



# Caring for yourself after a vaginal birth

A guide for patients and care partners



The Ottawa  
Hospital

## **Disclaimer**

This patient education resource is not medical advice. It shares common health facts, advice and tips. Some of the information provided in this resource may not apply to you. Please talk to your doctor, nurse or other health-care team member to see if this information will work for you. They can also answer any questions or concerns that you might have.

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# Recovering after delivery

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Recovering from a vaginal birth usually takes around 6 weeks. These 6 weeks are an important time to allow your body to heal from the birth.

- ✓ Every person heals at a different speed. Things like ability to rest, complications from giving birth, and having other young children at home will affect your healing time.
- ✓ You can eat and drink normally after you give birth. Foods with lots of **iron** (e.g., meat, fish, seafood, eggs, lentils, granola and dried fruits) and **fiber** (e.g., seeds, bran, oats, vegetables, apples, and almonds) may help you recover more quickly.
- ✓ Gentle exercise like walking can help you to recover.
- ✓ Try to be as active when you get home as you were in hospital. You can gradually be more active as you feel comfortable.
- ✗ Don't do tasks or activities that are hard on your body. Ask for help to lift heavy items, including older children or car seats.

# Bleeding

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It is normal to have bleeding from your vagina after a vaginal birth. This bleeding is from where the placenta was attached to your uterus. The placenta is an organ that gives oxygen and nutrients to your baby when you were pregnant.

The bleeding may be heavy during the first week (like a heavy period) and may be heavier when you exercise, get out of bed in the morning, and chest/breastfeed. You might also see small blood clots on your pad. These are normal, too.

The bleeding should get lighter over the next few weeks. When it does, you can switch to regular sanitary pads. The colour of the blood will change from red to dark red or brown. Bleeding may continue for up to 6 weeks.

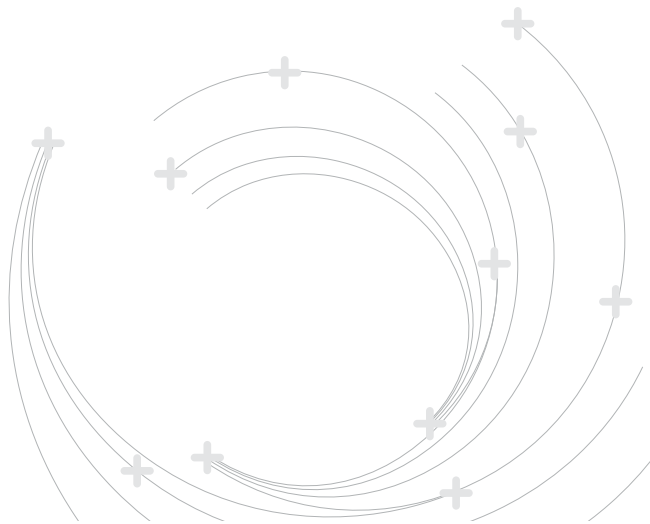
## Tips to help with bleeding after a vaginal birth:

- ✓ Have maternity pads or large sanitary pads ready at home.
- ✗ Avoid using tampons for the first 6 weeks after birth.

# Vaginal tears

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- During labour, your perineum (the area between your vagina and rectum) may stretch and tear, which can be painful.
- Your pain may be worse if you had an episiotomy. An episiotomy is when your doctor or midwife makes a small cut along your perineum to widen your vagina to help with delivery.
- Your doctor or midwife may close the cut or tear with stitches. The cut can take up to 6 weeks to heal.
- If they used stitches, the stitches will dissolve on their own. Follow your doctor or midwife's instructions for cleaning the area around your stitches.



