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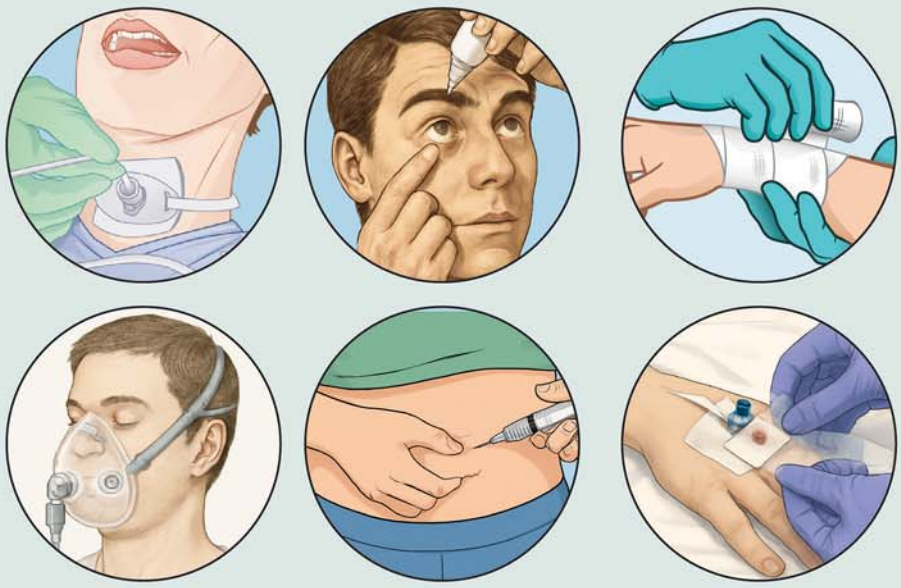

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CHAPTER 126

Postnatal Care

POSTNATAL ASSESSMENT AND CARE

Postnatal care (PNC) is the care given to a mother and her newborn baby after birth, including assessments and treatment. The goal of PNC is to prevent complications, detect them early, and treat them. PNC also provides counseling on breastfeeding, nutrition, and other topics.

Definition

Postnatal care for a mother and baby includes a full clinical examination, regular assessments, and follow-up visits. The goal is to monitor the mother's and baby's health and address any concerns.



Fig. 1: Postnatal assessment and care.

Purposes

- **Physical assessment:** Checking vital signs, uterine tone, lochia (vaginal discharge), wound healing (if a C-section), perineal condition, and breast health.
- **Baby assessment:** Monitoring the baby's feeding, weight gain, breathing, reflexes, and overall development.
- **Emotional well-being assessment:** Screening for postpartum depression and anxiety, providing emotional support and coping mechanisms.
- **Breastfeeding support:** Guidance on proper latch, positioning, and addressing common breastfeeding challenges.
- **Family planning counseling:** Discussing options for contraception and birth spacing.
- **Nutrition education:** Advice on healthy eating habits to support recovery and breastfeeding.
- **Infant care education:** Instructions on bathing, swaddling, soothing techniques, and safe sleep practices.
- **Identifying complications:** Early detection of potential issues like postpartum hemorrhage, infection, or severe mood disorders.

Components

Components of a postnatal assessment are:

General Assessment

- **Vital signs:** Check blood pressure, heart rate, temperature, and respiration rate.
- **Pain assessment:** Evaluate pain levels, especially in the perineal area.
- **Emotional state:** Ask about mood, anxiety, or any signs of postpartum depression.

Uterine Assessment

- **Fundal height:** Palpate the top of the uterus to assess its position and firmness, ensuring it is contracting properly and descending towards the pelvis.
- **Lochia assessment:** Check the amount, color, and consistency of vaginal discharge.

Perineal Assessment

- **Inspect perineum:** Check for any tears, lacerations, or signs of infection in the area between the vagina and anus.
- **Assess wound healing:** If stitches were placed, evaluate their condition and any discomfort.

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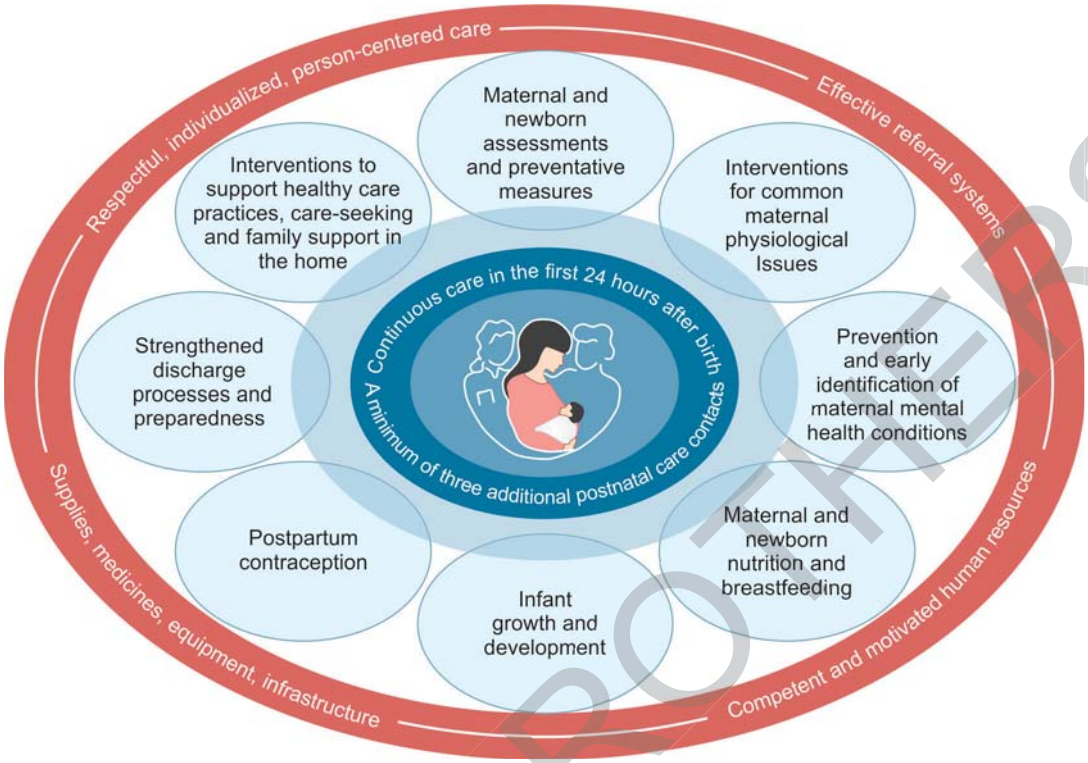

Fig. 2: Components of postnatal assessment and care.

