

Enhanced Recovery After Cesarean (ERAC)

A Guide Before and After Your Surgery



WHAT'S INSIDE

PAGE 1 What to Expect During Your C-Section

PAGE 2 Getting Ready for Your Surgery

PAGE 3 Pack a Bag

PAGE 3 The Night Before Surgery

PAGE 4 How to Bathe Before Surgery

PAGE 4 CHG Skin Treatment After Your Shower

PAGE 5 What to Expect on the Day of Surgery

PAGE 10 Your Plan for the Next Few Days

PAGE 11 Complications that May Prolong Your Hospital Stay

PAGE 11 Going Home

PAGE 11 At Home

PAGE 12 Resources



UMMC Obstetric Care Unit
410-328-6030

Welcome!

We want to tell you what to expect before, during and after your Cesarean Section (c-section).

Hospitals have changed the way they care for patients having surgery. This includes c-sections. This new way of care is called **Enhanced Recovery After Cesarean** or **ERAC** for short.

We have found that, this program helps patients to:

- heal faster
- have fewer problems
- get to go home sooner

We want you and your family to be more involved in your recovery. We want you up, dressed and eating as early as the day after your c-section.

When you have surgery, it can be overwhelming. You will get a lot of information. Our team is here to help you through the whole process.

Here is what you will find in this packet:

- Getting ready for your surgery
- What to expect on the day of surgery and the days after
- Planning to go to home
- What to expect after you go home

Please remember that every patient is different. Your c-section team will create a recovery plan based on your needs.

Please read this booklet as soon as you are able to and bring it with you to the hospital. Write down your questions and be sure to ask your doctors when you see them, or call your doctor's office. It is important for you, your family and your friends to understand what to expect so that everyone can help you when you get home.

We look forward to working with you to be sure you have a quick recovery!

What to Expect During Your C-Section

Your c-section date & time: _____

A c-section is planned because your baby needs to be delivered.

OUR GOAL IS TO:

- Help you understand what to expect
- Give you the support you need to have the best possible experience
- Answer your questions

HOW CAN I GET READY?

- Pack a bag for your stay (page 3)
- Read the visitor policy (page 6)
- Talk with your family and friends about visiting
- Make sure you have child care for your other children

PRE-OPERATIVE VISIT

Your pre-operative visit date: _____

- Come to the Obstetric Care Unit (OBCU) / Labor & Delivery Unit the day before your c-section for to meet with our staff
- These visits are done on a "walk-in" basis but it's best to come earlier in the day. This is important because we need to get the results of your blood work as soon as possible
- Call the OBCU at 410-328-6030 before you plan to come in
- Talk to the charge nurse to make sure we are ready for you

GETTING TO THE OBCU

- We have reduced cost parking at the University Plaza Garage
- This is across from the main entrance of the hospital
- After you park, come to the main entrance. Check in at the guest services desk. They will give you your reduced cost parking pass. Before 5 AM and after 9 PM, the main entrance is closed so you will check in at the Shock Trauma entrance on Lombard Street

- All visitors need a current **photo ID** to get a visitor badge for the Obstetric Care Unit (OBCU) or Mother Baby Unit (MBU)
- Take the North elevators (by the gift shop) up to the 6th floor, OBCU

Getting Ready for Your Surgery

Before your surgery:

WHAT TO EXPECT:

- You will have a visit with your c-section team the day before surgery. You will watch a short video about our **ERAC Program** which is designed to help you recover faster
- You will meet with three of your c-section team members
 - A nurse will draw your blood. We will place a red bracelet on your arm. This will let us know your blood type. **Do not take this bracelet off. You must wear this red bracelet on the day of your c-section**
 - You will be given a special liquid soap or wipes (CHG) to use in the shower the night before and the morning of your c-section. This soap helps to prevent infection
 - An OB doctor will review your health history. You will get an exam and a sonogram

- The anesthesia doctor will also review your health history and do an exam. This doctor will review your pain relief plan for surgery