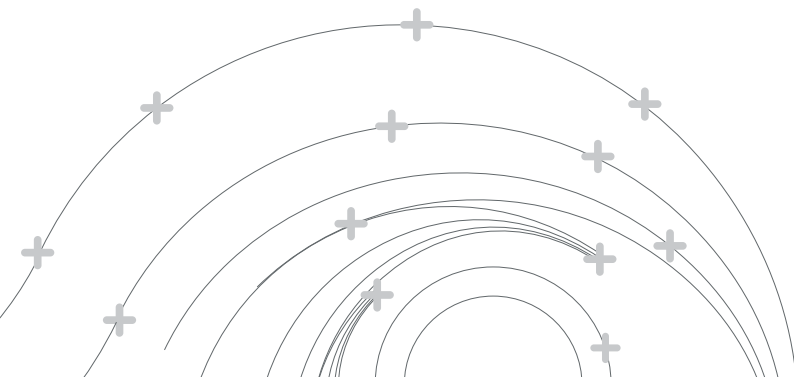
# How to manage your pain

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You may feel cramps in your stomach (like period pain) as your uterus recovers from pregnancy. Some pain in your vagina is normal and may be worse if you had a vaginal tear or episiotomy. Breast/chest feeding patients may also have nipple or breast/chest pain.

Most people need pain medication for the first couple of weeks after birth to help manage their pain. Your health-care team will talk to you about the pain medications that may be right for you.

Please take your pain medication when you need it, and as your health-care provider has prescribed. If your pain does not get better, or gets worse, contact your health-care provider.



## Tips for managing your pain:

- ✓ **Cold packs:** Place a cold pack between the perineum and the sanitary pad you are wearing for about 15 minutes every few hours throughout the first 24 hours after birth. Your nurse can assist you with this.
- ✓ **Warm baths:** After 24 hours, warm water sitz baths may help reduce your pain. A sitz bath is a basin that circulates water and is placed over a toilet bowl. You can buy a sitz bath at your local pharmacy. If you feel you need a sitz bath while in hospital, please ask your nurse.
- ✓ **Alternate cool and warm:** Some patients find that switching between cold packs and warm baths helps reduce pain.



# What to avoid while recovering from a vaginal birth:

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For about 6 weeks after birth

- ✗ Do not lift anything heavier than your baby (more than about 10 pounds or 4.5 kg).
- ✗ Avoid straining during bowel movements.
- ✓ Taking medicine like polyethylene glycol 3350 (also known as PEG 3350 or Restoralax) may help with bowel movements. Follow the directions on the package. The goal is to have one soft bowel movement per day.
- ✗ Do not drive until:
  1. you can perform quick movements (e.g., step on the brakes) without hesitation  
  
and
  2. you are no longer taking pain medication or any other medication that could make you feel drowsy.

## Postpartum (after birth) follow-up appointment

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Call your doctor or midwife to make a follow-up appointment with them. The appointment with your doctor or midwife needs to be 6 weeks after you gave birth.

This is a good time to ask any questions you have about

- the birth.
- resuming sexual activity and family planning.
- future birth options if you choose to have another baby.

## Public health follow-up

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If you sign the “Authorization for Release of Maternal/Child Information to the City of Ottawa, Healthy Babies, Healthy Children Program” form, a nurse from the Public Health Unit may contact you by telephone within a few days of going home. If you do not receive a call but would like to speak to a public health nurse, call 613-580-6744. This line is open to call from Monday to Friday from 8:30 a.m. to 4:30 p.m.

If you live in Quebec, your signed authorization will be sent to the closest Centre Local De Services Communautaires (CLSC). You will be contacted by a CLSC Nurse to plan a postnatal follow-up.

## Signs to watch for

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Most people recover well after giving birth, but it's important to know the signs that something is not right with your healing. Anyone can develop a complication after giving birth.



### When to call 911

Call 911 if you have:

- Pain in your chest.
- Obstructed (blocked or difficult) breathing or shortness of breath.
- Seizures (sudden fainting, body stiffening, and/or shaking).
- Thoughts of hurting yourself or your baby.
- An allergic reaction to medication that makes it hard to swallow or breathe.



## **When to call Obstetrical Assessment Unit**

Call the Obstetrical Assessment Unit if you have high blood pressure and/or any of these symptoms:

- A headache that does not go away (often in the front of the head).
- Blurred vision or seeing “flashing lights”.
- Heartburn or feelings of indigestion.
- Pain in the right side of your abdomen underneath the ribcage, that does not go away.
- Unexpected nausea or throwing up

**These are all signs that your blood pressure might be too high. Do not delay.**

- **Obstetrical Assessment Unit:**
  - » Civic Campus 613-761-7007 or
  - » General Campus 613-737-8012.



