especially if you are taking a narcotic pain medication. Sometimes your doctor may recommend that you take a stool softener to help provide relief.

It is important to eat a balanced diet and drinking 6-8 glasses of water a day will help prevent constipation. Eating fresh fruits and vegetables as well as whole-grain bread and cereals will also help. Prunes or prune juice are natural laxatives. Progressive exercise, such as walking, is also quite helpful. Don’t postpone your bowel movements.

If normal bowel function does not resume within several days after delivery, call your doctor.

Occasionally, some women will suffer from hemorrhoids during and after pregnancy. Hemorrhoids are enlarged veins in the anus that, in the acute stage, can be quite uncomfortable. Usually, they will respond to witch hazel compresses (Tucks pads), sitz baths and anesthetic sprays that your doctor may recommend.

Avoid straining when having a stool and keep bowel movements soft by drinking plenty of water and taking a stool softener. Also, avoid sitting. If you do sit, squeeze your buttocks together first before you sit.

**Emotions/Mood/Depression**

Emotions are apt to fluctuate widely after having a baby and the “baby blues” are not uncommon. These feelings are usually caused by hormonal changes, fatigue, isolation and the new responsibilities associated with a new baby. This is a normal part of early motherhood and occurs in approximately 50-80% of new mothers. Symptoms such as crying spells, mood swings, worrying about the baby, anxiety, loneliness and lacking confidence in parenting ability usually start on the second or third day after the baby’s birth and usually go away within a week to 10 days without any treatment. The following tips may help you to feel better:

- Get a lot of rest. Do not overwork yourself. Sleep when the baby sleeps
- Ask for help with chores or make housework a low priority
- Don’t spend too much time alone if you feel depressed or overwhelmed
- Seek support. Tell others how you feel and ask for help and support
- Join a support group
- Eat healthy foods and drink plenty of fluids

The baby blues should not be confused with “postpartum depression”, also known as “perinatal mood and anxiety disorder”. As many as one in eight women will experience depression which can occur any time during pregnancy and the first 12 months after giving birth. It is associated with many of the signs of the baby blues, but they are more severe or intense. Feelings of anxiety, panic attacks, insomnia, lack of appetite, little or no concern about appearance and inadequacy or fear of harming the baby or yourself are often present. It does not matter how much money you make, what your race is or what culture you come from, any woman can develop this disorder. Postpartum depression requires professional attention and you should call your doctor if you experience any of the symptoms so that you may get the support and help that you need.

Although an exact cause isn’t known, several factors may contribute to the development of postpartum depression. After childbirth, several hormone levels drop rapidly, which may lead to depression. Other factors, such as the new demands on time, lack of rest and changes in routine may also contribute to feelings of depression.

A woman with postpartum depression needs to seek the help of her healthcare professional and can be successfully treated with counseling and medication. Without treatment, postpartum depression may worsen or last longer.

Postpartum depression is not the same as postpartum psychosis, an extremely rare condition that usually develops within six weeks after delivery. Women who have bipolar disorder, schizophrenia or a family history of these conditions are at higher risk of developing psychosis. Symptoms may include hallucinations, paranoia, and obsessive thoughts about the baby or sleep disturbance. Women with postpartum psychosis require immediate medical treatment.
Menstruation

The return of your period after childbirth is quite variable and may take up to six months to re-occur. Usually breastfeeding mothers have a re-appearance of the menses in 5-6 months, while non-breastfeeding mothers usually start to menstruate in about six weeks. The first period is often heavy and may contain some clots. It may take a few months for a regular cycle to be re-established. Remember, ovulation may resume soon after delivery even if you are not menstruating yet. This means that even if you do not have a period, you can still become pregnant.

Intercourse

You should wait to resume intercourse until at least one week after your vaginal discharge has stopped. Usually this happens at about four to six weeks after having your baby.

Several factors may decrease a mother's desire to resume sexual intercourse. This can be caused by hormonal changes, fatigue, lack of vaginal lubrication, as well as fear of pain. You will need some time to work through these changes and feelings. Once you are ready, consider using a water-based lubricant.

