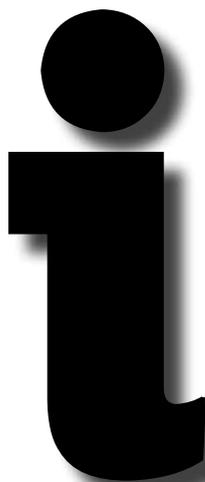


# ***Enhanced Recovery after Elective Caesarean Section: Patient Diary*** (page 1 of 2)



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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

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This is a guide to the events that happen in the last few weeks before your baby is born by elective caesarean section, and in the first few days afterwards whilst you are in hospital. Each birth will be slightly different and tailored to you, but these are the key steps that will happen. Most of the steps will be done by your midwives and doctors but there are some that you are asked to do to help you recover faster and better. These are highlighted in bold. Please read this leaflet. If you have any questions please ask!

## **Antenatal**

34 to 38 weeks **Haemoglobin check** (this is a blood test to see if you are anaemic).

If you are anaemic you will be offered some iron tablets or sometimes an iron infusion (a drip of liquid iron).

Consent forms signed in clinic with a doctor.

You will be given a tablet to take on the morning of the operation. This is to settle the acid in your tummy - it's called Ranitidine.

## **Day of the surgery**

2.30am – 6.30am **Drink clear fluids (water, black tea or coffee, clear squash)** It's important to stay well hydrated.

6.30am **Take the Ranitidine tablet with a large glass of water.**

8am **Arrive on the labour ward.**

8am Be welcomed by your midwife, anaesthetist, surgeon to prepare you for your caesarean section.

The anaesthetic team will review your medical record and discuss the anaesthetic and pain relief options.

The surgical team will also review your medical record with you and answer any questions. If you are keen for skin to skin as early as possible, discuss this with the team.

## **Theatre**

Check in, drip and anaesthetic performed.

Birth partner joins us in theatre.

Baby is born!

Skin to skin when safe if possible, as you wish.

## Recovery

Up to 30 minutes  
after the operation

General checks on your health (BP, pulse, temperature).  
The nurses will check you are not in pain.

Skin to skin with baby is encouraged in recovery and breast feeding support given if you need it.

Up to 4 hours after  
the operation

The intravenous fluids can be taken down when the bag of fluid is empty.

You can eat as soon as you are hungry (tea and toast/ sandwich) or if you are unable to eat or not hungry then start chewing gum.

## After the operation

### Day 0 - On the Postnatal ward

Up to 4 hours after  
the operation

**Move around in the bed before your legs fully regain their feeling.**

Regular pain relief and breast feeding support.

**Can drink freely** (avoid fizzy drinks).

6- 8 hours after the  
operation

**Sit out in the chair.**

**Start walking around. You can carry your catheter bag with you (hook it into your pyjama bottoms/pants!)**

8-12 hours after the  
operation  
midnight

**Aim to eat normally (sitting in chair) by the evening.**

Bladder catheter out at midnight (if the spinal anaesthetic was carried out by 12 noon).

### Day 1

6am

Bladder catheter out at 6am (if the spinal anaesthetic was carried out after 12 noon).

You need to have passed urine 3 times of at least 200mls before you can go home.

You will be given regular pain killers.

**Walk around, wash, be mobile! If you need pain killers to do this please ask. It is really important.**

Baby check.

Supply of pain relief tablets to take home.

2pm onwards

Discharge home.

### Day 2, 5, 7 and 10

Community midwife and health visitor reviews.