## **When to call your doctor or midwife or go to an emergency room**

Call your doctor or midwife or go to an emergency room if you have:

- A fever of 38°C (100.5°F) or higher.
- Bleeding that is extremely heavy (e.g., soaking through a pad every hour) or large blood clots (bigger than a plum).
- A red, swollen leg that is painful or warm to the touch.
- A headache that does not get better, even after taking medication, or bad headache with vision changes (i.e.: blurred vision, spots, or any loss of vision).
- Vaginal discharge that has a bad smell.
- Worsening vaginal tenderness.
- A sore perineum (area between vagina and rectum) that is not healing.
- Difficulty with urination (peeing) or stinging that continues.

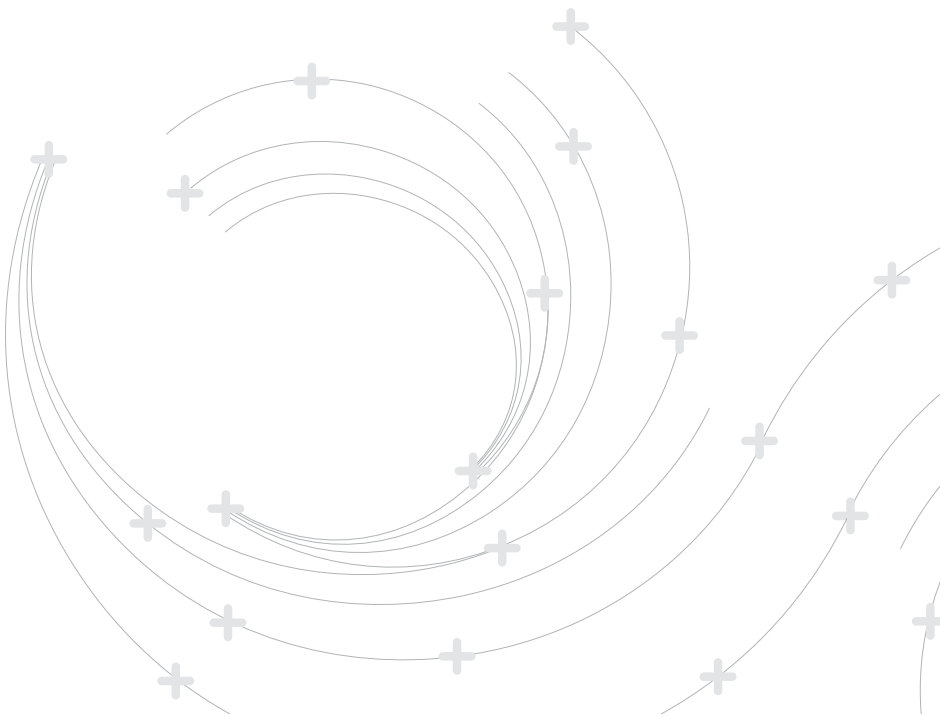
- A mild allergic reaction to medication (e.g., a rash, hives, swelling of the face or mouth).
- A painful chest/breast(s) that feels hot, tender or is red and fever or flu-like symptoms.
- Nipples that:
  - » are sore and are not getting better
  - » become reddened
  - » become shiny
  - » have small red bumps around the base
  - » are burning or itching
- Chest/breast pain that is shooting and goes into the armpit, shoulder or back and:
  - » occurs when milk starts to flow
  - » occurs after a period of pain-free chest/ breastfeeding
  - » lasts during and between feeds
- Diarrhea that does not go away or is severe or bloody.

# Your mental health matters

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Giving birth can be overwhelming. Some people may feel tearful, exhausted, isolated, worthless, unable to cope, have difficulty sleeping, or have loss of appetite. If these feelings and symptoms last more than 2 weeks, they could be signs of **postpartum depression**.

