

Cesarean section: What to expect at home

A cesarean section, or C-section, is surgery to deliver your baby through a cut, called an incision, made in your lower belly and uterus.

You may have some pain in your belly and need pain medicine for one to two weeks. You can expect some vaginal bleeding for several weeks. You will probably need about six weeks to fully recover.

It's important to take it easy while your incision is healing. Avoid heavy lifting, strenuous activities or exercises that strain the belly muscles while you're recovering. Ask a family member or friend for help with housework, cooking and shopping.

The following information gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?

Activity

- Rest when you feel tired. Getting enough sleep will help you recover.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk. Walking boosts blood flow and helps prevent pneumonia, constipation and blood clots.
- Avoid strenuous activities such as bicycle riding, jogging, weightlifting and aerobic exercise for six weeks or until your doctor says it's okay.
- Until your doctor says it's OK, don't lift anything heavier than your baby.
- Don't do sit-ups or other exercises that strain the belly muscles for six weeks or until your doctor says it's OK.
- Hold a pillow over your incision when you cough or take deep breaths. This will support your belly and decrease your pain.
- You may shower as usual. Pat your incision dry when you're done.
- You'll have some vaginal bleeding. Wear sanitary pads. Don't douche or use tampons until your doctor says it's OK.
- Ask your doctor when you can drive again.
- You'll probably need to take at least six weeks off work. How long you need off depends on the type of work you do and how you feel.
- Ask your doctor when it's OK for you to have sex.

Diet

- You can eat your normal diet. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast and yogurt.
- Drink plenty of fluids — unless your doctor tells you not to.
- You may notice that your bowel movements aren't regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you haven't had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.
- If you are breastfeeding, don't drink any alcohol.

Medicines

- Your doctor will tell you if and when you can restart your medicines. Your doctor will also give you instructions about taking any new medicines.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix) or aspirin, be sure to talk to your doctor. Your doctor will tell you if and when to start taking those medicines again. Make sure that you understand exactly what your doctor wants you to do.
- Take pain medicines exactly as directed:
 - If the doctor gave you a prescription medicine for pain, take it as prescribed.
 - If you're not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
- If you think your pain medicine is making you sick to your stomach:
 - Take your medicine after meals — unless your doctor has told you not to.
 - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Don't stop taking them just because you feel better. You need to take the full course of antibiotics.

Incision care

- If you have strips of tape on your incision, leave the tape on for a week or until it falls off.
- Wash the area daily with warm, soapy water, and pat it dry. Don't use hydrogen peroxide or alcohol, which can slow healing. You may cover the area with a gauze bandage if it weeps or rubs against clothing. Change the bandage every day.
- Keep the area clean and dry.

Other instructions

- If you breastfeed your baby, you may be more comfortable while you're healing if you place the baby so that he/she isn't resting on your belly. Try tucking your baby under your arm, with his/her body along the side you'll be feeding on. Support your baby's upper body with your arm. With that hand you can control your baby's head to bring his/her mouth to your breast. This is sometimes called the football hold.

Follow-up care is a key part of your treatment and safety.

- Be sure to make and go to all appointments, and call your doctor if you're having problems. It's also good to know your test results and keep a list of the medicines you take.

When should you call for help?

- **Call 9-1-1** anytime you think you may need emergency care. For example, call if:
 - You fainted.
 - You have symptoms of a blood clot — called a pulmonary embolism — in your lung. These may include:
 - Sudden chest pain.
 - Trouble breathing.
 - Coughing up blood.
 - You have thoughts of harming yourself, your baby or another person.
- **Call your doctor now** or seek immediate medical care if:
 - You have severe vaginal bleeding. This means that you're soaking through a pad every hour for two or more hours.
 - You're dizzy or lightheaded, or feel like you may faint.
 - You have new or more belly pain.
 - You have loose stitches or your incision comes open.
 - You have symptoms of infection, such as:
 - Increased pain, swelling, warmth or redness.
 - Red streaks leading from your incision.
 - Pus draining from your incision.
 - A fever.
 - You have symptoms of a blood clot — called a deep vein thrombosis — in your leg, such as:
 - Pain in your calf, back of the knee, thigh or groin.
 - Redness and swelling in your leg or groin.

Where can you learn more?

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- Enter **M806** in the search box to learn more on this topic