



Preparing For Your Scheduled Cesarean Birth

You are scheduled for surgery for your baby's birth: _____.

Arrival at the hospital for surgery preparation: _____.

(Please arrive on time or your surgery will be cancelled, delayed or rescheduled)

DAY BEFORE YOUR SURGERY

- Rest, eat a healthy diet and get plenty of hydration
- No smoking (This can affect your lungs during surgery)

Stop eating and drinking for the 8 hours before the surgery starting at _____.

(This includes water, chewing gum, candy and Tums. This is important to have your stomach empty during surgery. Sometimes moms feel sick to their stomachs during surgery and we don't want you to breathe in food or fluids you have in your stomach)

- You do not need to take your prenatal vitamins or iron on the day of surgery. If you are taking other medications every day, please check with your doctor about taking those medications on the day of surgery.

DAY OF SURGERY, DAY ONE

Before you come to the hospital:

- Shower using antibacterial soap and drying off with a clean towel you have not used before, the morning of your surgery. Then dress in freshly laundered clothes. (This may reduce your chance of infection afterwards.)
- Do not wear make-up, lotions, perfumes, hair products, or jewelry. (For your safety and for severe allergies of others.)
- If you have long hair, please wear hair tied back.
- All support person(s) should eat breakfast, even though you may not eat.

Once you arrive at the hospital:

- Leave all belongings for you and the baby in the car. Bring in to the hospital any paperwork we asked you to bring, cell phone, camera, and any kits for private cord blood banking. Your family will have time to get your belongings once you are settled.
- If there has been any change in your medications or health from the time of your pre-admit appointment let the nurse who is admitting you know.

- Prior to going to surgery you can expect; give urine sample, have an IV placed and an antibiotic given prior to your surgery starting, blood drawn, nurse assessment, monitoring of your baby, Anesthesiologist will visit, and you will be asked to drink an antacid.
- You will walk back to the operating room approximately 5 minutes before your scheduled surgery time. (This could change if there are other patients on the unit that have an emergency)

While you are in the operating room:

- You will be given a hat to cover your hair. Then the surgical nurse will take you into the operating room to get you settled and ready for the anesthesiologist. The nurse will put on a blood pressure cuff, oxygen sensor on finger, wires that will read your heart rate, special massaging stockings, a warm blanket and listen to your baby(s) heart rate through a machine. Most likely you will sit at the edge of the bed with your feet firmly on a stool. Your support person(s) will be brought in to sit in front of you at this time.
- One to two support people may accompany you for surgery. Before they enter the operating room, the staff will help them with shoe covers, gown, mask and hair covering.
- The Anesthesiologist will prepare you to numb the surgical area once your family/friends and doctor are in the room.
- A spinal anesthesia is the preferred method for scheduled cesarean birth. If you would like to watch a video on this, you can do that on your computer. The title is - Your Guide to Spinal Anesthesia. Type this URL into the search area: <https://youtu.be/RYccgmb97Hw>
- The nurse will ask you to curl around your baby and push out the small curve of your back to help with placement of your anesthesia. This procedure will take approximately 5-15 minutes and the nurse and doctor will help explain what is going on.
- After the spinal you will be repositioned on the surgical bed. You will begin to feel numb rapidly. We will tilt you slightly to the side. This helps both you and your baby while you are lying on your back. Your arms will lie on arm boards but they will not be strapped in any way.
- Your support person(s) will stay seated until staff assists them to a stool at the head of your bed. If at any time they should feel light-headed or dizzy we insist they do not stand but to sit immediately on the floor. We can then help them.
- The nurses will monitor your baby (before and after the spinal), place a catheter to

help you urinate, and give you warm blankets. They will wash your belly and allow the skin to dry for 3 minutes.

