

## Elective Caesarean Section

### Before your operation

If you smoke, try to stop or reduce your smoking in the weeks before surgery. If you continue to smoke try not to have any cigarettes the night before or the morning of your surgery, as this will improve your breathing after surgery. It will also help the healing process and reduce the risk of a chest infection. For more advice ring the NHS Free Smoking Helpline number 0800 022 4322.

For everyone, it is a good idea to go for daily walks and practise taking deep breaths. Deep breathing helps you recover more quickly from the effects of anaesthetic and the operation.

In Poole, we usually see everyone 1 or 2 days before the operation, to talk to an anaesthetist, surgeon and midwife. The anaesthetist will discuss the type of anaesthetic and pain relief which are best for you. At this pre-op appointment you will be given 3 little boxes to take home. There is one tablet in each box. This is the anti-sickness and antacid medication for you to take the evening before, and on the morning of the caesarean section.

To assist us in maintaining a clean and safe, infection free environment, please limit the amount of luggage you bring to one bag. You will be asked to unpack your belongings into the locker beside your bed and your baby's belongings into the cot. Your partner will be requested to take your bag home until you are discharged. You will need to bring a dressing gown and slippers. **Please leave valuable belongings including jewellery at home as the lockers beside your bed are not lockable.**

A car seat will be required on day of discharge. Please do not bring this in before you are discharged as space is limited.

There are often 2 or 3 elective caesarean sections booked each day. We will not know until the morning of your operation in which order they will be done. Staff will advise you of this on the morning of your operation. It is advisable to bring something to read, and for your partner to bring food and drink for himself whilst you are waiting.

On weekdays there are two obstetric theatres and teams, one for emergency cases and one for elective cases. Very occasionally two emergencies will occur at the same time and your operation may be delayed. On rare occasions your caesarean section might be cancelled if the maternity unit is too busy. You will be given a new date, usually within 2 days and you will be a priority for that day.

### Washing and Hair removal

Please have a thorough wash paying special attention to all skin folds. Please do not apply any body lotions on the day. Please remove all nail varnish and jewellery.

You will have been told at pre-clerking how much hair needs to be removed as this depends on the operation. This will be done by the staff using an electric shaver after admission to the hospital.

### Eating and drinking

As your operation is in the morning, do not have anything to eat after midnight of the day before. You can drink clear fluids up until 2 hours before the operation (until 6 AM if you are first on the list). This is defined as fluid that you can see through and must not be fizzy.

It is beneficial for your last meal to be rich in carbohydrates, such as potatoes, pasta or cereal and bread.

## Plans for going home

Please make sure you have made plans ready for your return home.

- You will need to arrange for someone to be available to collect from hospital to take you home. If you think that you will need hospital transport please discuss this with the midwifery staff as soon as possible
- You may want to organise for someone to help you at home e.g. someone to do the shopping, make meals etc.
- You may want to organise for someone to help you if you look after others e.g. children or other relatives
- If you live alone, you may wish to plan in advance to have someone stay with you for the first few days when you are at home.
- Make sure that you have enough tablets at home of your usual medications. If you are prone to constipation please have at home a supply of laxatives. These can be purchased from your local chemist or obtained from your GP

**Your operation will be on .....**

**Please come to .....**

## Day of your operation

You will be admitted to hospital on the day of your surgery (occasionally the day before).

If you have been selected for enhanced recovery, we will provide you with a "Patient Diary" which we ask you to complete during your stay. This is our way of monitoring not only your recovery but also the care we are providing you.

Your blood pressure, pulse and temperature will be checked. You will be given 2 name bands, a gown and anti-embolic stockings (to aid circulation and reduce the risk of blood clots) to wear. Your birthing partner will be given theatre scrubs and shoes to change into.

If your elective caesarean section is for breech you will have a scan prior to going into theatre, to check the baby's position. If your baby has moved to be head down the caesarean section will be cancelled.

You will go straight into the operating theatre. A midwife will be with you throughout for support. There will also be the anaesthetic and obstetric team and theatre staff.

## In Recovery

You will stay in the recovery area on the Delivery Suite for approximately 45 minutes. Your blood pressure, pulse and blood loss will be monitored frequently. If necessary, further pain relief can be given.

Your baby will be weighed and you can commence skin to skin contact and breastfeeding.

## After your operation (day 0)

### Mobilisation/ getting out of bed

Caesarean sections are routinely done under spinal anaesthesia, which makes your lower body numb and heavy, and includes a long-acting painkiller which can make your skin itchy (we can give you treatment for this if needed). You will have catheter to pass urine and the sensation will gradually return to normal within 4-6 hours. Following your operation, it is important that you perform deep breathing exercises as soon as possible. Supporting your abdomen, breathe in through your nose as deep as you can and relax the air out through your mouth slowly. This should be repeated every 15-20 minutes. This reduces your chance of a chest infection. You can initiate skin to skin contact straight way at caesarean section and can feed the baby as and when required.

If you feel well enough you may sit out in the chair after 6 to 8 hours. The midwifery staff will support and encourage you. Sit out for up to two hours before having a rest on the bed again.

**Formation of blood clots** – There is a small risk of blood clots forming in the veins in your legs and pelvis (deep vein thrombosis) after any operation. These clots can travel to the lungs (pulmonary embolism) which could be serious. You can reduce the risk of clots by:

- being as mobile as you can as early as possible after your operation
- doing exercises when you are resting, for example ☺
  - pump each foot up and down briskly for 30 seconds by moving your ankle
  - move each foot in a circular motion for 30 seconds
  - bend and straighten your legs – one leg at a time, three times for each leg.

To help prevent blood clots you will be given support stockings to wear and will be given an injection of medication called Dalteparin under the skin.

