

Cesarean Section (C-Section)

Getting Ready to Learn About an C-section

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review this information together. Here are some good things to tell the staff:

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

Because this teaching is about your health, the staff may explain something more than once and give you information in “bite size” pieces over several days. If there is something you don’t understand **it’s okay to ask us to explain.**

What I Need to Learn About a C-Section

By the time I leave the hospital I will be able to tell the staff how I will:

1. Be active.
2. Care for my incision(s).
3. Eat in order to heal.
4. Care for my bowels.
5. Manage my pain.
6. Contact the doctor’s office with questions and/or problems.

The staff will use three questions to teach me about a C-Section:

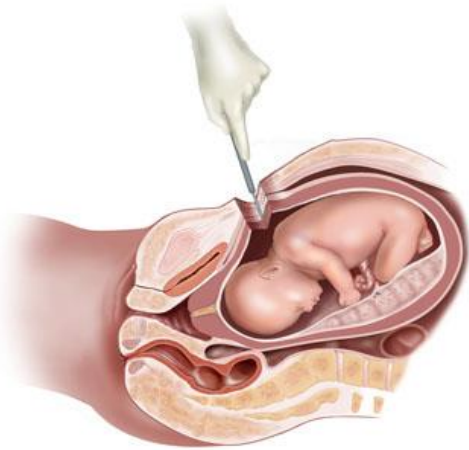
1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show what I have learned. They want to make sure that I know about my disease and how to take care of myself.

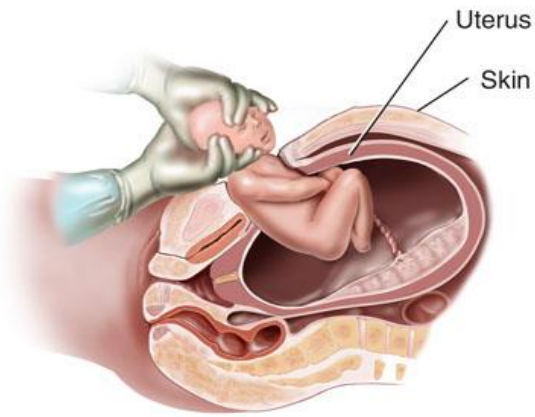
What is my main problem?

I am having or have had a C-section. A C-section is an operation to remove my baby through my abdomen and uterus. A C-section is necessary sometimes for my safety or the safety of my baby. I will have an incision on my belly. I have had major surgery. It will take time for me to recover from the surgery and the medicine I have received.

Cesarean Section

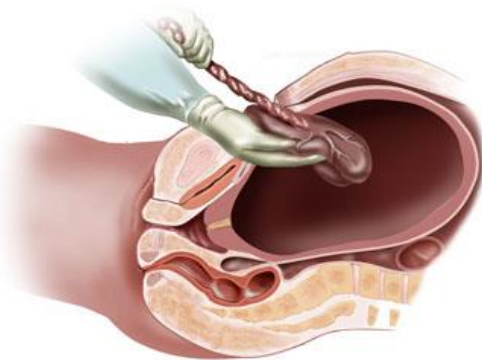


1. A cut is made in the abdomen and then another one in the uterus.

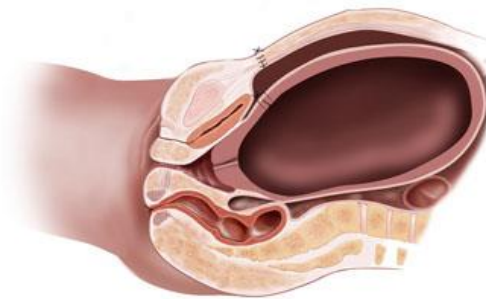


2. The baby is removed.

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3. The placenta is removed.



4. The cuts in the uterus and skin are then closed with stitches.

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What do I need to do?

I will be able to tell the staff how I will be active after a C-section (surgery).

To prevent problems and promote healing, after surgery I will:

- Ask for help before getting up the first time and as needed after that if I feel dizzy or unsteady.
- Move around every 2 hours while I am awake to prevent problems.
- Slowly increase my walking. My doctor will decide how much I should walk.
- Not drive until my doctor says I can.
- Follow my doctor's instructions on how much I can lift. My doctor will tell me when I can lift more.
- Check with my doctor on when I can resume sexual activities.
- Not do strenuous activity for 4 – 6 weeks.

