

# C-Section Informational Packet

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## Preoperative Patient Checklist – C-Section

1. You are scheduled for a C-Section with Dr. \_\_\_\_\_ on \_\_\_\_\_
- You will be contacted before 8:30 p.m. the evening prior to your surgery date. If you have not received a call, or have other questions, please contact the appropriate medical center below:
  - Walnut Creek Medical Center Labor & Delivery at [\(925\) 295-5200](tel:9252955200)
  - Antioch Medical Center Labor & Delivery at [\(925\) 813-6820](tel:9258136820)
- Important information
  - A. You may eat food up until 8 hours before your scheduled arrival time, unless directed otherwise by your surgeon.
  - B. Start drinking the carbohydrate drink recommended by your surgeon 2 hours before your arrival time.
  - C. You may drink other clear liquids up until 2 hours before your scheduled arrival time. Examples include water, filtered apple juice, Gatorade, tea or coffee without creamer. Do not drink milk or orange juice.
- Preoperative Appointment  
Location \_\_\_\_\_ Dr. \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_
- Anesthesia Consultation: The Anesthesia Department will automatically review your history electronically and contact you if necessary. If needed, the anesthesia number is [\(925\) 295-4739](tel:9252954739).
- Lab: You will be given your lab orders at your preoperative appointment. You will need to have a blood test done between 24 to 72 hours but no later than 12 noon the day before your procedure at a [lab within a Diablo Service Area facility](#).  
[\(Antioch Delta Fair, Antioch Medical Center, Dublin, Livermore, Martinez, Pleasanton, San Ramon, Walnut Creek Medical Center, or Walnut Creek Park Shadelands\)](#)
- Emmi: We encourage you to view an online interactive demonstration of your procedure. Go to [www.kp.org/mydoctor](http://www.kp.org/mydoctor), and enter your doctor's name and select search. On the physician's home page, select "Tools and Classes," and then scroll down to select "Prepare for Your Procedure – Emmi."
- Blood Transfusion Information: [A Patient's Guide to Blood Transfusions](#)
- Postoperative Appointment: Your doctor will discuss any follow up appointments with you.

## Information about your Hospitalization and Discharge

It is very important while you are in our care that you get the information you need to care for yourself (or to be cared for) to return home. You can expect to be at the hospital 2 hours prior to your scheduled surgery.

Please make sure that any family members who plan to be in attendance are present when you arrive. We encourage you and your family to ask questions to improve the transition from hospital to home. Visiting hours are between 11 a.m. and 8 p.m.

## Nursing Care

Your nurse will be your caregiver, teacher, and advocate. He or she will be able to provide information and resources to help you prepare for your discharge from the hospital.

While in the hospital, your nursing care will be provided by 3 shifts of nurses. You will be assigned a nurse to ensure your needs are met.

## Discharge

Your physician will assess your condition daily to determine when you are well enough to leave the hospital. A typical hospital stay is 3 days, including the day of surgery.

Our intention is to plan on discharging you before 11 a.m. on your day of discharge. However, if for some reason other testing needs to be done or clinical monitoring is needed; you may be discharged later than 11 am.

Before you leave the hospital, your physician and nurses will give you information about your continuing recovery, medications, and follow up appointments. If you have questions, there are resources available for you.

## Transportation Home

Remember to check that arrangements for a ride home or to another health care setting are confirmed. Every intention will be made to have you ready for discharge by 11 a.m. Please arrange to have your family members available at this time to provide transportation.

If you need help arranging transportation, please let a Medical Social Worker or Continuing Care Coordinator know. Your provider will provide instructions when you will be able to drive upon discharge.

**Note:** Please notify your nurse within 24 hours of admission of the name and phone number of the person who will provide your transportation.

## When to Call Your OB/GYN after Discharge

The nurses will review home care with you. Please call your doctor if you experience the following:

- Two temperature readings of 100.4 taken 4 hours apart
- A single temperature reading of 101 or greater
- Unable to take fluids by mouth

- Vomiting after discharge from hospital
- No bowel movement within 4 days after discharge from hospital
- Separation of wound edges, drainage from wound, or large red hot expanding areas around the wound
- Heavy vaginal bleeding, filling 1 pad per hour for 4 or more hours

## Medication, Surgery Instruction, and Advance Directive Information

### Medication Information

Inform your surgery team of all medications, including herbals and over the counter medications that you take. Some drugs cause bleeding when taken prior to surgery, especially blood thinners and anti-inflammatory medications.