### Eating and drinking

It is important that you drink unless you feel sick, and you can start drinking After leaving recovery. A few hours after your operation you can start to eat if you wish. The midwife will guide you. You should aim to eat your evening meal sitting in the chair not on the bed. This will help to prevent indigestion and trapped wind.

### Pain control

Good pain control improves your recovery as you can walk about, breathe deeply, eat and drink, feel relaxed and sleep well. You will be given pain killers by mouth which help in different ways.

The anaesthetist will discuss these options with you before the operation

### Feeling sick

After your operation you may feel sick or may vomit. This is usually caused by the anaesthetic or drugs used. You will be given medication during your operation to reduce this, but if you feel sick please speak to your midwife who will be able to give you something.

### Tubes and drips

Whilst in theatre a tube (catheter) may be placed into your bladder so that your urine output can be measured. This will be taken out 10-12 hours after the operation.

You will have a drip put into your arm and fluid will be given through this to ensure you do not become dehydrated. This will be stopped as soon as you are drinking.

### Monitoring

We will ensure you are eating, drinking and walking after your operation.

While you are in hospital we will check your blood pressure, pulse and temperature regularly. We will also check how much fluid you are taking in.

## Support with your Baby

We will also help establish feeding of the baby either breast or top up feeds. The baby doctor in theatre or on the ward round will examine the baby. All babies get a full examination by either a specially trained midwife or a neonatal practitioner.

Babies don't need a lot but it is good to have some essentials in the house before your operation so you don't have to go shopping straight away after discharge from the maternity unit.

Regardless of your chosen method of feeding the maternity staff will support you with feeding your baby. It is good to prepare yourself and reading the yellow leaflet 'Off to the best start' will help with preparing yourself for breastfeeding.

*Please note we do not provide formula milk.*

## Visiting

Visiting hours are between 2pm and 4pm in the afternoon, and 7pm and 8pm in the evening. 2 visitors per person are allowed at any one time (including your birthing partner). No children under 12 years except your own. Please note, on the day of your caesarean section visiting is not allowed until the evening.

## On the first day after your operation

### Mobilisation/ getting out of bed

On each day after your surgery it is advised that, provided you feel well enough, you sit in the chair for six hours, with rests on the bed as needed. You should aim to walk the length of the ward corridor four times (about 60 meters). Meals are served and you should aim to eat it sitting in the chair not on the bed.. This will help to prevent indigestion and trapped wind.

By being out of bed in a more upright position and by walking regularly, your breathing is improved and there is less chance of you developing a chest infection or clots in your legs and your bowel function usually also recovers faster.

After you have a wash today, you should put on your normal clothes, provided you feel well enough. This helps you feel positive about your recovery.

## Eating and drinking

It is important that you eat after your operation. You should try to drink about ten to twelve drinks (about 2000ml) per day unless you feel sick. Each cup is usually about 150-200ml. You can drink a variety of non-fizzy drinks whilst in hospital.

Food and drink will help your body to help heal your wounds, reduce the risk of infection and help your overall recovery.

## Pain or feeling sick

It is important that your pain is controlled so that you can walk about, breathe deeply, eat and drink, feel relaxed and sleep well. You will be offered regular pain killer tablets to take by mouth to keep you comfortable.

You will be offered medication to prevent you from feeling sick. It is important to relieve sickness in order to allow you to feel better so that you can eat and drink normally which will aid your recovery. If you are in pain or feel sick please inform the nursing staff.

## Trapped wind

Following your operation your bowel may temporarily slow down causing air or 'wind' to be trapped. This can cause some pain or discomfort until it is passed. Getting out of bed and walking around will help. Peppermint water may also ease your discomfort. Once your bowels start to move, the trapped wind will ease.

## Tubes and drips

If you are drinking well the drip will usually be removed in the morning.

This will enable you to walk about more easily. You will be able to use the bathroom on the ward.

## Monitoring

Your blood pressure, pulse, temperature, fluid balance will be measured. . Please continue to complete your diary.

## Discharge

Please make sure that everything is in place ready for you to go home. You will need to ensure that someone is able to collect you to take you home and that someone is at with you when you are first discharged. All discharge medication will be ready in the morning.

## After Going Home

**On the next day at home, you will have a visit from a community midwife to do routine checks, answer any of your questions and debrief you about the operation. You will need to wear your support stockings at least for week.**

**Applicable to women in Enhanced Recovery Programme only:** You will be visited by a Maternity Care assistant (MCA) or midwife in the evening at home on day after caesarean section to help you breast feeding and any other problems you may have. Until Day 5, if you have any concerns or problems please call the number listed below (not your GP). If it is an emergency, please ring 999 as usual.

## Contact Details

Any Questions please contact ---Postnatal Ward to speak to the midwifery staff

**Direct Enhanced Recovery Postnatal Hotline 24 hour Telephone:** 01202-424519 & 01202-443257

## Contact details

**Maternity**

**01202 442308**

[www.poole.nhs.uk](http://www.poole.nhs.uk)

Author: P Eedarapalli, Consultant Obstetrician & Gynaecologist

Date: October 2014

Review date: October 2017

Version number: 1

Ward sister/head of department: Sandra Chitty, Head of Midwifery

**We can supply this information in other formats, in larger print, on audiotape, or have it translated for you. Please call the Patient Advice and Liaison Service (PALS) on 01202 448499, text 07758 272495 or email [pals@poole.nhs.uk](mailto:pals@poole.nhs.uk) for advice.**

**If you wish to make any comments or to ask about any research evidence used to write this leaflet, please contact the Patient Experience team confidentially: phone 01202 448003, write to the Health Information Centre, Poole Hospital NHS Foundation Trust, Longfleet Road, Poole BH15 2JB, or email [healthinfo@poole.nhs.uk](mailto:healthinfo@poole.nhs.uk).**