Breast Assessment

- **Breast engorgement:** Check for breast fullness and discomfort.
- **Nipple condition:** Examine nipples for cracks, soreness, or damage.
- **Breastfeeding technique:** Assess and provide guidance on proper latch and feeding technique.

Bowel and Bladder Function

- **Urination:** Ask about frequency and ability to void.
- **Bowel movements:** Inquire about bowel function and any difficulties.

Newborn Assessment

- **Vital signs:** Check heart rate, respiratory rate, and temperature.
- **Feeding assessment:** Observe feeding cues and effectiveness of breastfeeding or bottle feeding.
- **Physical examination:** Assess the baby's head circumference, weight, length, and overall physical development.

Postnatal Care Management

- **Pain management:** Provide appropriate pain relief options as needed.
- **Hygiene instructions:** Educate on proper perineal care and hygiene practices.
- **Nutrition counseling:** Advise on a balanced diet to support recovery and breastfeeding.
- **Rest and activity guidance:** Encourage adequate rest while gradually resuming physical activity.
- **Emotional support:** Offer counseling and support to address any postpartum emotional challenges.
- **Family planning discussion:** Discuss contraceptive options and family planning needs.

Important Considerations

- **Timing of assessments:** Early postnatal assessments should be conducted within the first 24 hours after delivery, followed by regular checkups according to healthcare provider guidelines.
- **Red flags to monitor:** Be alert for signs of complications such as excessive bleeding, fever, severe pain, or abnormal vital signs.
- **Individualized care:** Adapt the assessment and care plan to meet the specific needs and circumstances of each mother and baby.

Clinical Examination

A full clinical examination should be performed within the first hour after birth.

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- The baby should be checked again before discharge.
- The mother's vital signs should be checked, including blood pressure, temperature, pulse, and respiratory rate.

Regular Assessments

- Assess the mother's vaginal bleeding, uterine tonus, fundal height, temperature, and heart rate.
- Assess the mother's micturition, bowel function, and perineal healing.
- Assess the mother's breast pain, uterine tenderness, and lochia.
- Assess the mother's cultural needs.

Follow-up Visits

- The mother and baby should be visited at home by a trained health worker within the first week after birth.
- The mother and baby should have at least four postnatal visits in the first six weeks.

Common Concerns

- Vitamin A deficiency.
- Anemia.
- Urinary retention.
- Breast complications, such as engorgement, cracked nipples, mastitis, and lactation failure.

Equipment Needed

Equipment used in postnatal care includes:

- **Scales:** A baby scale and a weighing scale for the placenta.
- **Thermometers:** A body thermometer and a thermometer for the baby.
- **Blood pressure machines:** A blood pressure measuring apparatus.
- **Stethoscopes:** A stethoscope and a fetal stethoscope.
- **Measuring tools:** A measuring tape, a wrist watch, or a timer.
- **Gloves:** Sterile or highly disinfected gloves.
- **Syringes and needles:** Syringes, needles, and capillary tubes.
- **Catheters:** Urinary catheters and sterile cord ties.
- **Antiseptic solution:** Antiseptic solution like chlorhexidine or iodophors.
- **Swabs:** Skin swabs.
- **Cotton wool:** Cotton wool.
- **Tourniquet:** A tourniquet.
- **Sterilizer:** An instrument sterilizer.

Other equipment and supplies that may be needed include:

- Clean linen.
- Light source.
- Heat source.
- Clean water supply.
- Soap.
- Nail brush or stick.
- Clean towels.
- Waste container.
- Receptacle for soiled linens.
- Container for sharps disposal.

Procedure

Steps in a Postnatal Assessment

Initial assessment (within the first 24 hours)

Vital signs: Measure blood pressure, pulse, temperature, and respirations.

Uterine Assessment

- Palpate the fundus (top of the uterus) to determine its location and firmness.
- Check for uterine involution (contraction and descent to its normal position).

Perineal Inspection

- Examine the perineum for any tears, swelling, or bruising, especially if an episiotomy was performed.
- Assess the condition of any stitches.

Lochia Assessment

Observe the amount, color, and consistency of lochia (vaginal discharge).

Bladder Function

Ask the patient if she is able to void and encourage her to urinate if necessary.

Breast Assessment

Check for engorgement, nipple condition, and any discomfort.

Further Assessment and Care (During Subsequent Postnatal Visits)

- **Emotional well-being:** Ask about mood changes, anxiety, or signs of postpartum depression.
- **Pain management:** Assess the level of pain and provide appropriate pain relief options.
- **Wound care:** Clean and monitor any perineal or incisional wounds.
- **Breastfeeding support:** Assess latch and feeding technique, offer support and guidance on breastfeeding.
- **Nutrition counseling:** Discuss dietary needs to support recovery and breastfeeding.

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- **Bowel function:** Ask about bowel movements and address any constipation concerns.
- **Contraception discussion:** Discuss postpartum contraception options if desired.
- **Family planning:** Provide information on spacing future pregnancies.

Important Considerations

Red Flags to Monitor

- Excessive bleeding.
- High fever.
- Severe abdominal pain.
- Signs of infection.
- Difficulty urinating.
- Worsening perineal pain.

Patient Education

- Proper hygiene practices.
- Importance of rest and relaxation.
- Signs and symptoms to report to healthcare provider.
- Newborn care basics.

Common Postnatal Care Interventions

- **Pain management:** Offering pain relief options like ice packs, Sitz baths, and over-the-counter medications for perineal discomfort.
- **Breastfeeding support:** Guidance on latching, positioning, and addressing common breastfeeding challenges.
- **Nutrition counseling:** Promoting a healthy diet with adequate hydration to support recovery.
- **Family planning advice:** Discussing contraceptive options based on individual needs.
- **Mental health support:** Identifying and addressing potential postpartum mental health issues.

Postnatal Visit Schedule

- **Within 24 hours of delivery:** Initial assessment, breastfeeding support, and discharge planning.
- **Day 3–5:** Check on healing, assess breastfeeding progress, and address any concerns.
- **Between 1–2 weeks:** Assess for potential complications, discuss postpartum care, and provide further breastfeeding support.
- **6 weeks postpartum:** Comprehensive check-up including pelvic exam, review of recovery, and family planning discussion.

Important Considerations

- **Cultural sensitivity:** Respecting cultural practices and beliefs related to childbirth and postpartum care.
- **Individualized care:** Tailoring care plans based on the woman's unique needs and experiences.
- **Early identification of complications:** Promptly addressing any concerning signs or symptoms.

Nurses' Postnatal Assessment and Care

Physical Assessment

- Vital signs (temperature, blood pressure, pulse, respirations).
- Fundal height assessment (uterine involution).
- Lochia assessment (amount, color, consistency).
- Perineal wound assessment (if applicable).
- Breast assessment (engorgement, latch, milk production).
- Skin integrity.
- Bowel and bladder function.