**Note:** Tylenol is OK

**Important:** If you are taking aspirin daily, please ask your surgery team member if you should stop this medication.

**Note:** If you have heart stents, you will be instructed to continue your aspirin.

### How to prepare your skin to prevent infections

If you're having an incision on your abdomen (for example, cesarean section, abdominal hysterectomy, or laparoscopic procedure), your cooperation is needed to ensure a successful outcome of your surgery.

Please follow these abdominal surgery instructions carefully:

- Please do not shave or wax the abdomen and pubic area for 2 weeks before your surgery.
- Remove any body piercing jewelry and leave it out until after the surgery.
- Shower or bathe the night before surgery.
- Use antiseptic wipes as instructed.
- Do not use lotions, moisturizers, or cosmetics.

**Reminder:** Please do not shave or wax the abdomen and pubic area for 2 weeks before your surgery.

### Advance Directive Information

We encourage all Kaiser Permanente members to have an advance directive (a living will) kept on file in their medical record. Complete your advance directive by visiting the Health Education Department, or if reading this form online, select the website link below:

Read the information carefully. The [Life Care Planning website](#) is designed to give you the information you need to make these important decisions.

**IMPORTANT REQUIRED PRINTING:** You do not need to print the entire kit unless you choose to. The instructions for the required legal forms are on page 11 of the Advance Health Care Directive Page-by-Page Guide.

Read the instructions carefully. You will need to print the legal forms and have those forms notarized or witnessed by a non-Kaiser staff representative.

Please make a copy, and make sure that your name and medical record number are on each page and bring the completed forms to your next appointment.

## Disability and Copayment Information

### Disability Forms Processing Information for Diablo Service Area Members

- Confirm that your physician has placed in your electronic health record an off-work form (Work Activity Status Form or WASF). It is required prior to processing disability paperwork.
- Filing your claim:
  - Log on to the EDD's website at <http://www.edd.ca.gov/Disability/> and select SDI Online, then choose SDI Online Registration and complete.
- When submission is complete, and to prevent a delay in the processing of your claim, you will need to provide the Kaiser Permanente Disability Office the following information or your claim will not finish processing:
  - Your name and medical record number.
  - Your patient receipt number provided by EDD. It will be a R10000000XXX number.
  - You can send the above information to the Kaiser Permanente Disability Office one of three ways:
    - Email to: [DSAROMI@kp.org](mailto:DSAROMI@kp.org) or
    - Phone: [\(925\) 817-5661](tel:(925)817-5661) (To bypass the message line, press the 1 key) or
    - Fax to: (877) 883-5917

**Note:** If you are unable to file your claim online, please contact the disability staff by phone at [\(925\) 817-5661](tel:(925)817-5661), or visit the intake window at your facility.

**Note:** If you need to file for FMLA or Private Disability, please contact the disability staff office at [\(925\) 817-5661](tel:(925)817-5661).

**Note:** The State Disability Office can take up to 3 to 4 weeks to process your claim.

**Note:** For the status of your processed claim, after 5 days contact the State Disability Office at [1 \(800\) 480-3287](tel:1(800)480-3287).

## Copayment Information for Diablo Service Area Members

This is to alert you to the fact that you may have a fee for your surgical procedure depending upon your coverage. The clinic does not have access to the actual charges a surgical procedure may incur. If you have any questions about these fees, please contact the patient financial advisor for your facility.

- Dublin, Livermore, Park Shadelands, Pleasanton, San Ramon, Walnut Creek: [\(925\) 295-5890](tel:(925)295-5890)
- Antioch Medical Center (Deer Valley), Delta Fair, Martinez: [\(925\) 813-3114](tel:(925)813-3114)

Questions about Kaiser Permanente's financial assistance program, please call: [1 \(866\) 399-7696](tel:1(866)399-7696)

## Recovery after C-Section

During recovery you should avoid movements that strain your abdominal muscles and incision. Protect your incision as well as your low back by using good body mechanics similar to those you used during pregnancy. As well, you can support your back during movement by tightening the pelvic floor (Kegel) muscles and gently contracting the abdominal muscles.

