

After the Loss of a Baby: After Hospital Care

Please know that we are deeply sorry for your loss. We hope to support you in any way we can at this difficult time. This guide will help you care for yourself when you go home.

Activity

Gradually increase your activity. Rest if you get tired. Allow yourself to get a good night's sleep. Allow your partner and family members to help with daily tasks.

If you have any questions, please ask your doctor or nurse.

- For the first 4 to 6 weeks, do not lift anything heavier than 10 pounds.
- Do not drive as long as you need to take narcotic pain medicine.
- Vaginal discharge will become lighter in color and decrease over the next 4 to 6 weeks.
- Bleeding is heavy at first and gradually decreases over time. It is common to see a slight increase in bleeding when you become more active. However, call your doctor if you soak a whole pad with blood in 1 hour or less or pass blood clots larger than a golf ball.
- Your body may need about 6 weeks to recover before resuming sex. Talk to your doctor about contraception if you wish to avoid pregnancy.

Pain and Cramping

Cramping can be intense at times especially during the first 48 to 72 hours. Drinking plenty of fluids and emptying your bladder often may help. Take pain medicine as ordered by your doctor. If cramping becomes worse along with abdominal pain that is not relieved by pain medicine, call your doctor.

Diet

You may resume your normal diet. A diet that includes fruits, vegetables, and plenty of fluids will help prevent constipation. If you are constipated for more than 3 to 4 days, contact your doctor.

Breast Care

As early as 17 weeks of pregnancy, breast milk may start to fill your breasts.

To prevent or ease any discomfort:

- Wear a support bra or sports bra at all times, except when bathing.
- Use ice packs on breasts to control swelling (as needed).
- Take pain medicine as prescribed.
- Do not express milk or pump your breasts to empty the milk, as this will cause your breasts to fill again.

For more information, ask your nurse for a copy of *Breast Care after the Loss of a Baby*.

Incision Care/Hygiene

Vaginal Delivery

If you had a vaginal delivery with an episiotomy or a laceration, the stitches will dissolve on their own over the next few weeks. To keep the area clean and prevent infection, please:

- Shower as usual.
- Rinse yourself with the peri (squirt) bottle after using the toilet. Gently pat the area dry.
- Do not douche or use tampons for 6 weeks.
- Avoid bubble baths, fragrance, oils, swimming pools and hot tubs for 6 weeks.

Cesarean Section (C-Section)

If you had a C-Section, it is important to keep the surgical area clean to prevent infection.

- No tub baths for 2 weeks.
- When showering, let the water gently flow over your abdominal incision. Pat the area dry.
- Avoid lotions, creams, or powders near the incision.
- You may wish to place a clean dry pad over the incision between skin folds. Change as needed to keep the area clean and dry.
- Each day check the incision for redness, drainage, or separation.
- You will have staples or small pieces of tape (Steri-Strips™) over your incision. If you have staples, the doctor will remove them at your office visit. If you have Steri-Strips™, they will fall off within 2 weeks. Do not remove them before that time. After that, you may remove any that are still present.
- To ease any discomfort during coughing or sneezing, brace your incision with a pillow (or your hands). You may use a binder for comfort as directed by your doctor.

Hemorrhoids

Hemorrhoids are enlarged blood vessels near your rectum. They are common after pregnancy and should decrease in size and disappear. For comfort, use cold compresses, a stool softener or medicated pads as directed by your doctor.

Swelling and Perspiration

As your body adjusts to no longer being pregnant and hormone levels return to normal, you may notice fluid changes in your body. Perspiring a lot or waking up sweating is normal. Swelling usually gets worse before it gets better and it can take 2 to 3 weeks to go away. You may lose up to 10-15 pounds of weight in the first 3 weeks. Rest often, elevate legs to decrease discomfort. If swelling persists and is accompanied with a headache (not resolved with pain medication), call your doctor.

