

Caesarean Section

Introduction

Shortly your baby will be born at Amstelland Hospital via Caesarean section (sectio caesarea). There may be various reasons why it was decided to have this operation and the gynaecologist will inform you about this. This leaflet gives you more information about the Caesarean section. Please be aware that your personal situation may vary from the information in this leaflet.

Pre-operative consultation

Some time before the planned operation date you will be asked to attend a 'pre-operative consultation'. During this consultation you receive information from the anaesthetist about the anaesthetics you receive during the operation. A junior doctor will perform a physical examination. A nurse will also talk you through the admission procedure. You will receive an information folder about your stay at our hospital.

The operation may be planned very short in advance and you may only receive this information on the day of admission.

Day before the operation

Please telephone the Obstetrics Department after 14.00 hours on 020 - 755 7111, to check what time you should arrive at the department the next day. You go to the hospital's laboratory to have a blood sample taken.

From 24.00 hours before the operation you may no longer smoke, use alcohol/drugs or eat chewing gum. The

day before the operation you may eat and drink as you normally do, unless any other arrangements have been made with the specialist.

Day of the operation

The nurse welcomes you to the department and discusses the procedures you can expect and any questions you may have.

If your operation takes place before 14.00 hours, you are not allowed to eat in the morning. If your operation takes place after 14.00 hours you may have a light breakfast up until 08.00 hours (easily digestible bread without any butter with sweet topping, no meat or dairy products). Up until two hours before the operation you may drink clear liquid such as water, apple juice or a cup of tea (with sugar if you want).

The nurse checks your blood pressure, pulse rate and temperature. Your baby's heart rate is also checked. You are given 2 paracetamol tablets and an operation gown. When it is your turn, the nurse takes you on a bed to the operation theatre. Your partner may accompany you up to the door of the operating theatre. The anaesthetist and operating team are there to welcome you. You get an intravenous drip and will then be given the anaesthetic. This is usually an epidural. After the epidural you will get a bladder catheter. Your partner and the nurse may now enter the operating theatre. Your partner will sit on a stool next to your head. This way you will be together when your baby is born.

If you are going to breastfeed, you will get help with giving the baby the breast. You could carefully try to drink something.

In order to suppress the pain from the operation you will get paracetamol at set times. Depending on how you experience the pain, you may get some pain killers in addition to the paracetamol. Today you will remain in bed, the nurse or maternity nurse help care for you and your baby. The baby's cot will be next to your bed.

You may have your first visitors in consultation with the nurse or maternity nurse. In the evening you get an injection to prevent thrombosis. You will get this injection for a maximum of 5 days. If you go home before then, it stops.

Further course of a 'normal' caesarean
When the baby is born the paediatrician checks the baby immediately. Usually you will be able to see your baby for a little while. The nurse and your partner then take the baby to the nursing wards.
After the operation you are taken to the recovery room. If everything is in order, you will quickly return to your room at the Obstetrics department. Your baby will then be with you as soon as possible.

Further course of a 'natural' caesarean
You and your partner can watch the birth of your child when the operating shield is folded down. Once delivered your baby will be dried off and examined on the spot in view of your partner, after which it will immediately be warmly swaddled in the specially designed Hugmee and placed directly on your chest for skin to skin contact.

First day after the operation

In the morning the lab technician will take a blood sample from you. Today you may eat and drink according to your needs. The nurse will give you pain killers. The nurse or maternity nurse help care for you and the baby. Today you may get up for the first time. With the aid of the nurse or maternity nurse you try to be out of bed twice for 10 minutes each time. The bandage on your abdominal wound is removed by the nurse. If everything is going well, the intravenous drip may be removed today. The bladder catheter is removed either today or tomorrow. You can then use either the toilet or the bedpan.

Second day after the operation

Today you may be out of bed a bit more. If you want you may take a shower. Today and the days after you continue using paracetamol to suppress the pain. If you are feeling better, you can start eating more.

In the next few days you will notice that you will start feeling better more and more. You are able and allowed to do more things yourself. After the operation you will initially have some vaginal blood discharge, which is normal. You may have bowel movements again for the first time. If this is not the case you will get a tablet to make this happen. The stitches from the abdominal wound will be removed before you go home, unless they are dissolvable ones.

Discharge from hospital

If you and your baby are well, the gynaecologist will arrange when you can go home. Before you go home, the nurse will discuss the procedures concerning discharge from hospital and maternity care at home. You will receive an outpatient clinic appointment for your check-up.

At home

For the first weeks at home you must take it easy. Avoid heavy lifting and/or bending over, because these are movements where you greatly tense your pelvic floor muscles or abdominal muscles. It is normal for you to have some vaginal blood discharge initially. Use sanitary towels and not tampons for this. As long as you have blood discharge it is advisable not to bathe or swim. During your check-up at the outpatient clinic, contraception will be discussed. At home you can continue using paracetamol if necessary (maximum of 3000 mg per day).

Your maternity care at home is supported by a local midwife which is arranged by the hospital. You have to arrange maternity care yourself.

If everything is going well, you go to the outpatient clinic for your check-up after six weeks. If you have any problems before this, please contact the Obstetrics department on 020 - 755 6648.

You can also ask your midwife or family doctor about any concerns or problems.

Finally

This patient information is based on an average recovery after the operation. It is possible that your recovery will be different.

Notes on this leaflet

If any information in this leaflet is unclear or incomplete, please notify us. You can share your remarks with us via voorlichting@zha.nl.