Emotional Assessment

- Mood changes (postpartum blues, depression).
- Bonding and attachment behaviors with the baby.
- Coping mechanisms and support system.

Newborn Assessment

- Apgar score (if not done immediately after birth).
- Vital signs.
- Feeding behavior (latch, sucking).
- Weight and length.
- Skin color and tone.

Education and Support

- Breastfeeding techniques and troubleshooting.
- Newborn care (bathing, diapering, cord care).
- Pain management strategies.
- Postpartum recovery expectations.
- Family planning options.

Signs and Symptoms to Report (Infection, Hemorrhage, Excessive Bleeding)

Interventions

- Assisting with breastfeeding initiation and positioning.
- Providing ice packs or Sitz baths for perineal discomfort.
- Teaching proper wound care.
- Administering pain medication as prescribed.
- Monitoring for potential complications (postpartum hemorrhage, infection, thrombosis).
- Providing emotional support and reassurance.

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Key Points to Remember

- **Individualized care:** Each woman's postpartum experience is unique, so assessments and interventions should be tailored to her individual needs.
- **Collaboration:** Nurses work closely with other healthcare professionals, including physicians, lactation consultants, and social workers, to provide comprehensive postnatal care.
- **Early identification of complications:** Nurses play a crucial role in identifying and reporting potential complications early to ensure timely intervention.

Complication

Postnatal complications can include bleeding, infections, mood issues, and other health problems.

- **Bleeding:**
  - Bleeding that soaks through more than one pad per hour
  - Passing blood clots the size of an egg or larger
  - Excessive or prolonged bleeding after delivery
- **Infections:** Urinary tract infections, uterine infections, and fever or infection.
- **Mood issues:** Postpartum depression, baby blues, anxiety, psychoses, and post-traumatic stress disorder.
- **Other health problems:**
  - Breastfeeding problems
  - Digestive issues like constipation and hemorrhoids
  - Urinary incontinence
  - Sleep deprivation
  - Fatigue
  - Sleep disorders

Conclusion

A nurses' role in postnatal assessment and care involves thoroughly evaluating a new mother's physical and emotional health following childbirth, including monitoring vital signs, assessing uterine involution, wound healing (if applicable), breastfeeding effectiveness, and emotional well-being, while also providing education and support to help her manage the postpartum period and care for her newborn effectively; this includes identifying potential complications and promptly reporting any abnormalities to the healthcare provider.

PERINEAL/EPISIOTOMY CARE

An episiotomy makes the opening of the vagina a bit wider, allowing the baby to come through it more easily. Sometimes a woman's perineum may tear as their baby comes out. In some births, an episiotomy can help to prevent a severe tear or speed up delivery if the baby needs to be born quickly. Perineal episiotomy care involves keeping the incision clean and dry, taking pain medication, and avoiding strenuous activity

Definition

Perineal care after an episiotomy involves keeping the area clean and taking pain medication. The goal is to reduce the risk of infection and promote healing.

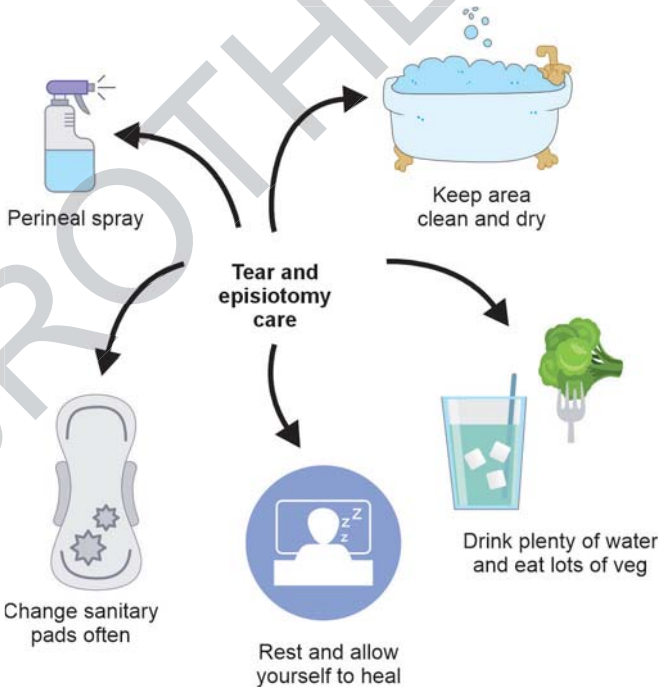

Fig. 3: Perineal/episiotomy care.

Purposes

Purposes of perineal/episiotomy care:

- **Pain relief:** To alleviate discomfort and pain associated with the incision or natural tears in the perineum.
- **Infection prevention:** Proper cleaning helps to prevent the development of infection in the wound area.
- **Promote healing:** Maintaining cleanliness and appropriate care can facilitate faster and smoother wound healing.
- **Reduce swelling:** Applying cold compresses (ice packs) can help minimize swelling in the perineal area.
- **Improve comfort:** Sitz baths with warm water can provide soothing relief and promote relaxation.

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Important Aspects of Perineal/ Episiotomy Care

- **Gentle cleansing:** Wash the area with warm water and a mild soap, always wiping from front to back.
- **Patting dry:** Do not rub the area, instead, gently pat it dry with a clean towel.
- **Ice packs:** Apply ice packs to the perineum for short periods to reduce swelling, especially in the immediate postpartum period.
- **Sitz baths:** Soaking in a warm sitz bath can be soothing and promote healing.
- **Kegel exercises:** Once comfortable, performing Kegel exercises can help strengthen the pelvic floor muscles and improve blood flow to the area.

When to Seek Medical Attention

- **Signs of infection:** Increasing redness, swelling, warmth, foul odor, or pus drainage from the wound.
- **Severe pain:** Excessive discomfort that is not relieved with pain medication.
- **Fever:** A high temperature could indicate infection

Equipment Needed

Cleaning Supplies

- **Peri bottle:** To gently cleanse the area with warm water.
- **Sterile cleansing solution:** Used to disinfect the perineal area before cleaning.
- **Cotton balls or soft washcloths:** To apply cleansing solution.

Pain Relief

- **Ice packs:** To reduce swelling and discomfort.
- **Witch hazel pads:** Can be soaked in cool water and applied to the area.

Postdelivery Care

- **Sanitary pads:** To absorb any discharge.
- **Sitz bath:** A warm bath can provide soothing relief.

For Surgical Repair (If Needed)

- **Sutures:** Different types of sutures are used depending on the tear severity.
- **Needle drivers:** To hold and guide the suture needle.
- **Forceps:** To grasp tissue for suturing.
- **Surgical scissors:** To make the episiotomy incision and cut sutures.