I will be able to tell the staff how I will care for my incision after surgery.

To care for my incision I will:

- Wash my hands before touching my incision or bandage.
- Keep the incision clean and dry. I will not take a bath or shower until my doctor says it is okay.
- Change the dressing as directed by my doctor.
- Remove steri-strips in 7 days if I have them, if they haven't come off by themselves.
- Not use ointments, lotions or creams on or around my incision.
- Not sleep with my pets. I will keep them away from my incision and my bandage.
- Look for signs of infection.
 1. Increased tenderness or pain around the incision
 2. Increased swelling around incision
 3. New or more drainage from the incision
 4. Fever (temperature greater than 101.0° F.)
 5. Increased redness around the incision

I will be able to tell the staff what I will eat to help me to heal from the surgery.

- To help my incision heal, I can:
 - Include a protein source with each meal and snack.
 - Protein sources include: meat, poultry, fish, eggs, beans, nuts, nut butter, yogurt, cheese, milk.

- Eat at least 5 servings of fruits and vegetables per day. These foods are rich in vitamins and minerals that will help my incision heal.
- Limit added sugars such as soft drinks, energy drinks, candy, cakes, cookies, pastries, and fruit punch.
- To help keep my bowels working normally while I recover from surgery, I can:
 - Eat a balanced diet that includes plenty of fruits and vegetables.
 - Eat whole grain breads and cereals.
 - Eat brown or wild rice instead of white rice.
 - Add beans, peas, or lentils to soups and casseroles.
 - Drink plenty of fluids. Set a goal of 6 to 8 cups a day.
 - Use over-the-counter stool softeners as directed by my doctor.

I will be able to tell the staff how I will manage the pain from my surgery.

- I will take the medicine my doctor ordered to manage my pain.
- I will take the medicine before the pain gets too bad. The medicine works best if I take it before the pain is too bad.
- I will tell my nurse or doctor if I think my medicine is not helping or if I feel I am having side effects.
- I will check with my doctor or pharmacist if I have questions about my medicine.
- I will talk with the staff about other ways I can manage pain.
 - Warm showers, baths (not until okayed by my doctor), or warm packs
 - Cool packs
 - Positioning with pillows
 - Relaxation techniques
 - _____
- I will take my pain medicine with crackers or food. This may keep me from having an upset stomach which may cause nausea and vomiting.
- I will not drive if I'm taking pain pills that make me drowsy.

I will be able to tell the staff when I will call my doctor.

Concerns to share with my doctor

- Fever greater than 101.0 F
- Generalized achiness or chills

- Abdominal incision becomes red or hot, opens or has discharge.
- Foul odor to vaginal discharge
- “Baby blues” that do not go away in 2 weeks
- Nausea or vomiting
- Chest pain
- Shortness of breath
- Pain or burning when I urinate
- Swelling, redness, or pain in my leg
- Abdominal pain or swelling that gets worse
- Constipation
- Dizziness and fainting
- Heavy bleeding from the vagina or clots larger than a lemon
- Pain or redness in breasts

Why is this important to me?

Following these directions will help me heal and keep me safe after surgery.

As part of my care I have received this education plan and:

- Delivering Your Baby at the Bronson BirthPlace – Cesarean Section
- Baby News—Caring for Yourself and Your Newborn

Cesarean Section Education Plan

Resources for Staff

- [Cesarean Birth](#)- Nursing Reference Center Plus
- [Discharge Instructions for Cesarean Birth](#)- Nursing Reference Center Plus

Teaching Tools (Items given to the patient)

- Cesarean Section Education Plan
- Delivering Your Baby at the Bronson BirthPlace – Cesarean Section
- A New Beginning – Your Personal Guide to Postpartum Care

References:

- Association of Women’s Health, Obstetric and Neonatal Nurses, & Johnson & Johnson Pediatric Institute. (2006). *The Compendium of Postpartum Care* (2nd ed.). Philadelphia: Medical Broadcasting Company.
- [Cesarean Birth](#)- Nursing Reference Center Plus
- [Discharge Instructions for Cesarean Birth](#)- Nursing Reference Center Plus
- Mattson, S., & Smith, J.E.(Eds.). 2004. *Core curriculum for maternal-newborn nursing* (3rd ed.). St. Louis, MO: Elsevier Saunders.

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Always close each teaching session with the question, “What questions do you have for me?”

*This page is intended for staff use only. Do not give to the patient. This document is not a part of the permanent medical record.