Postpartum Mood Changes

It is normal to feel “down,” sad, tearful, moody, irritable, anxious, or nervous after the loss of a baby. Many of these feelings may also be due to your body’s hormone changes.

Seek help right away if these mood changes get worse or include:

- Feelings of hopelessness.
- Guilt, panic or anxiety.
- Difficulty concentrating/poor memory.
- Major sleep or appetite changes.

If you, or someone you know, has these signs, contact a healthcare provider right away.

If the symptoms worsen and you feel that you are at risk of harm to yourself or others, go to the nearest emergency room or call 911 right away.

Always remember, you are not alone. Help is available. Postpartum anxiety and postpartum depression can be treated. There are trained staff who are just a phone call away. Treatment options may include counseling, medicines or both. NorthShore University HealthSystem’s Perinatal Depression Hotline may be accessed 24 hours a day by calling 1.866.364.6667 (1.866.364.MOMS). The National Suicide Prevention Lifeline can also be accessed 24 hours a day by calling 1.800.273.8255 (1.800.273.TALK). For the hearing impaired, call TTY 1.800.799.4889 (1.800.799.4TTY).

Refer to the Northwestern Medicine brochure ***Postpartum Mood Changes*** for more information. This may be found in your admission folder or ask your nurse for a copy.

Medications

Do not take medications unless prescribed by or discussed with your doctor/nurse midwife. Do not take more than 4,000 mg of acetaminophen (Tylenol®) in 24 hours. This includes other medicines that you may be taking that contain acetaminophen such as Norco® or Vicodin®.

When to Call the Doctor

Please notify your Health Care provider (doctor or nurse-midwife) if any of the following occur:

- Pain or cramping not controlled by prescribed medication.
- Vaginal drainage that is foul smelling.
- Heavy bleeding (soaks a full sanitary pad in an hour or less).
- Passing clots from the vagina that is larger than the size of a golf ball.
- Feeling dizzy, light-headed or fatigue.
- Pain, swelling, or redness in either leg.
- Difficult or painful urination.
- Fever greater than 100.4° Fahrenheit.
- Tenderness or redness of the breasts.
- Increased pain, swelling, or separation of the stitches in the vagina (if you had a vaginal delivery/episiotomy).
- No bowel movement within 3 to 4 days.
- Redness, tenderness, drainage or opening of the abdominal incision (if you had a C-section).
- Swelling that persists and is accompanied with a headache (not resolved with pain medication), right upper abdominal pain, dizziness, ringing in the ears or flu-like symptoms.

Follow-up Care

See your doctor/nurse midwife as instructed on: _____;

Phone Number: _____

Other Questions or Concerns

Should you have any further questions or concerns about arrangements for your baby, certificates, memoirs or other resources, please tell your nurse.

If you have other questions about your care, call your health care provider.

Northwestern Medicine – Health Information Resources

For more information, contact Northwestern Memorial Hospital's Alberto Culver Health Learning Center (HLC) at hlc@nm.org, or by calling 312.926.5465. You may also visit the HLC on the 3rd floor, Galter Pavilion at 251 E. Huron St., Chicago, IL. Health information professionals can help you find the information you need and provide you with personal support at no charge.

For more information about Northwestern Medicine, please visit our website at nm.org.

Para asistencia en español, por favor llamar al Departamento de Representantes para Pacientes al 312.926.3112.

The entities that come together as Northwestern Medicine are committed to representing the communities we serve, fostering a culture of inclusion, delivering culturally competent care, providing access to treatment and programs in a nondiscriminatory manner and eliminating healthcare disparities. For questions, please call either Northwestern Memorial Hospital's Patient Representatives Department at 312.926.3112, TDD/TTY 312.926.6363, the Northwestern Lake Forest Patient Relations manager at 847.535.8282 and/or the Northwestern Medical Group Patient Representatives Department at 312.695.1100, TDD/TTY 312.926.6363.

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