Procedure

Steps in perineal/episiotomy care:

Cleanliness

- Wipe from front to back after using the toilet.
- Gently pat the area dry with a clean towel.
- Use a squirt bottle filled with warm water to spray over the perineum after urination or bowel movements.
- Wash the area with mild soap and water during bathing, as directed by your healthcare provider.

Ice packs: Apply ice packs wrapped in a cloth to the perineal area for 10–20 minutes at a time, several times a day, especially in the first 24 hours after delivery to reduce swelling and pain.

Sitz baths: Sit in a shallow tub of warm water (sitz bath) a few times a day to promote healing and comfort.

Pain Relief

- Take over-the-counter pain medication like acetaminophen or ibuprofen as directed by your doctor.
- Use numbing sprays or creams if recommended by your healthcare provider.

Sitting posture: Use a donut pillow when sitting to relieve pressure on the perineum.

Hygiene Practices

- Avoid douching or using tampons until your healthcare provider gives the okay.
- Wear loose-fitting cotton underwear.

Important Considerations

- **Monitor for signs of infection:** Watch for redness, swelling, foul-smelling discharge, or increased pain, and contact your doctor if you notice any of these.
- **Follow your doctor's instructions:** Always follow your healthcare provider's specific recommendations for perineal care, including when to resume sexual activity and exercise.

Aftercare

- **Ice packs:** Use ice packs wrapped in a cloth for the first few days to minimize swelling and discomfort; apply for 20–30 minutes at a time, several times a day.
- **Sitz baths:** Take warm sitz baths (shallow baths where you sit in warm water) to soothe the area and promote healing.
- **Cleaning:** Gently clean the perineal area with plain warm water after using the toilet, patting dry with a clean towel.
- **Pain medication:** Take over-the-counter pain relievers like acetaminophen (Tylenol) or ibuprofen (Advil) as directed by your doctor.

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- **Sitting posture:** When sitting, use a donut-shaped cushion and squeeze your buttocks together to reduce pressure on the stitches.
- **Hygiene practices:** Avoid douching, tampons, and sexual intercourse until your healthcare provider gives the okay.
- **Bowel management:** Eat fiber-rich foods and use stool softeners if needed to prevent painful bowel movements.
- **Watch for signs of infection:** Contact your doctor immediately if you experience fever, foul-smelling vaginal discharge, increased redness, or severe pain.

Complications

Complications from an episiotomy can include bleeding, infection, pain, and scarring. Other complications include:

- **Tearing:** The incision can tear into the anal sphincter or rectal tissues. A midline episiotomy can cause fourth-degree tearing, which can lead to fecal incontinence.
- **Urinary incontinence:** Urinary retention can occur after an episiotomy, which can lead to urinary tract infections.
- **Painful sex:** Also known as dyspareunia, this can occur for months after delivery.
- **Pelvic floor dysfunction:** This can include urinary fistulas and inappropriate wound scarring.
- **Prolonged recovery:** The healing process can take a long time.
- **Anorectal dysfunction:** This can include fecal incontinence and urinary incontinence.
- **Pelvic organ prolapses:** This can be a long-term effect of an episiotomy.

Nurses' Role in Perineal/Episiotomy Care

- **Assessment:** Regularly assessing the perineum for redness, swelling, discharge, approximation of wound edges, and any signs of infection using the REEDA scale (redness, edema, ecchymosis, discharge, approximation).
- **Pain management:** Offering pain relief options like ice packs, Sitz baths, topical anesthetic sprays, and providing information about pain medication administration.
- **Hygiene education:** Teaching proper perineal cleansing techniques, including front-to-back wiping and using a squirt bottle with warm water to clean the area after each urination.
- **Wound care:** Applying sterile dressings to the perineal area if needed, and monitoring suture line integrity.
- **Patient education:** Explaining the importance of Kegel exercises to strengthen pelvic floor muscles and promote healing.
- **Dietary advice:** Encouraging a high-fiber diet and adequate fluid intake to prevent constipation, which can strain the perineal area.
- **Emotional support:** Addressing the patient's concerns about pain and discomfort, providing reassurance and emotional support throughout the healing process.
- **Identifying complications:** Recognizing signs of potential complications like excessive bleeding, fever, foul-smelling discharge, or severe pain, and reporting these to the healthcare provider promptly.

Conclusion

A nurse's role in perineal/episiotomy care after childbirth includes: assessing the perineal area for signs of complications, providing pain management, teaching proper perineal hygiene practices, applying ice packs to reduce swelling, instructing on Kegel exercises to strengthen pelvic floor muscles, and monitoring wound healing while educating the patient on what to look for regarding infection or abnormal healing.

BREAST CARE

Postnatal breast care includes wearing a supportive bra, washing the breasts, and expressing milk. The purpose of postnatal breast care is to manage breast changes after childbirth, primarily focusing on preventing discomfort from engorgement, promoting proper latching for breastfeeding, and addressing potential issues like plugged ducts or mastitis by ensuring adequate milk removal through frequent nursing or pumping, while also providing comfort and support with proper bra fit and hygiene practices.

Definition

Breast care involves washing, moisturizing, and examining the breasts. It can also include wearing a supportive bra, eating healthy foods, and quitting smoking.

Purposes

- **Preventing engorgement:** Frequent feeding to regulate milk supply and prevent breasts from becoming overly full and painful.
- **Proper latching:** Ensuring the baby is effectively latching onto the nipple to efficiently drain milk and minimize nipple soreness.

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Fig. 4: Breast examination technique .

- **Managing discomfort:** Applying warm compresses before feeding to stimulate milk flow and cold compresses after feeding to reduce swelling.
- **Nipple care:** Keeping nipples clean and dry to prevent cracking and irritation.
- **Supportive bras:** Wearing a well-fitting nursing bra to provide adequate support and minimize discomfort.
- **Hand expression:** Manually expressing milk to relieve engorgement or if the baby is having trouble latching.
- **Monitoring for complications:** Identifying signs of potential problems like mastitis (redness, warmth, pain) and seeking medical advice if necessary.

Principles

- **Early initiation of breastfeeding:** Begin breastfeeding within the first hour after birth to encourage early milk production and bonding.
- **On-demand feeding:** Feed your baby as often as they show hunger cues, day and night, to regulate milk supply based on demand.
- **Proper latch:** Ensure the baby latches correctly by taking a wide-open mouth and encompassing a large portion of the areola to prevent nipple soreness.
- **Positioning:** Find comfortable positions for both you and your baby to facilitate good latch and milk transfer.
- **Supportive bras:** Wear a well-fitting nursing bra to provide support and minimize discomfort, especially during engorgement.
- **Nursing pads:** Use disposable or washable nursing pads to absorb milk leaks and keep clothing clean.
- **Nipple care:** Gently wash nipples with warm water and air dry, avoiding harsh soaps or alcohol.
- **Lanolin cream:** Apply lanolin cream to cracked or sore nipples for soothing and protection.
- **Milk expression:** If needed, learn how to express breast milk using a pump to relieve engorgement or to provide milk when unable to breastfeed directly.
- **Hydration and nutrition:** Maintain a healthy diet and drink adequate fluids to support milk production.
- **Monitoring for complications:** Be aware of signs of potential issues like mastitis (redness, pain, fever), plugged ducts (lumps in the breast), or nipple damage and consult a healthcare professional if necessary.
- **When to seek professional help:** Difficulty latching or ineffective sucking, severe nipple pain or cracking, signs of mastitis, concerns about milk supply, and baby not gaining weight adequately.