If you experience difficulty with sexual intercourse, always discuss it with your partner. Set aside time for each other a few times each week without the baby in order to become "reacquainted". If the problem persists, then discuss it with your healthcare provider.

Birth Control

You may ovulate as soon as three weeks after you have had your baby, even if you have not had a period. This means you could get pregnant if you have intercourse even if it is the first time after giving birth. If you do not want to get pregnant right away, you should use some type of birth control.

There are many types of birth control. Talk with your healthcare provider to determine which contraceptive method will best meet your needs. Keep in mind that the six week postpartum visit may be the first opportunity for your health care provider to prescribe a birth control method. Using a condom prior to that appointment is recommended.

Breast Care

After childbirth, your breasts continue to change. Your areolas (the area around your nipples) become darker and your body makes a special type of milk called colostrum. The colostrum becomes mature milk after a few days. During this time, your breasts can swell and cause some discomfort.

If you are breastfeeding, it is advisable to wear a good support bra continuously. Special nursing bras are available that have a flap that can be released which allows you to breastfeed while continuing to support the other breast.

To reduce the fullness caused by engorgement, frequently breastfeed your baby. If nipple soreness occurs or nipples become cracked, it is usually caused by the baby not latching on correctly. It is very important to get help from a lactation specialist. It is helpful, in the meantime, to express a small amount of breast milk and apply it to the nipple and areola after the feeding and allow to air dry.

Lansinoh, a natural cream approved by the LaLeche League, can also be used for sore or cracked nipples. This does not need to be removed before the baby breastfeeds.

Breast pads may be used to protect clothing. It is advisable to avoid pads that have a plastic lining as they hold in the moisture and can cause your nipples to become sore and cracked. Washable breast pads are recommended as they allow for air to circulate, as well as being cost effective. Change breast pads frequently to avoid moisture against the breast.

If you are not breastfeeding and you experience fullness in the breasts, wearing a good support bra may be helpful as well as applying cold compresses (try frozen peas in a bag) every 3-4 hours for 15-20 minutes or as needed. You may also take one or two acetaminophen (Tylenol) tablets every 4 to 6 hours as necessary to control breast discomfort. Avoid stimulation of the nipples as this will cause more milk production and fullness. The fullness should diminish in 24-48 hours. Occasionally, in 10 to 12 days, milk may reappear in the breast and the same treatment is indicated. If there is an area on either breast which becomes red, hot and tender and you have a fever, notify your healthcare provider.

Bathing

You will notice that you will perspire more than usual after the birth of your baby. This is your body's way of getting rid of the extra fluids you acquired with the pregnancy. You will find a daily shower to be very refreshing. You may take a shower or wash your hair at any time that you desire. If you had a vaginal delivery, it may be better to deter tub baths, other than sitz baths, for three weeks or until the vaginal discharge stops.

Skin Changes

Your skin may have changed during pregnancy. Maybe you had linea nigra (the dark line that extends down the belly), a blotchy appearance of your face or birthmarks, or scars that became darker. These changes occurred because your body produced more melanin (the pigment that gives your skin color) during pregnancy. Most of these skin changes will fade away gradually over several months after childbirth.
**Varicose Veins**

If you developed varicose veins during pregnancy, elevating your legs and using elastic support stockings when walking or standing are recommended for the first 6 weeks postpartum.

**Nutrition**

As a new mother, it is important to provide your body with nutritious food for the energy you will need to care for yourself and your new baby. If you are breastfeeding, you will need an extra 500 calories each day to stay healthy and produce nutritious breast milk. Have meals with foods from all five food groups—grains, protein (like meat and beans), fruits, vegetables, and dairy. Visit www.choosemyplate.gov to create a nutrition plan that is right for you.