Our goal at the time of discharge is for you to be feeling that you are coping effectively your pain, often with the assistance of medications. While some pain is to be expected at discharge, we will work with you to create a safe, effective plan for treating your pain during your transition home.

## Scar Mobilization

Massage gently along and across the length of the scar to promote mobility and uniform healing.

## Body Mechanic Tips

- Breathe normally during movement; avoid breath holding.
- **To Get into Bed:** Sit at edge of bed, using your arms lower yourself to your side as you bring your legs onto the bed. Roll to your back with knees held hip width apart rather than separating legs.
- **To Get Out of Bed:** Roll to your side, lower legs over the edge of the bed and push with your bottom elbow and top hand against the bed to sit upright.
- **To Get Out of a Chair:** Come to the edge of the chair, keep your knees somewhat apart and squeeze buttocks as you stand up.
- **To get in a Car:** First sit down on the seat by backing in keeping both knees together, then pivot to get into car.
- Bend your knees and hips when lifting. Avoid bending from the waist.
- Avoid using one leg forcefully as this can put stress on abdominals and pelvic girdle. For example, do not use one leg to shove items on the floor; or stand on one leg and put the other over a baby gate.
- Hold a pillow against your abdomen if you should cough or sneeze to help decrease discomfort.

## Regaining Abdominal Strength in the first 6 weeks

- Many of the body, hormonal, and postural changes that occur during pregnancy linger on several weeks after delivery. Because of this and the added fatigue of newborn care you need to gradually return to your regular exercise routine. To help your body transition use the same body mechanics you did when you were pregnant.
- Contract your pelvic floor and abdominal muscles when lifting to help protect your low back as well as to begin to re-strengthen these areas. (Do this by gently tightening the vaginal and rectal muscles as if to hold in urine and gas while also pulling in abdominal muscles as if to zip up jeans. Breathe normally as you do this.)

- Try to do 10 pelvic floor contractions (squeeze the vaginal rectal muscles as if to hold in urine and gas) holding 5-10 counts while feeding your baby. Pelvic floor exercise in the immediate postpartum period helps re-strengthen these muscles, supports the spine and pelvic girdle, and may help prevent urinary incontinence.
- Resume walking in 15 minute increments and gradually transition to brisk walking as your energy level returns.

## 6 to 12 Weeks Post-Partum

At 6 weeks post-partum you can start to resume your regular exercise routines. Because you are still recovering from delivery you should exercise for less time and at a lower intensity than pre-pregnancy and gradually increase to your regular routine.

### The following exercises will help you re-strengthen the lower abdominals

**Please note:** If you should become short of breath or dizzy while lying on your back please stop the exercise immediately and let your doctor know about your symptoms.

- **One Leg Heel Slide:** Lay on your back with knees bent. Contract pelvic floor and abdominal muscles as you slowly slide heel away from body and straighten leg. Relax. Contract muscles again as you slide heel back to start position. Begin with 10 on each side and work up to 20-30.
- **Single Leg Fall Out:** Lay on your back with knees bent, hip width apart and feet flat on floor. Breathe in, as you breathe out do a pelvic floor contraction and let one leg fall slowly out to the side. Relax. Do a pelvic floor contraction and bring leg back to starting position. Begin with 10 repetitions on each leg and work up to 20 repetitions. When you can do 20 with each leg begin to do both legs together. Start with 10 and work up to 20.
- **Hands and Knees:** On your bed get into a hands and knees position so that you are square, hands under shoulders and knees below hips. Allow back to relax into normal curve. Breathe in and as you breathe out do a pelvic floor contraction and try to gently pull abdominal muscles toward spine. Begin with 10 repetitions, hold 5. Work up to 2 sets of 10 repetitions, hold 10.
- It is important to continue with Kegel exercise (pelvic floor contractions). A strong pelvic floor will help prevent urinary incontinence, organ prolapse, and will contribute to sexual satisfaction.
- Continue to use good posture and body mechanics as this will prevent abdominal and low back strain as well as protect against organ prolapse. Be careful to support baby well during nursing. Bring baby to your breast as opposed to leaning forward as you nurse. Support your low back and abdominals by using good body mechanics when transferring baby in and out of car.
- Continue scar mobilization if your C-section scar is painful or stiff. Massage gently along and across the length of the scar to promote mobility and uniform healing.