Equipment Needed

- **Nursing bra:** Provides proper support and easy access for breastfeeding.
- **Nursing pads:** Absorb milk leaks from the breasts, preventing clothing stains.
- **Breast pump:** Allows for expressing milk when needed, especially if you need to bottle feed or are separated from your baby.
- **Breast milk storage bags:** Used to store expressed breast milk in the refrigerator or freezer.
- **Nipple cream or lanolin:** Helps soothe and protect sore nipples.
- **Nursing pillow:** Provides comfortable positioning for baby during breastfeeding.
- **Nipple shields:** Can be helpful for mothers with flat or inverted nipples.

Important Considerations

- **Consult a lactation consultant:** They can advise on the best equipment based on specific needs and breastfeeding goals.
- **Proper fit:** Ensure nursing bra fits well to avoid discomfort and potential milk duct issues.
- **Hygiene:** Clean all equipment thoroughly before and after each use.
- **Pump choice:** Consider if you need a single or double electric pump depending on how often you plan to express milk.

Procedure

Steps for postnatal breast care:

- **Wear a supportive bra:** Choose a well-fitting nursing bra that provides adequate support without being too tight, even when not breastfeeding.
- **Frequent breastfeeding:** Feed the baby often to prevent milk build-up and engorgement, responding to their feeding cues.

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- **Proper latch:** Ensure the baby has a good latch to minimize nipple soreness.
- **Nipple hygiene:** Gently clean nipples with plain water after each feeding, avoiding soap which can dry out the skin.
- **Hand expression if needed:** If your breasts feel overly full, gently express a small amount of milk by hand to relieve pressure.
- **Cold compress application:** Use a cold compress or ice pack wrapped in a cloth on your breasts for discomfort or engorgement.
- **Warm compress for blocked ducts:** If you suspect a blocked milk duct, apply a warm compress before breastfeeding to help milk flow.
- **Gentle breast massage:** Gently massage the breasts in a circular motion towards the nipple to promote milk flow and prevent blockages.
- **Monitor for signs of infection:** Be alert for redness, warmth, pain, or fever in the breast, which could indicate mastitis and require medical attention.
- **Air exposure:** Allow your nipples to air dry after feeding to prevent moisture build-up.
- **Consult a lactation consultant:** If experience difficulties with breastfeeding, seek guidance from a lactation consultant to address latch issues or other concerns.

Important Considerations

- **If not breastfeeding:** Wear a supportive bra and apply cold compresses to manage discomfort.
- **Skin-to-skin contact:** Even if not breastfeeding, skin-to-skin contact with the baby can be beneficial.
- **Pain management:** If experiencing significant pain, consult the healthcare provider for appropriate pain relief options.

Aftercare

- **Proper latch:** Ensure the baby is latching correctly to effectively drain milk and minimize nipple pain; consult a lactation consultant if needed.
- **Frequent feedings:** Nurse baby often to prevent engorgement and maintain a good milk supply.
- **Supportive bras:** Wear a well-fitting nursing bra 24/7 to provide adequate support and prevent discomfort.
- **Nipple hygiene:** Gently wash nipples with clean water after each feeding and air dry thoroughly.
- **Lanolin cream:** Apply a thin layer of pure lanolin to soothe dry or cracked nipples.
- **Managing engorgement:** Warm Compress: Apply a warm compress before feeding to soften the breast and ease milk flow.
- **Hand expression:** Gently hand express a small amount of milk before feeding to make latching easier.
- **Cold compress:** After feeding, use a cold compress to reduce swelling and discomfort.

If you are not breastfeeding:

- **Gentle massage:** Lightly massage your breasts to help reduce discomfort and milk production.
- **Cold packs:** Apply cold compresses to your breasts to decrease swelling and milk production.
- **Supportive bra:** Wear a supportive bra to minimize discomfort.

Nurses' Role

Key aspects of a nurse's role in postnatal breast care:

Breastfeeding Assessment and Education

- Assess the mother's latch and milk transfer during feedings.
- Teach proper positioning and attachment techniques.
- Explain the importance of frequent feedings and cues for hunger.
- Provide information about different breastfeeding holds.

Management of Common Breastfeeding Challenges

- **Addressing sore nipples:** Teach proper latch correction, nipple shields, and soothing techniques.
- **Managing engorgement:** Encourage frequent feedings, hand expression, and warm compresses.
- Identifying and addressing potential issues like mastitis.

Monitoring Milk Production

- Observe infant feeding patterns and weight gain.
- Assess milk let-down and discuss strategies to improve milk supply if needed.

Providing Emotional Support

- Listen to concerns and address anxieties related to breastfeeding.
- Offer reassurance and positive reinforcement.
- Connect mothers with lactation consultants or other support groups if necessary.

Breast Care Practices

- Teach proper hygiene practices for the breasts, including washing with warm water and air drying.
- Recommend supportive bras that fit well to minimize discomfort.

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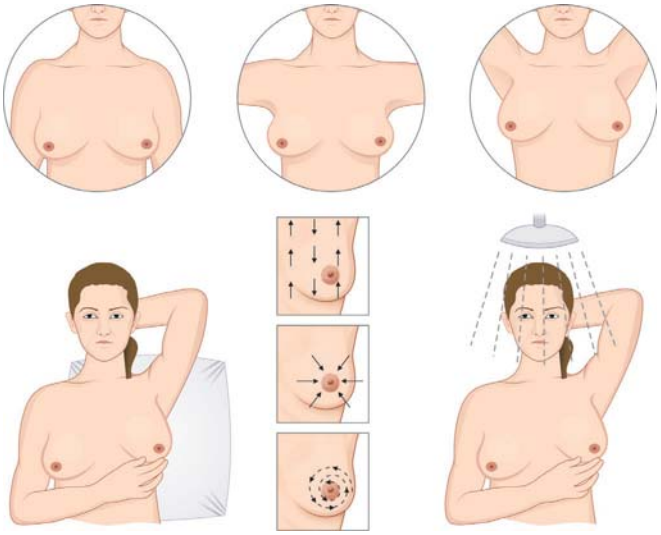

Fig. 5: Self-examination techniques and early detection of abnormal findings.