**Weight Loss**

You probably will not return to your pre-pregnancy weight for some time, but you will lose a significant amount of weight immediately after delivery. Between the weights of your baby, the placenta and amniotic fluid, most new mothers will lose about 12 pounds after giving birth. More weight loss will be easier with moderate exercise and a smart eating program. However, don’t diet to lose weight too soon after giving birth. Dieting can make you tired and unhealthy. You need to gain strength and energy with healthy foods. Once you have regained your energy, you may begin to lose weight. If you breast feed, you may lose weight more quickly. If you aren’t losing weight, or are losing weight too slowly, cut back on sugary and fatty foods. Some foods that are high in sugars and fats are baked goods, desserts, soft drinks, pizza, fried foods, fast foods and fatty meats.

**Exercise**

Any vigorous exercise program should be initiated only with your healthcare provider’s approval. Once you are given the okay, you should start off gradually. Remember, rest is very important for a new mother. Kegel exercises are a great place to start, since they involve small contractions of the muscles of the vaginal wall. They can help strengthen weak pelvic floor muscles that can cause bladder control problems. Another good way to return to an exercise program is by walking. A brisk walk, several times a week, will help prepare you for a more strenuous workout when you feel up to it. Swimming is another safely recommended exercise to do postpartum. Simple after birth exercises are good for your muscles and your mood, but check with your healthcare provider before doing any exercises, including those listed below. Remember to start out slowly at first. Do each exercise three to five times.

- **Neck and Shoulders**: You can either stand or sit for this exercise. Roll one shoulder up, back, down, forward and up in a circular motion. Start slowly and then go faster. Then roll it in the opposite direction. Repeat this for your other shoulder
- **Arm Raise**: Raise your arms over your head, keeping your elbows straight with your palms facing one another and hold for 5-10 seconds. Then lower your arms out to your side, palms facing down, and bring them together as far as possible behind your back and hold for 5-10 seconds.
- **Pelvic Tilt**: Lie on the floor on your back with your knees bent, resting your feet flat on the floor. Now tighten the muscles in your stomach and buttocks as you inhale. Pull in your stomach so that your back is flat as possible against the ground. Hold for the count of 5. Then relax and let your pelvis return to the starting position as you exhale.
- **Stomach and Upper Body Muscles**: Lie on the floor on your back with your knees bent, resting your feet flat on the floor. Pull in your stomach muscles and raise your head and shoulders a little. Cross your right hand over to your left side, twisting at the waist. Repeat the exercise on your other side.
- **Leg and Feet Muscles**: If you have any swelling in the ankles, varicose veins and/or leg cramps, you may find these exercises helpful. Start by sitting on the floor with your legs stretched out in front of you. Bend and reach for your ankles, then for your toes. Finally, roll your feet around in circles, first in one direction and then the other direction.

**Travel**

After the baby is a week or two old, there are no contraindications to travel except for possible over-exertion and fatigue. If a long automobile trip should be necessary, it is advisable to get out of the car at frequent intervals and walk for several minutes to maintain adequate circulation.

**Postpartum Medical Care**

You will need to make an appointment to see your physician for a six-week postpartum visit. At this time, you will have the opportunity to discuss any problems you may be having. The cervix, or mouth of the womb, will be inspected at this time. It is essential, in terms of future health, that your cervix be completely and fully healed before you are discharged from obstetrical care for this pregnancy. If the effects of childbirth on your cervix require treatment, you will be instructed to return regularly until full healing has occurred. The importance of this cannot be over emphasized. You may have a routine pap smear test done at this time as well. It is suggested that you return at yearly intervals for physical examinations and routine pap smears.

**Partners**

Partners can experience many different feelings after having a baby, too. Lack of sleep and feelings of neglect or loneliness are not uncommon. The new mother seems to be giving all of her attention to the baby and significant others can feel left out. It is important for significant others to remember that, in time, their partner will eventually have more time to share with them. Meanwhile, use this extra time productively at work and home. However, communication is important. Be sure to share your feelings with your partner. There may be a new baby in the family, but with some planning, parents can still share time together dining or walking (perhaps with the baby in a stroller). Healthy adult relationships are important to the baby’s emotional well-being, as well as your own.
Immunizations

Tdap Vaccine
Tdap is tetanus, diphtheria, and pertussis. Pertussis, also known as whooping cough, is a very contagious disease that can cause serious illness in adults, children, and infants. At first, whooping cough can seem like a common cold, but the illness can cause severe coughing spells, vomiting and disturbed sleep. The cough can become severe after 1 or 2 weeks and may last for months.