- A “surgical pause” will be done by the Anesthesiologist. For your safety he/she will ask everyone to stop talking while he/she reads your name, birthdate and makes sure that you and everyone in the room agrees on the kind of surgery you are having.
- Once the skin is dry, the two surgeons will step up, one on each side of your body and put a sterile blue cover over your tummy and bring it up so that there is a privacy drape and you will not be able to see the surgery. They will check with the Anesthesiologist to make sure he/she feels you are adequately numb before proceeding to deliver your baby.
- The baby will be born 5-10 minutes after the surgeons start.
- As the baby is being born, a plastic window will be opened by the Anesthesiologist to view your baby, if you wish.
- If you and baby are stable and you want to have the baby on your chest, we will place the baby skin-to-skin with you. Otherwise, your baby will be in a warmer a few feet away, within view, until stable. If you are not stable, the baby may be assessed, swaddled and handed to your support person(s).
- You can expect to be in surgery for about 1 hour total.

Returning to Your Room after Surgery:

- We strongly encourage skin-to-skin time for at least one hour and then as much as you want, during at least the first few hours. This is important for you and your baby. You will be lying fairly flat the first few hours. This helps to keep you from having low blood pressure from the anesthesia. Your nurse will help you if you are breast feeding. They will also prepare a bottle if you are bottle feeding.
- Helping manage your discomfort is a priority! Talk with your nurse if you need something for pain, nausea, or itching. Most patients can expect to have some soreness and cramping. However, the pain, nausea and itching should not keep you from being able to fall asleep, breastfeed, or carry on a conversation with family and friends. Your nurse will have you rate your pain on a scale of 1-10. 1 Being very little pain and 10 being the most pain you have ever felt. They will re-position you and give you medications to help you get comfortable.
- You may have ice chips and small sips of water in the first few hours. Then you will slowly begin to drink more and eat, as ordered by your doctor. Do not expect to eat a lot in the first 24 hours. We will be listening to your tummy to see if your bowels are making noises. Bowel noises help us know that your body is ready for more food.

- Lying in bed after surgery for a long time is not good for your lungs, muscles or bowels. We will help you to stand at the bedside within 6-8 hours and several times throughout the day and night until your catheter is removed. We want to help you get up to use the bathroom the first couple of times until you feel strong enough to do it yourself.
- We will help you, as needed, with breastfeeding. Our nurses and assistants are trained in breastfeeding and additionally lactation consultants will visit you at least once during your stay.
- Routine baby care includes footprints, security tags, medications, regular assessments, and several screening tests. We want to work with you closely to help you become independent in caring for your new baby.
- We will not immediately bathe your baby. The fluid that your baby was in and the substance on the skin is important to your baby(s) health and helps protect their skin. If your baby has a lot of hair that has fluids in it, we can wash the hair a couple of hours after birth. We will not do that if your baby is cold. Unless you request it, we will not bathe your baby during the hospital stay. You can do that when you get home.

DAY TWO AND DISCHARGE DAY, DAY THREE:

(Refer to ‘Your Passport to Home’ that we will give you)

- Your stay in the hospital will be approximately 48 hours from your baby’s birth
- You will be walking about your room and hallways, eating and drinking more normally, resting, taking pain pills as needed, and continuing to work on the skills needed to care for your baby.
- Routine baby care will include regular assessments and more screening tests and possibly baby photos. We do a baby care class every day at 10:00 a.m.
- We will make an appointment for you at our follow-up clinic, the Postpartum Care Center (P2C2) in 1-3 days following hospital discharge. This is a very important appointment for many reasons including checking baby’s health, weight, jaundice level, your health, surgical dressing, pain and any breastfeeding concerns.
- Your staples and surgical bandage will not be removed in the hospital. An appointment will be made for by the Postpartum Care Center when you have your first follow up appointment to return for bandage and staple removal.
- If you desire circumcision for your son, please ask your Pediatrician. If you use our hospital circumcision clinic, you will call the scheduling number (899-3616) to make an appointment. If appointment times are available you can have it done while you

are still in the hospital. If not, you will need to return to the hospital after you go home.

- You will make an appointment for your Pediatrician to see the baby 7-14 days after birth.
- If you have any issues or concerns during your stay and are not able to resolve them with your nurse, please ask to speak with our Charge Nurse.

Thank you for letting us share in your baby's birth and for choosing EvergreenHealth!

Pre-Admit Nurse _____

FMC Labor and Delivery 425.899.3501