Identifying and Referring Complications

- Monitor for signs of infection or other complications like nipple trauma or cracked nipples.
- Refer to a healthcare provider if necessary for further evaluation and management.

Complications

- **Breast engorgement:** Swollen, painful breasts due to a buildup of milk when not adequately drained, often occurring in the first few days after birth.
- **Plugged milk ducts:** A localized area of breast discomfort caused by a blocked milk duct, often presenting as a firm lump.
- **Nipple cracks:** Painful fissures on the nipple, commonly caused by improper latching.
- **Mastitis:** A breast infection characterized by redness, warmth, pain, swelling, and sometimes fever, usually stemming from a blocked duct.
- **Breast abscess:** A collection of pus within the breast, a more severe form of mastitis requiring medical intervention.
- **Thrush infection:** A fungal infection affecting the nipple and baby's mouth, causing soreness and white patches.

Factors Contributing to Complications

- **Poor latch:** Baby not properly attaching to the breast, leading to ineffective milk removal and nipple trauma.
- **Infrequent feedings:** Not feeding baby often enough, causing milk buildup and engorgement.
- **Stress and fatigue:** Can impact milk production and make it harder to manage breastfeeding challenges.
- **Improper breast pump usage:** Incorrect technique with a breast pump can lead to blocked ducts.

Conclusion

A nurses' role in postnatal breast care is crucial in supporting new mothers by providing education on proper breastfeeding techniques, addressing potential complications like engorgement or sore nipples, monitoring milk production, and offering emotional support to ensure successful breastfeeding initiation and continuation.

POSTNATAL COUNSELING: DIET, EXERCISE AND BREASTFEEDING

Postnatal counseling is a type of therapy that helps new parents deal with the challenges of the postpartum period. It can help with physical recovery, emotional well-being, and adjusting to changes in family dynamics.

Definition

Postnatal counseling is a type of therapy that helps parents deal with the challenges of having a baby. It can help with physical demands, family dynamics, and feelings of depression or anxiety.



Fig. 6: Postnatal counseling.

Purposes

Postnatal counseling helps new parents navigate the challenges of the postpartum period. It can help with physical recovery, emotional well-being, and family dynamics.

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Physical Recovery

- **Nutrition:** Postnatal counseling can help ensure new mothers are getting enough calcium, magnesium, zinc, vitamin B6, and folate.
- **Hydration:** Postnatal counseling can help ensure new mothers are drinking enough fluids.
- **Rest:** Postnatal counseling can help ensure new mothers are getting enough rest.

Emotional Well-being

- **Postpartum depression:** Postnatal counseling can help new mothers cope with feelings of anxiety and depression.
- **Interpersonal relationships:** Postnatal counseling can help new mothers improve their relationships with their loved ones.
- **Coping with loss:** Postnatal counseling can help new mothers cope with the loss of a pregnancy or unsuccessful treatment cycles.

Family Dynamics

- **Adjusting to changes:** Postnatal counseling can help new mothers adjust to changes in family dynamics, such as breastfeeding and sleepless nights.
- **Preparing for fertility treatment:** Postnatal counseling can help new mothers prepare for fertility treatment.
- **Family planning:** Postnatal counseling can help new mothers discuss family planning options.

Importance

- **Postpartum depression:** Postnatal counseling can help people understand their depression and how to change their thoughts and behaviors.
- **Physical recovery:** Postnatal counseling can help with physical healing, such as rest, nutrition, and hydration.
- **Emotional well-being:** Postnatal counseling can help with managing anxiety and depression.
- **Family dynamics:** Postnatal counseling can help with adjusting to changes in family dynamics.
- **Relationships:** Postnatal counseling can help with the impact of pregnancy on relationships.
- **Fertility treatment:** Postnatal counseling can help with preparing for fertility treatment.
- **Coping with loss:** Postnatal counseling can help with coping with unsuccessful treatment cycles and pregnancy losses.

Types

- **Cognitive behavioral therapy (CBT):** A specialized therapy that can help people understand their depression and how to change their thoughts and behaviors.
- **Interpersonal therapy (IPT):** A therapy that can help with minor to moderate postpartum depression.

Equipment Needed

Postnatal counseling equipment:

Baby Assessment Tools

- Baby scale for weight measurement.
- Measuring tape for length 1.
- Head circumference measuring tape.

Maternal Health Assessment Tools

- Blood pressure monitor.
- Stethoscope to listen to heart sounds.
- Thermometer to check temperature.

Counseling Materials

- Counseling cards with relevant information on topics like breastfeeding, postpartum recovery, emotional well-being, family planning.
- Screening cards for potential issues like postpartum depression or nutritional deficiencies.
- Record book to document vital signs, assessments, and counseling provided.
- Referral forms for further specialist care if needed.
- Hygiene essentials
- Hand soap for proper hygiene.
- Clean towel to dry hands.

Important Considerations

- **Local context:** The specific equipment needed may vary depending on local healthcare practices, common postpartum concerns, and available resources.
- **Medication availability:** If providing medication as part of postnatal care, ensure proper storage and administration protocols are followed.
- **Privacy and comfort:** Create a comfortable and private space for counseling sessions.

Procedure Steps

Initial Assessment

- **Gather information:** Review the mother's medical history, birth details, and any concerns she may have.
- **Establish rapport:** Create a comfortable environment for open communication.

Physical Examination

- **Vital signs:** Check blood pressure, pulse, and temperature.

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- **Abdominal assessment:** Palpate the uterus to ensure proper contraction and check for any tenderness.
- **Perineal inspection:** Examine the perineum for signs of tearing or healing if a vaginal delivery occurred.
- **Breast examination:** Assess breastfeeding latch and milk supply.

Breastfeeding Counseling

- **Discuss breastfeeding goals:** Understand the mother's expectations and desired feeding frequency.
- **Demonstrate proper latch:** Provide guidance on positioning and latch techniques.
- **Address common challenges:** Discuss potential issues like sore nipples, low milk supply, and managing feeding cues.

Emotional Health Screening

- **Postpartum depression screening:** Utilize standardized tools like the Edinburgh Postnatal Depression Scale (EPDS) to identify potential mental health concerns.
- **Emotional support:** Listen actively to the mother's feelings and provide validation.
- **Identify coping mechanisms:** Discuss healthy strategies to manage stress and emotions.

Education on Postpartum Recovery

- **Physical recovery:** Explain the normal healing process after childbirth, including perineal care and activity restrictions.
- **Nutrition and hydration:** Emphasize the importance of a balanced diet and staying hydrated.
- **Rest and sleep management:** Discuss strategies for managing fatigue and promoting adequate sleep.

Family Planning Discussion

- **Contraceptive options:** Explore different contraceptive methods based on the mother's needs and breastfeeding status.
- **Timing of next pregnancy:** Discuss considerations for spacing future pregnancies.

