

Stimulation and Attachment

As soon as your baby is born, start talking to her or him as often as possible for stimulation. Skin-to-skin contact and carrying your baby will promote attachment.

Caring for a Newborn

Umbilical cord > It will fall off by itself between the 5th and 21st day. Wash and dry the surrounding area every day.

Bathing > Apply moisturizer to your baby; opt for mild baby soap.

Nose > Use a saline-based moisturizing solution regularly or more frequently, if necessary (such as during colds). Refer to these sites for the technique:

- santeestrie.qc.ca/mouche-bébé or
- chusj.org/en/Home, and look for nasal hygiene.

Newborn Diet

Breast milk is the best food for newborns and has many benefits for mother and baby. For breast-feeding support, contact your CLSC, Nourri-Source, or your doctor. You can also consult the Bottin des ressources en allaitement de l'Estrie at santeestrie.qc.ca/allaitement.

If you give your baby formula > Opt for iron-enriched formula. The bottle and water must be sterilized up until the baby is four months old.

Vitamin D > Promote growth and bone development by giving your baby a vitamin D supplement: one drop or 400 IU a day up until the age of one year.

Watch For

Fever > If the baby has a temperature of 38°C or more with a rectal thermometer:

- Child younger than three months: go immediately to the emergency department.
- Child older than three months: consult your doctor if the fever lasts for more than 48 h or if your baby's general state worries you.

Jaundice (icterus) > Jaundice can be normal during the first few days of life. Consult your doctor if:

- Your baby is sleepier than usual and drinks less or has little urine output.
- Your baby's bowel movements are very light in colour.
- The jaundice persists for more than two weeks of life.

Weight > Consult your doctor if your baby loses more than 10% of their birth weight or hasn't regained their birth weight after two weeks of life. If in doubt, you can have your CSLC weigh your baby.

Prevention/Safety

Sudden infant death syndrome (SIDS) > You can attenuate the risk by having your baby sleep on their back up to the age of one year. Refrain from using blankets, padded crib bumpers, stuffed toys, and other soft objects. Do not sleep in the same bed as your baby. Maintain the temperature at about 20°C and don't smoke.

Flat-head syndrome (plagiocephaly) > When your baby is awake, place them on their stomach often (with supervision). That will strengthen their neck and prevent «flat-head syndrome.» Regularly change the baby's position when in bed.

Shaken-baby syndrome and intense crying > *Never shake your baby. It could result in severe injury and even death!*

Check to see if the baby's needs are met (hot or cold, thirsty, soiled diaper, etc.). Stay calm and, if needed, put the baby in their bed and leave the room to calm yourself. Ask for help if you are afraid of losing control. Seek advice if your baby cries inconsolably or worries you.

Car safety > *Never leave your baby unattended in the car!*

Always put your baby in a seat appropriate for their age and weight. Check the seat's expiry date and that it is properly fastened, that is, facing rear for infants up to the age of 18 to 24 months. You can have the installation checked at your police station. If your baby is less than six months old, take her or him out of the seat every hour during long car trips.

Vaccination

Have your child vaccinated according to the vaccination schedule. The first vaccine is given at the age of two months. The CLSC nurse can provide more information during the postnatal visit.

Follow-Ups and References

The first follow-up will be with a CLSC nurse about two days after you are discharged from the hospital. You will need to make an appointment with the baby's doctor at between two and four weeks and at two months.

If you are worried about your baby's health, call Info-santé at 811. In case of a serious emergency, ask for help and call 911.

If you haven't already done so, get cardiopulmonary resuscitation (CPR) training from the Red Cross, Ambulance Saint-Jean or another agency so that you can intervene in the event of cardiopulmonary arrest.