Whooping cough is usually spread when a person who has the disease coughs or sneezes while in close contact with others. An unvaccinated adult or teenager who may not realize they have whooping cough can spread the disease to an infant.

Complications are often worse in infants and may lead to hospitalization. Infants have the highest risk for severe illness and complications which, although rare, include seizures, brain disorder and even death.

The best way to protect you and your baby from getting whooping cough is to be vaccinated. Today, there is a booster shot that protects against tetanus, diphtheria and whooping cough. This booster is known as Tdap. Since your baby is too young to receive the vaccine, the best thing to do is to be sure that anyone who is caring for the baby receives the vaccine. This provides a “cocoon effect” of protection for your baby.

The Center for Disease Control (CDC) recommends that Tdap vaccination be given to all adults aged 19-64, any women who might become pregnant, all new mothers before they leave the hospital and anyone who may live with or take care of infants who are less than one year of age.

Flu Vaccine
It is safe and very important for a pregnant woman to receive the inactivated flu vaccine. A pregnant woman who gets the flu is at risk for serious complications and hospitalization.

MMR Vaccine
You should consult with your healthcare professional.

Travel
Many vaccine-preventable diseases rarely seen in the United States are still common in other parts of the world. A woman/child planning international travel should consult with their healthcare professional.

When to Call the Doctor
Be sure to call your healthcare provider if you experience any of the following conditions:
- Excessively heavy, prolonged vaginal bleeding (saturating a pad or more within one hour)
- Passing clots larger than a golf ball
- Frequent clots or sudden heavy bleeding
- Severe abdominal pain or cramping
- Foul smelling discharge
- Severe chills or fever of 100.4 degrees F (38 degrees C) or higher
- Pain, frequency or burning with urination
- Fainting or feeling dizzy
- Any drainage, redness or increased pain or hot spots from C-section incision
- Worsening pain in your perineum
- Vaginal discharge beyond six weeks
- Swelling, redness or tenderness in one area of any breast
- Redness or tenderness of the legs
- Feelings of anxiety, panic, insomnia or fear of harming the baby or self
- Any type of visual disturbance
- Severe headache
- No bowel movement within four days of giving birth
IMPORTANT PHONE NUMBERS & RESOURCES

Infant’s Doctor:  
Phone Number:  

Mom’s Doctor:  
Phone Number:  

Heywood Hospital Nursery (978) 630-6337

LaChance Maternity Center 24-hour Hotline (978) 630-6216

Massachusetts Poison Control Center (800) 222-1222

Breastfeeding Consultation Service (978) 630-6216
Outpatient Consultation
Breastfeeding Products and Pump Rentals

Childbirth/Parent Education (978) 630-6216
Hospital Tours
Register for childbirth classes in your fourth month of pregnancy
Prenatal and Postpartum Classes:
Childbirth Education: 2-Week (evenings) and 1-Day (Saturday),
Prenatal Breastfeeding, Sibling Preparation, Mother & Baby,
Heartsaver CPR/AED Training, New Parents Group.

Gift Shop (978) 630-6540

Interpreter Services (978) 630-6166 or TTY (978) 630-6800

March of Dimes Resource Center 888-MODIMES (888-663-4637)
Toll free resource for questions about pregnancy, genetics, drug use,
environmental hazards, birth defects, newborn care, support groups,
and related topics.

Patient Accounting Department (978) 630-6206
Financial questions during your hospital stay.

Social Services (978) 630-6166 or (978) 630-6386

Volunteer Services (978) 630-6554

WIC Gardner (978) 630-3344
WIC Leominster (978) 534-9117
WIC Fitchburg (978) 345-6272