Addressing Concerns and Support Systems

- **Partner involvement:** Discuss the importance of partner support during the postpartum period.
- **Community resources:** Provide information about local support groups, lactation consultants, and mental health services.

Follow-up Appointments

Regular check-ins: Schedule follow-up visits to monitor physical and emotional health, address any concerns, and provide ongoing support.

Important Considerations

- **Cultural sensitivity:** Respect the mother's cultural beliefs and practices when providing care.
- **Individualized approach:** Tailor the counseling session to meet the unique needs and concerns of each mother.
- **Collaboration:** Work with other healthcare professionals, like lactation consultants or mental health specialists, when necessary.

Aftercare

- **Regular check-ins:** Scheduled sessions with the counselor to discuss ongoing challenges, progress with coping mechanisms, and address any new concerns that may arise.
- **Emotional support:** Providing a safe space for new mothers to express their feelings openly, validating their experiences, and offering empathetic listening.
- **Education on postpartum recovery:** Explaining the typical physical and emotional changes after childbirth, including potential symptoms like fatigue, mood swings, and vaginal discomfort, to help manage expectations.
- **Coping mechanism development:** Teaching strategies to manage stress, anxiety, and overwhelm, such as relaxation techniques, mindfulness practices, and time management skills.
- **Parenting support:** Offering guidance on infant care practices, feeding techniques, sleep routines, and addressing common concerns related to baby development.
- **Partner involvement:** Encouraging partners to participate in counseling sessions to strengthen their support system and promote open communication.
- **Referral to other professionals:** If necessary, connecting mothers with healthcare providers like pediatricians, lactation consultants, or mental health specialists for further assessment and treatment.

Common Issues Addressed in Postnatal Counseling

- **Postpartum depression (PPD):** Symptoms like persistent sadness, loss of interest in activities, difficulty bonding with the baby, and feelings of hopelessness.
- **Postpartum anxiety (PPA):** Excessive worry, panic attacks, and intrusive thoughts related to the baby's well-being.
- **Trauma related to birth experience:** Processing negative experiences from childbirth and managing related emotional distress.
- **Adjustment difficulties:** Challenges related to new parenthood, such as sleep deprivation, role changes, and body image concerns.

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- **Relationship challenges:** Conflicts with partners or family members arising from the transition to parenthood.

Important Considerations for Postnatal Counseling

- **Cultural sensitivity:** Respecting the cultural background and beliefs of the new mother when providing support and guidance.
- **Individualized approach:** Tailoring counseling interventions to meet the unique needs and circumstances of each mother.
- **Early intervention:** Identifying potential mental health concerns early and providing prompt support to prevent complications.

Nurses' Role

- **Assessment and monitoring:** Regularly assessing the mother's physical health, including vital signs, wound healing, and uterine involution, as well as monitoring for signs of postpartum depression like mood swings, sleep disturbances, and loss of interest in the baby.
- **Education and support:** Providing detailed information about postpartum recovery, including physical changes, breastfeeding techniques, nutrition, and self-care practices.
- **Newborn care education:** Teaching new parents about basic newborn care, including feeding cues, diaper changing, soothing techniques, and safe sleep practices.
- **Family planning counseling:** Discussing options for contraception and family planning with the new mother.
- **Postpartum depression screening:** Actively screening for signs of postpartum depression using validated tools and providing appropriate interventions or referrals if needed.
- **Emotional support:** Creating a safe space for mothers to express their emotions, concerns, and challenges related to childbirth and parenthood.
- **Identifying risk factors:** Recognizing potential risk factors for postpartum complications, such as history of mental health issues, difficult birth experiences, or social isolation, and taking proactive measures.
- **Collaboration with healthcare team:** Consulting with other healthcare professionals, like midwives, lactation consultants, or mental health specialists, when necessary to provide optimal care for the new mother.

Important Considerations for Nurses Providing Postnatal Counseling

- **Cultural sensitivity:** Being aware of cultural practices and beliefs that may impact a woman's postpartum experience.
- **Active listening skills:** Providing attentive and empathetic listening to the mother's concerns.
- **Individualized care:** Tailoring counseling interventions to each mother's unique needs and situation.
- **Ongoing support:** Maintaining contact with the new mother through regular follow-up appointments to monitor progress and offer continued support.

Challenges

Challenges for Parents

- **Mental health:** Many women experience mental health challenges after giving birth, including postpartum blues, postpartum depression, and postpartum psychosis.
- **Physical health:** New mothers may experience physical demands, such as recovering from childbirth, breastfeeding, and lack of sleep.
- **Social support:** New mothers may experience a lack of social support, which can lead to bonding issues.
- **Nutritional deficiencies:** New mothers may not be consuming enough calcium, magnesium, zinc, vitamin B6, and folate.
- **Breastfeeding challenges:** Mothers may have difficulty coping with the stress of breastfeeding, which can lead to delayed lactation.

Challenges for Therapists

- **Burnout:** Therapists may experience burnout, especially when dealing with complex cases.
- **Limited resources:** Therapists may have limited time, manpower, and facilities, which can impact the quality of care.
- **Professional isolation:** Therapists may experience professional isolation, especially if they work independently.

Conclusion

A nurse's role in postnatal counseling is to provide comprehensive support to new mothers, including assessing their physical and mental well-being, educating them about postpartum recovery, offering guidance on newborn care, addressing potential complications, and actively screening and supporting women experiencing postpartum depression by providing emotional support and appropriate referrals when necessary; essentially acting as a key resource for new mothers during the transition to parenthood.

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PREPARATION FOR DISCHARGE

The primary objectives of a discharge plan after labor are to ensure the mother and newborn are medically stable, provide comprehensive education on postpartum care and potential complications, empower the new parents to manage their baby at home, and facilitate a smooth transition from hospital care to home care, all while addressing any individual needs or concerns the mother may have.

Definition

The purpose of discharge from the hospital after a normal delivery is to allow the mother and baby to go home when they are both healthy and can be cared for safely at home.



Fig. 7: Preparation for discharge.

Objectives

- **Medical assessment:** Thoroughly evaluating the mother's physical condition, including vital signs, uterine tone, bleeding, incision site (if applicable), and mental state.
- **Newborn assessment:** Checking the baby's health status, feeding patterns, and any potential concerns like jaundice.
- **Postpartum education:** Providing detailed information about
  - Recognizing warning signs of complications like excessive bleeding, fever, severe pain, or changes in mental health.
  - Proper breastfeeding techniques and managing common breastfeeding challenges.
  - Wound care instructions for episiotomy or cesarean incisions.
  - Perineal care and hygiene practices.
  - Newborn care including bathing, diaper changing, and safe sleep practices.
  - Postpartum recovery expectations, including physical activity and dietary needs.
- **Pain management:** Discussing pain relief options available at home.
- **Emotional support:** Addressing potential postpartum mood swings and providing information on mental health resources.
- **Family planning:** Discussing contraception options and future pregnancy planning.
- **Follow-up care:** Scheduling a postnatal check-up appointment with a healthcare provider to monitor recovery and address any concerns.

