Preoperative Cesarean Birth Patient Information Brochure

Introduction
You and your obstetrical provider have determined that you will have a surgical birth, also known as Cesarean section. A few days before the birth you will be scheduled for a patient telephone interview with a nurse from Concord Hospital Pre-Surgical Testing Center. This interview should take approximately 30 minutes. During this interview the nurse will review your medical history and ask about any prior experiences with anesthesia. The nurse will also discuss ways to keep you pain free during the surgery. The two types of anesthesia used most often are spinal and general (please see the Anesthesia Information for Obstetrical Patients). We encourage you to ask questions at this time. If you wish to have a tour of The Family Place at Concord Hospital before your surgery, contact the Maternal/Child Health Educator at (603) 227-7000, ext. 3228.

Before Your Surgery
• Do not eat any food or drink any liquids after midnight on the evening before your surgery.
• Do not shave your pubic area. This increases the risk of infection.
• Remove jewelry upon admission and do not wear make-up or fingernail polish.
• Try to get a good night’s sleep.
• Plan on being in the Hospital for three days. You may be able to return home sooner if your healthcare provider feels you are ready.
• Plan to arrive at the Hospital two hours before your scheduled surgery. For example, if your surgery is scheduled for 7:30 a.m. please arrive at 5:30 a.m.

Day of Surgery
• Park in Lot E (Visitors Entrance).
• After entering the Hospital take elevator C to Level 4.
• When you exit the elevator, use the phone in the hall to notify staff of your arrival.
• A unit secretary will confirm your personal information such as address and insurance and escort you to your room.
• An identification (ID) band will be placed on your arm after confirming your name and birth date.
• The nurse assigned to you will greet you and help you prepare for your birth.
• You will need to change into a hospital gown.
• You may empty your bladder if needed.
• The nurse will connect a fetal monitor to you to monitor your baby's heartbeat and determine if you are having contractions.
• The nurse will review and complete your admission paperwork.
• You will be asked to read and sign several forms giving us permission to care for you and your baby.
• Your blood pressure, pulse, temperature and respiratory (breathing) rate will be checked.
• The nurse will start an intravenous (IV), a small tube placed into your vein, to allow us to give you fluids during the surgery.
• The hair in your pubic area will be removed using an electric shaver.
• Any medications ordered by the anesthesia doctor will be given. One medication is typically given as a small drink and others are given through the IV.
• When you are escorted to the Operating Room (OR) where your baby will be born, your partner will be directed to the OR Family Waiting Room. Your nurse will bring him/her in the OR at the appropriate time.
• Remember to bring your camera and also your favorite music.

Inside the Operating Room
• The temperature in the OR is cooler than your first room.
• To protect you from infection, your doctor and other staff members will wear gowns, hats and gloves.
• In addition to your nurse, other staff members in the OR may include: an anesthesia doctor or nurse (standing near your head); a nursery nurse to care for your baby; a doctor for your baby; another doctor, midwife or surgical technician to assist with the surgery.
• You will be helped onto the OR bed and asked to sit on the side.
• You will be given some pre-warmed blankets to keep you warm.
• The anesthesia provider will place a blood pressure cuff on your upper arm and place a probe on your finger to check your oxygen level.
• He/she will then tell you what they are doing as they give you the anesthesia to manage pain.
• If you are having spinal anesthesia you will remain sitting and asked to curl around your baby to push your lower back out. This is the best position for the spinal to be given. Your nurse will help you.
• Once the spinal anesthesia is administered, you will be asked to lay down.
• Several sticky pads will be attached to your skin on your chest and abdomen to watch your heart rate and activity.
• A gel roll will be placed under your right side to tip your uterus to the side. This allows your blood vessels to pump the blood through your body better.
• The nurse will then place a catheter, or small tube, into your bladder to empty any urine. You should not feel any discomfort at this point. The catheter will remain in place until the next morning.
• Stocking-like devices that inflate will be applied to your legs to keep your blood circulating.
• These will remain on your legs until you are able to walk after your surgery.
• You will be covered with paper “drapes” to keep the surgical areas sterile (germ-free) during the surgery.
• The obstetrical doctor will make sure your abdomen (belly) is numb prior to starting the surgery.
• Let the anesthesia doctor know if you feel uncomfortable, anxious or sick to your stomach. There are medications to relieve these discomforts.
• The nursery nurse will escort your partner into the room and have him/her sit next to you.
• You may hear music and discussions but you will be closely watched during the surgery to make sure you are safe.
• When your baby is born he/she will be given to the nursery nurse and taken to a warmer.
• The baby needs to be dried quickly to keep from getting cold.
• If the baby is healthy and no signs of stress he/she will be given to you or your partner after a brief time of observation. His/her weight, foot printing and other needs may be completed in the OR or after you return to your room.

After Your Baby’s Birth
• When the surgery is over, you and your baby will be taken to your room for recovery, which is a time of close monitoring by your nurse.
• You will have another blood pressure cuff, oxygen probe and sticky heart pads re-attached to you by your nurse. Your vital signs will be closely watched every 15 to 30 minutes over the next two to four hours.
• Limiting visitors to your partner, siblings and grandparents is strongly recommended at this time.
• If you had spinal anesthesia the nurse will be checking to see if you can first feel your legs being touched, then see if/when you can start to move them yourself.
• During this time, you can have ice chips and sometimes sips of clear fluids.
• Once your vital signs remain stable and you are moving your legs well, monitors will be removed and you will then be checked every four hours for the next two days.

• Pain relief: The anesthesia provider may have given you a long acting medication, usually morphine, if you had spinal anesthesia. This generally lasts up to 24 hours. Our goal is to keep your pain level as low as possible. We will ask you to rate your pain on a zero to ten scale, meaning zero is no pain and ten is the worst that you can imagine. As everyone is different please let us know if you are hurting so we can try to make you more comfortable. We can ask your doctor for other medications that may work better. You might be given a PCA, which is a Patient-Controlled Analgesia. This is a machine that allows you to give yourself small amounts of medication by pressing a button. The nurse will instruct you on its use but it is important to remember that YOU must use the button, not the nurse or your family, or friends.
• All medications that you are given are safe for you and your baby if you are breastfeeding.
• Your immediate family members, the baby’s siblings and grandparents are welcome to visit you as soon as you wish, however we do encourage other family and friends to wait until the regular visiting hours of 3-8:00 p.m.
• Your nurse will help you to learn how to care for yourself and your baby by using several methods including demonstrations, videos and the Newborn Channel which is available on the television in your room.
• A lactation consultant, or breastfeeding specialist, will visit you to help make sure your baby is feeding well.

Your Cesarean birth is scheduled for
__________ at __________.

Your preoperative phone call is
scheduled for __________ at __________.

Please call The Family Place at
603) 225-2711, ext. 4110
if you have any questions.