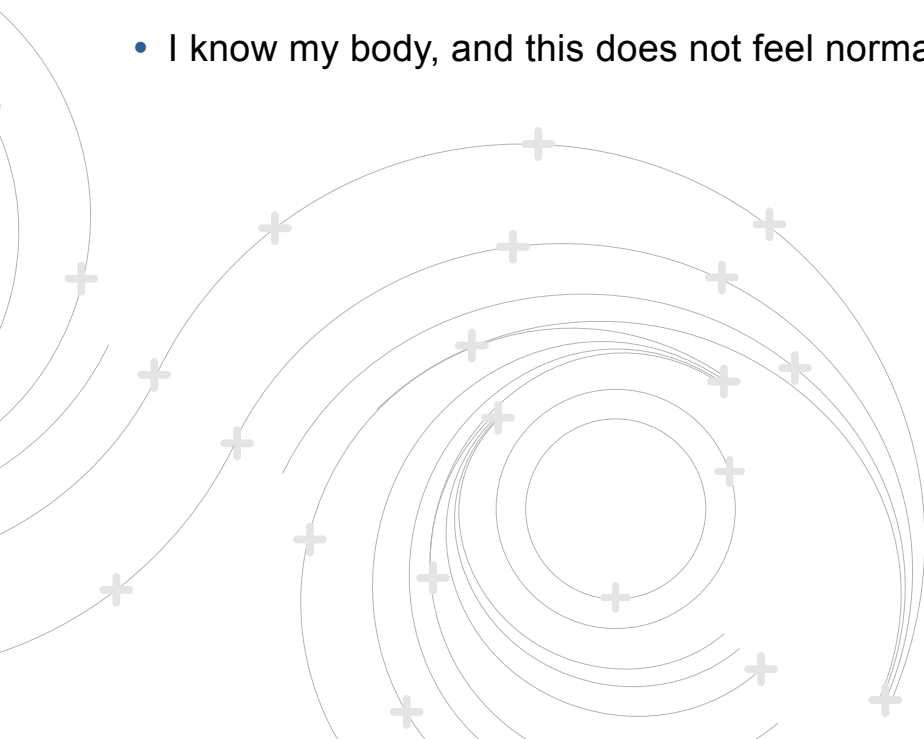
Talk to your doctor or midwife about mental health and if you are having any symptoms described above. Also ask about mental health resources (i.e., community support groups and treatments).



# Helpful phrases to help start the conversation with your doctor or midwife

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- I was recently pregnant. My delivery date was \_\_\_\_\_. I am having serious concerns about my health that I would like to talk to you about.
- I have been having \_\_\_\_\_ (symptoms) that feel like \_\_\_\_\_ (describe in detail) and have been lasting \_\_\_\_\_ (number of hours/days).
- I know my body, and this does not feel normal.







**For more patient information from the Mom Baby Unit please scan this QR code or visit The Ottawa Hospital's Obstetrics, Gynecology, and Newborn care website :**

<https://www.ottawahospital.on.ca/en/clinical-services/deptpgrmcs/departments/obstetrics-gynecology-and-newborn-care/having-a-baby/patient-resources>



## Notes

**The last dose of pain medication I got at the hospital:**

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Was I given a new prescription or was an old prescription renewed?

☐ Yes    ☐ No prescription

**My Appointment at the Monarch Clinic:**

Date: \_\_\_\_\_

Time: \_\_\_\_\_



## Do you have any feedback about this education resource?

Is it welcoming and respectful of your background, culture, and identity? Your opinion is important to us. Please fill out this [survey](#) or contact the Patient Education team at [patienteducation@toh.ca](mailto:patienteducation@toh.ca)



## Do you need this information in a different format?

Please tell a member of your health-care team so that they can provide you with this information in a format that works for you. This resource is available in English and in French. Cette ressource est disponible en anglais et en français.



## Booklet information

**Reorder Number:** CP17B

**Authors:** Julie Sauvé, Sarah Dove, LeeAnn Lemay, Clinical Nurse Educators, Maternal Newborn Care

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