Factors that Affect Discharge Time

- **Type of delivery:** Mothers who give birth vaginally are usually discharged sooner than those who have a cesarean section.
- **Health of the mother and baby:** If the mother or baby needs extra care, they may need to stay in the hospital longer.
- **Mother's readiness:** The mother's feelings of physical capability, knowledge, and confidence in caring for herself and the baby are all considered.
- **Support:** The amount of support available from family and healthcare professionals is also considered.

Equipment

Hygiene Products

- Maxi pads (heavy flow).
- Disposable mesh underwear.
- Peri bottle.
- Witch hazel pads.
- Mild soap and washcloth.

Comfort Items

- Donut pillow.
- Ice packs.
- Sitz bath.
- Nursing bras.

Pain Management

- Over-the-counter pain medication (as prescribed).
- Topical numbing spray.

Baby Essentials

- Infant car seat.
- Receiving blankets.

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- Newborn diapers.
- Baby clothes.

Hospital supplies: Hospitals typically provide some basic postpartum supplies, but it is best to bring your preferred brands or additional items if needed.

Comfortable clothing: Wear loose, comfortable clothing that allows for easy access for breastfeeding.

Postpartum check-up: Schedule a follow-up appointment with your doctor to monitor your recovery.

Procedure

Steps in the discharge process after a normal delivery:

Medical Assessment

- **Mother:** A doctor or midwife will check your vital signs (blood pressure, heart rate), assess your uterine tone, examine your perineal area for healing, and review any stitches or lacerations.
- **Baby:** A pediatrician will examine the baby's physical condition, including weight, length, head circumference, reflexes, and feeding ability.

Feeding evaluation: Demonstration of successful breastfeeding technique, or discussion about formula feeding if chosen.

Discharge Instructions

- **Postpartum care:** Information on managing lochia (vaginal discharge), perineal care, pain management, bowel movements, and activity level.
- **Wound care:** Instructions on caring for any stitches or lacerations if present.
- **Breastfeeding support:** Guidance on feeding frequency, positioning, and potential challenges.
- **Signs to watch for:** When to contact your healthcare provider regarding fever, excessive bleeding, severe pain, or concerning baby symptoms.

Medication review: Discussion regarding any prescribed medications for pain relief, stool softeners, or iron supplements.

Baby essentials: Ensuring proper car seat installation and demonstration of safe car seat use.

Follow-up appointment scheduling: Scheduling a postpartum checkup with your healthcare provider within a few weeks.

Emotional support: Opportunity to discuss any concerns or questions regarding your recovery and baby care.

Factors that may Affect Discharge Timing

- **Complications during labor or delivery:** If there were complications, you may need to stay in the hospital for a longer period of observation.
- **Baby's health status:** If the baby requires additional care, such as monitoring or feeding support, discharge may be delayed.
- **Personal preference and support system:** Some mothers may choose to stay in the hospital longer depending on their comfort level and access to support at home.

Important Points to Remember

- **Communicate openly with your healthcare team:** Ask questions and express any concerns you have about your recovery and baby care.
- **Follow discharge instructions carefully:** Adhere to recommendations regarding activity level, diet, medication use, and wound care.
- **Seek prompt medical attention:** Contact your healthcare provider if you experience any concerning symptoms after discharge.

Delivery Teaching

Perineal Care

- Use a squirt bottle with warm water to clean the perineal area after using the bathroom.
- Apply ice packs to reduce swelling in the first 24 hours.
- Consider using witch hazel pads or a sitz bath for comfort.

Pain Management

- Take over-the-counter pain medication like ibuprofen as directed by your doctor.
- Use a pillow or donut cushion when sitting.

Hydration and Nutrition

- Drink plenty of water to stay hydrated.
- Eat a balanced diet with fruits, vegetables, lean protein, and whole grains.

Rest and Activity

- Get plenty of sleep and rest when possible.
- Start with gentle walking and gradually increase activity level as tolerated.
- Avoid heavy lifting or strenuous activities for the first few weeks.

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Breastfeeding

- If breastfeeding, ensure proper latch and frequent feedings.
- Consult a lactation consultant if you have any difficulties.

Monitoring for Complications

- Contact your doctor immediately if you experience.
- Excessive bleeding (soaking through a pad in an hour).
- Severe pain.
- High fever.
- Foul-smelling vaginal discharge.
- Signs of infection.
- Severe headaches.

Follow-up appointments: Attend your scheduled postpartum check-up with your healthcare provider to monitor healing and address any concerns.

Nurses Role

Responsibilities of a nurse during discharge after normal delivery:

Medical Assessment

- Monitor vital signs (blood pressure, heart rate).
- Check for excessive bleeding.
- Assess uterine tone and involution.
- Inspect incision site (if present) for signs of infection.
- Evaluate bowel function and urination.
- Screen for postpartum complications like deep vein thrombosis (DVT).

Newborn Assessment

- Monitor vital signs.
- Assess feeding cues and latch.
- Check for any abnormalities in appearance or behavior.
- Ensure appropriate weight gain.

Patient Education

- Breastfeeding techniques and positioning.
- Signs of potential complications (fever, excessive bleeding, severe pain).
- Perineal care and hygiene.
- Newborn care including diapering, bathing, and safe sleep practices.
- Postpartum emotional changes and coping mechanisms.
- Importance of rest and nutrition.
- When to contact healthcare provider for follow-up appointments.

Pain Management

- Provide pain relief options as needed (ice packs, pain medication).
- Teach relaxation techniques.

Emotional Support

- Address concerns and anxieties related to parenthood.
- Facilitate bonding between mother and baby.
- Offer emotional support to partners.

Discharge Planning

- Review necessary medications and dosage instructions.
- Coordinate with community services if required.
- Provide written discharge instructions and follow-up appointment information.

Important Considerations

- **Individualized approach:** Each patient's needs and circumstances should be considered when providing discharge education.
- **Cultural sensitivity:** Be mindful of cultural practices and beliefs when interacting with patients.
- **Collaboration:** Work closely with the healthcare team (physicians, midwives) to ensure comprehensive discharge planning.

Conclusion

"Discharge after labor" refers to the vaginal bleeding and discharge that occurs following childbirth, also known as "lochia", which is a mix of blood, mucus, and tissue from the uterine lining that the body naturally sheds as it heals after delivery; it typically starts as bright red and gradually becomes lighter in color over several weeks as the flow decreases.

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