

Preparing for Your Cesarean Birth

Cesarean Birth

You are scheduled for a Cesarean birth. This information will help you get ready for your appointment.

In a Cesarean birth, your baby is born through an incision (surgical cut) in your abdomen.

The surgery takes about 30 to 40 minutes. Your baby is born 5 to 10 minutes after the surgery begins. The rest of the time is needed to remove the placenta and repair the incisions.

What to Expect During Your Cesarean Birth

- You will need to sign a surgery consent form.
 - Your nurse and other staff will prepare you for surgery.
 - Your heart rate, blood pressure and temperature will be checked.
 - An IV will be started if you don't already have one.
 - Blood will be drawn to check for anemia and to type your blood. Blood typing is done in case you need a transfusion.
 - Your pubic hair will be clipped.
 - A small tube, called a catheter, will be placed in your bladder to drain urine.
 - You may be given an antacid to drink.
 - An anesthesia department staff member will discuss the best anesthesia choice for you and your baby.
- With general anesthesia, you will be unconscious during the surgery and birth of your baby.
 - With a spinal or epidural, you will be awake but numb from your breasts to your feet. You may be unable to move your legs.
- You will be moved to an operating room.
 - You will be placed on a narrow bed with a safety strap placed across your legs.
 - A blood pressure cuff will be put on one arm.
 - A clip will be placed on your finger to monitor the amount of oxygen in your blood.
 - Patches will be placed on your chest to monitor your breathing and heart rate.
 - You will breathe oxygen through a mask.
 - Sterile drapes will be placed on your abdomen and legs.
 - The anesthesia staff and your health care provider will make sure that you are numb or unconscious before starting surgery.
 - Your partner, family member or labor companion is welcome at the birth.
 - He or she will change into scrub clothes and must not touch any of the surgical drapes, gowns or any of the instruments. This is to protect you and your baby from infection.

(over)

- Your support person can sit on a stool behind your head. There will be a cloth screen across your abdomen to help keep the surgery area sterile. Although some operating rooms have mirrors, neither you nor your support person will see the actual surgery.
 - The incision on your skin will probably be a low-transverse, or bikini, incision. It is horizontal and across the upper edge of your pubic hairline.
 - The incision on your uterus will probably also be low-transverse. If not, it will be a vertical, or midline, incision. Your health care provider will tell you which type of incision was made on your uterus. This is important to know for future pregnancies.
 - When your baby is lifted out and the umbilical cord cut, you may feel pressure at the top of your uterus. Your doctor may lift your baby over the cloth screen so that you can see, or may place your baby directly in a heated warmer. If your baby is doing well it may be possible to have skin-to-skin contact right after birth. A nurse will examine your baby.
 - Your baby's Apgar score will be assessed. This test will check breathing, heart rate, color, muscle tone and reflexes.
 - If your baby is premature or has special needs, he or she may go to a special nursery.
 - If your baby is in a special care nursery or a newborn intensive care unit, you may be taken there to see your baby before you are settled into your room.
 - If your baby has to be moved to another hospital for special care, you may be able to see and touch your baby before he or she is transported. This depends on whether you are awake and well enough before he or she leaves.
- You will be kept informed of your baby's progress. (Talk with your doctor to see if you will be discharged from the hospital early to go to the other hospital to see your baby.)
- Identification bracelets will be placed on your baby's ankle, wrist or both, your wrist, and your support person's wrist.
 - You and your support person will probably be able to touch and hold your baby and take pictures while still in the operating room.
 - Your baby may stay with you in the operating room or go to the nursery.
 - After your incisions are closed, you will stay in recovery for 1 to 2 hours. Later, you will go to your room.

Your Recovery

In the first 1 to 2 hours after your baby's birth, both you and your baby will be monitored carefully. This is to make sure you are recovering well and that your baby is adjusting well.

It is normal for your uterus to contract at this time. This seals off the blood vessels that supplied the placenta with food and oxygen for your baby. Your stomach will be massaged often to help make sure your uterus is contracting.

Your blood pressure and temperature will be taken often. Your incision will also be checked.

In addition to the monitoring by the hospital staff, your baby will be checked by a health care provider at least once in the first 24 hours.

How long you and your baby stay in the hospital will depend on your wishes and your health care provider's guidance, your baby's health, and your insurance coverage.

During the hospital stay use the experience and support of the staff members. They can help you get to know your baby and feel more comfortable with feedings and other newborn care.