Other References

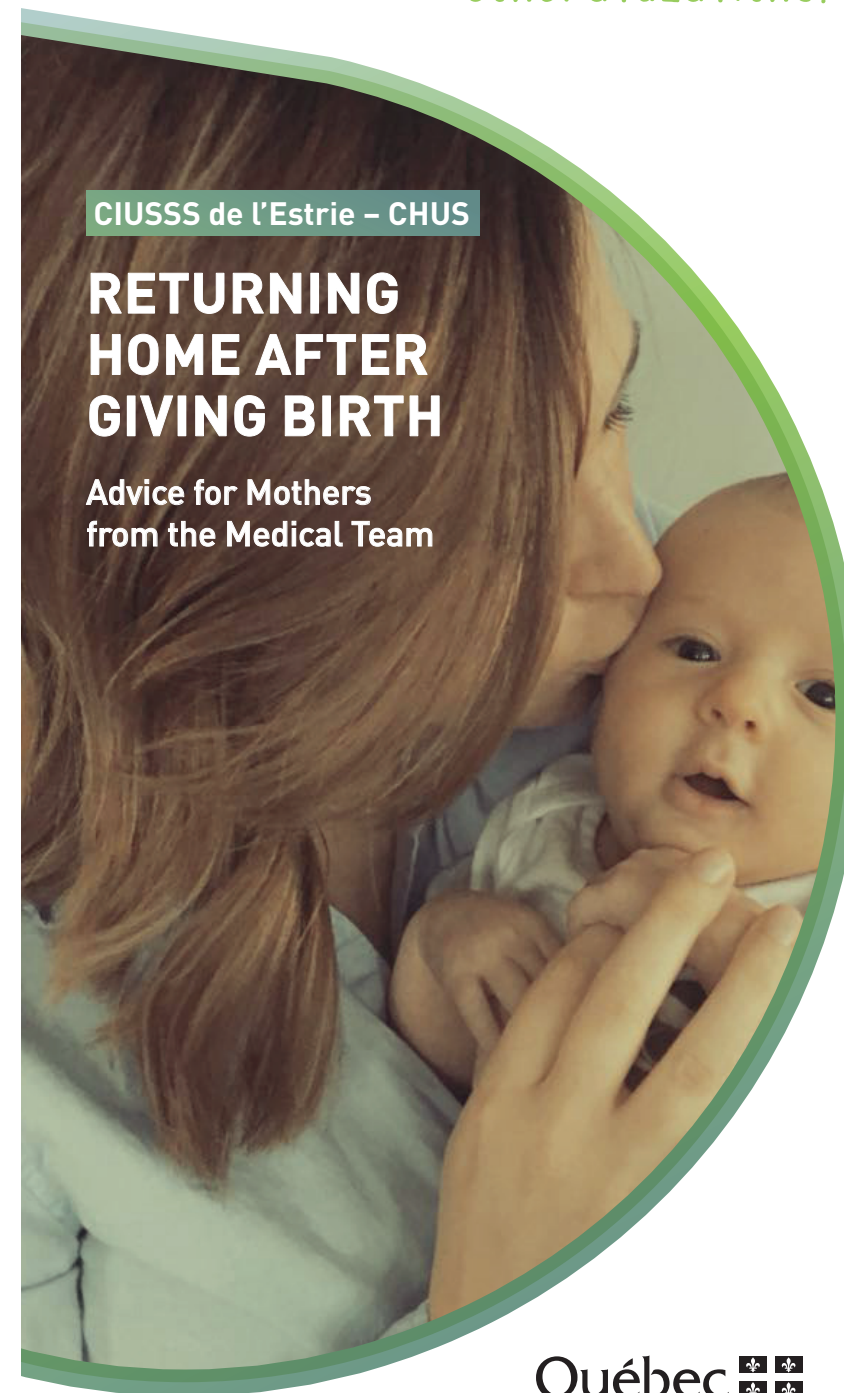
inspq.qc.ca/en/tiny-tot • naitreetgrandir.com • caringforkids.cps.ca

CONGRATULATIONS!

CIUSSS de l'Estrie – CHUS

RETURNING HOME AFTER GIVING BIRTH

Advice for Mothers from the Medical Team



Postnatal Visit and Medical Follow-Up

A nurse from your CLSC will visit you at home about two days after you leave the hospital to assess your health and that of your baby. Make an appointment with your family doctor about two months after your baby's birth for an examination. If you don't have a doctor, ask the obstetrician who cared for you during your pregnancy for an appointment.

Care for the Mother

Bleeding > Bleeding can occur for several days and up to six weeks. Use sanitary napkins, not tampons. Seek medical treatment if you have:

- Lower abdominal pain not relieved by pain medication (ibuprofen or acetaminophen), smelly vaginal discharge, and fever.
- Clots larger than an egg or increased bleeding.

Normal cramps (contractions of the uterus) > Take pain medication, if necessary.

Perineum > Dissolvable sutures should disappear within two to four weeks. Once you are back home, you can take a short bath or shower with plain water.

- If you have a burning sensation when urinating: sprinkle yourself with water or apply an anaesthetic cream.
- Prevent constipation by having regular bowel movements, drinking plenty of fluids, and eating fibre.
- Do exercises to strengthen your pelvic floor. Perineal physiotherapy can be helpful in preventing organ prolapse and urinary incontinence.

Rest

Rest is necessary during the first few weeks: take every opportunity you can to rest, such as:

- Nap while your baby is sleeping.
- Keep visits to the strict minimum the first few days.
- Ask for help, such as for household chores.

Mood and Emotions

Mood swings and crying are normal. They can be due to the baby blues, which last from several days to two weeks.

If you are sad or experience a loss of interest making it difficult to function normally that lasts more than two weeks, you could be having postpartum depression. If so, ask for help from those around you and consult your doctor.

Breast-Feeding

See over as well: *Newborn Diet*

Potential complications >

- Preventing chapping: Express a drop of milk and spread it on your nipple at the end of the feeding. You can also apply a lanolin nipple cream.
- Engorgement after milk letdown: Breast-feed often and express milk as needed. Apply ice or cabbage leaves and take pain medication.
- If your breast is an angry red and sore and if you have a fever, consult your doctor because it might be mastitis.
- If you feel a burning sensation while breast-feeding—whether or not your nipple is reddish and whether or not your baby has whitish patches in their mouth, you might have candidiasis. Consult a health-care professional for assessment and possible treatment.

Resuming Activities

Physical activities >

- You can resume regular physical activity starting two weeks after giving birth.
- You can resume training starting six weeks after giving birth, but avoid jumping, running, and strenuous abdominal exercises for the first two months.
- Having had a Caesarean section is not a contraindication for physical activities, but you do need to resume your activities much more gradually. You should not lift more than ten pounds for the first four weeks.

Sexual relations > Except if contraindicated by your doctor, you can resume sexual relations two to four weeks after giving birth. Your sex drive might be diminished and you should respect that. Use a lubricant if you experience vaginal dryness.

Contraception > Now is the time to start thinking about contraception, because you can become pregnant as soon as a month after giving birth (even exclusive breast-feeding is not a fail-safe contraceptive).

Text
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ALL NEW AND BEAUTIFUL!

CIUSSS de l'Estrie – CHUS

BRINGING BABY HOME FROM THE HOSPITAL

Advice from the
Medical Team for the Baby



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