

Patient Education Guide

Four Counties Health Services site 1824 Concession Drive Newbury ON NOL 1Z0 519 693-4441 Strathroy Middlesex General Hospital site 395 Carrie Street Strathroy ON N7G 3J4 519 245-1550

www.mhalliance.on.ca

CAESARIAN SECTION PRE-OP TEACHING

Caesarian Section: Procedure in which the baby is delivered through an incision in the abdominal and uterine walls.

Note: The following outlines routine procedures. It is possible that instructions and events may vary depending on individual circumstances. The hospital team will endeavor to keep you abreast of any changes.

Pre-Admission Appointment

The obstetrical physician will order lab work to be completed prior to surgery. You will be instructed when to come to Ambulatory Care and have this done. Pre-Admission paperwork will be completed during your scheduled appointment. If you are taking any medication, enquire if you are to take it on the morning of surgery.

Day Before Surgery

The Operating Room clerk will telephone you on the day prior to your scheduled surgery to confirm the time you should arrive. If you have not received a phone call prior to 5 pm, please telephone the OR Desk at 519-245-1550 ext. 5018 (or 5521 if no answer). Do not eat, drink, or smoke after midnight. This includes candy, gum and water. Try to get a good night's sleep.

Day of Surgery

Do not eat, drink, or smoke. You may brush your teeth in the morning but do not swallow toothpaste or water. Take a shower before coming to the hospital, but do not shave body hair. Do not use perfumes or powders. Remove all jewelry, make up, and nail polish. You may wear eyeglasses. If you wear contact lenses, bring your case so that they can be removed. One support person may accompany you into surgery.

We will make every effort to start your surgery at your scheduled time. However, due to the unpredictable nature of childbirth, there is a possibility of a delay in your surgery start time if emergent, unscheduled surgeries must be performed. We will inform you of a change in your surgery time as soon as we know your surgery must be delayed.

You will have an Intravenous (IV) catheter and a urinary catheter inserted. An epidural or spinal anaesthesia block will be inserted in your back to numb the lower part of your body. In some cases, general anaesthesia may be used. With a spinal or epidural, you will remain awake and your support person may be present with you for the birth of your baby. If a general anaesthetic is used, your partner will not be able to stay with you for the birth but will wait in a nearby area and will see and hold your baby shortly after birth.

You will be covered by sterile drapes, your abdomen cleaned with an antiseptic wash, and an incision will be made into both your abdominal wall and uterus. The surgeon will lift the baby out, remove the placenta, and then close the incision with dissolving stitches &/or staples. Your abdominal incision will be covered with a sterile dressing.

You should not feel pain when the incision is made. You may feel some tugging or pressure when the baby is born.

Your baby will be assessed by the obstetrical team. Once the assessment has been completed they will bring your baby to you. If you are able to, the nurses will assist you with skin-to-skin bonding in the operating room. If you are not able to hold your baby skin-to-skin, your partner can do this and you will be able to hold your baby skin-to-skin once you are both stable. Skin-to-skin will help your baby's breathing, temperature, and heart rate. It can also help with breastfeeding if you plan to breastfeed your baby.

After Surgery

You will be taken to the recovery room and skin-to-skin is encouraged here. Your baby and partner will stay with you there as you are monitored by the Post Anesthetic Care Nurse for approximately 1-2 hours. The obstetrical nurse will stay to monitor the baby and help with skin-to-skin.

After recovery, you and your baby and partner will be brought to 2 South where post-surgical care and mother-baby care will continue. Your baby will room in with you. Your partner may stay with you.

Nurses will check your vital signs (blood pressure, pulse, temperature, oxygen level) and press on your abdomen to check the firmness of your uterus, observe the amount of bleeding from your vagina, and check the bandage covering your incision regularly.

You will be able to drink and eat small amounts of food after the birth if you had spinal or epidural anesthetic. Eating small amounts of food at a time and gradually increasing the amount will help prevent nausea. Try to avoid the use of straws as this can create gas pain. You will be helped to mobilize by the nurses after your anaesthesia wears off. You are encouraged to move feet and legs at least every hour while in bed. Walking around can help reduce the risk of blood clots, help you have a bowel movement, and help you feel better. Pain and nausea medication will be given as needed. You may need medications to assist bowels to move.

The catheter will be removed from your bladder approximately 12 - 24 hours after birth. The nurses will assist you with feeding your baby. This will happen within 2 hours of the baby's birth if you are able.

Discharge

Usual length of stay is 3 to 4 days.

When you go home, you will have the usual postpartum changes as with a vaginal birth, but you will have some pain where you had the abdominal incision. This may last for a few days to several weeks. Give yourself time to heal and avoid strenuous activities.

Once home, you will need plenty of rest and extra support from your partner and family for several weeks.

While in the hospital, a healthcare provider will remove the bandage covering your incision to

inspect your incision. If it is healing well, it will usually be left uncovered. It is okay to get your incision wet in the shower. Always make sure that the incision is dry after you shower, as bacteria can accumulate and cause infection if the area is left wet. If stitches are used, they are self-dissolving. If staples are used, they are removed after several days following the birth, or a staple remover is sent home with you so that you can visit your family doctor to have the staples removed.

To prevent your incision from re-opening at home, avoid the following activities in the first six weeks or until your healthcare provider says that it is okay:

- Lifting anything heavier than your baby.
- Carrying your baby in a car seat.
- Climbing stairs a lot.
- Running, jogging, jumping, or any other high-energy activities.
- Sit-ups or other activities that may cause you to strain your abdominal muscles.
- Sexual intercourse.
- Driving. If you need to brake quickly this could cause your incision to re-open.

COMMUNITY RESOURCES

Middlesex London Health Unit:

- https://www.healthunit.com/
- Phone: 519-663-5317
- Email: health@mlhu.on.ca
- Strathroy location: Inside Kenwick Mall, 51 Front St. E, Strathroy, ON N7G 1Y5

Lambton Health Unit:

- https://lambtonpublichealth.ca/
- Phone: 1-519-383-8331
- Family Health Line: Call 519-383-3817 or 1-800-667-1839 ext. 3817
- Email: publichealth@county-lambton.on.ca
- Locations:
 - 160 Exmouth St.Point Edward, ON N7T 7Z6
 - o 450 Blanche St. Petrolia ON
 - 59 King St. W. Forest ON