HOW TO GET READY FOR SURGERY AT HOME

- You can have one person with you in the operating room. Pick who you want to be with you. This person can be anyone you choose. Everyone else will be asked to stay in the waiting room or hospital lobby
- Plan to be in the hospital for three days after surgery
- You may need help from family or friends after you leave the hospital. Here are a few things you can do before surgery that may make things easier for you when you get home:
 1. Put the things you use often in a place where you can easily get to them
 2. If your home has multiple levels, bring any items you will need during the day downstairs. Use the stairs as little as possible in the first few weeks after your surgery
 3. Stock up on food and other things you will need a lot as it might be hard to shop right after surgery
- Eat healthy foods before and after your surgery. This may help you recover faster



Pack a Bag

Here are some things you will want to pack when coming for your delivery:

FOR YOU:

- Driver's License, Insurance Card
- Cell phone charger
- A bathrobe, nightgown or slippers with grip bottoms
- Comfortable nursing bras or regular bras
- Mask
- Reusable water bottle
- Tooth brush, toothpaste, deodorant, shampoo conditioner and body wash. The hospital has most of these items but you might prefer to have your own
- Snacks. The hospital will provide you with meals and snacks when you are ready to eat. If you have a favorite snack you might want to bring it.
- Books, magazines, your iPad, headphones
- An outfit you will wear when going home. Bring something roomy that is easy to put on and take off. A loose waistband will be more comfortable so it does not press on your incision
- A notepad or journal to write down special memories, questions for your caregivers or to document breastfeeding times
- Things that help you relax and feel more comfortable, such as your own pillow and music
- Two packs of sugarless gum in your favorite flavor. We supply gum but it might not be in your favorite flavor

FOR YOUR SUPPORT PERSON:

- Cell Phone Charger
- Reusable water bottle
- Personal toiletries
- Mask
- Change of clothes, something to sleep in, pillow
- Snacks
- Money for parking and for vending machines



FOR YOUR BABY:

- An installed car seat. You cannot leave the hospital without it. The hospital is not authorized to install the car seat in your car for you
- Baby clothes for hospital stay, if desired
- An outfit for going home, weather appropriate

The Night Before Surgery

What to do:

- ☐ Stop taking all medicines except for the ones that your doctor has told you to take. Talk to your doctor if you are unsure
- ☐ Eat a light meal up to 6 hours before your surgery. If you are a diabetic, talk to your doctor about what you can eat. See the list for light meal ideas
- ☐ Drink 3 glasses of a clear, sugary drink before you go to bed. If you are a diabetic, talk to your doctor about what you can drink. See the list for drink ideas

Light meal ideas:

- ☐ Cream soups or any soup other than broth
- ☐ Oatmeal/grits
- ☐ Toast
- ☐ Crackers
- ☐ Cream of wheat
- ☐ Milk
- ☐ Tomato juice
- ☐ Orange juice
- ☐ Grapefruit juice
- ☐ Milkshakes

Clear liquids:

- ☐ Water
- ☐ Clear broth: beef or chicken
- ☐ Gatorade (not red)
- ☐ Lemonade or Kool-Aid (no red or purple), sodas, tea, coffee (no cream)
- ☐ Gelatin (not red and without fruit)
- ☐ Popsicles (no orange/red and without fruit or cream)
- ☐ Italian ices (no orange/red)
- ☐ Juices without pulp: apple, white grape juice

It is important to have a lot of these clear liquids to drink before your surgery. You can drink clear liquids up until 2 hours before surgery

How to Bathe Before Surgery

What to do:

- ☐ Do not shave your belly/pubes hair for two days before your surgery
- ☐ You will get a bottle of special soap or wipes to bathe with the night before and the day of your surgery

Follow the steps on this page and page 5 based on which type of soap you are given.

CHG Skin Treatment After Your Shower

We want you to do a skin treatment with chlorhexidine gluconate (CHG). Our goal is to keep you from getting an infection. Wiping your body using CHG will reduce your risk of getting an infection. It is **very important** that you use the **CHG Wipes or Solution** (Hibiclens) on your skin the **night before AND the morning of** your procedure/surgery.

Why do I need to use CHG on my skin before my procedure/surgery?

- Hospitals have germs that are hard to treat. These germs are called super bugs.
- CHG is better at removing germs on your skin.
- CHG works for 24 hours.
- Surgeries, drains, some medicines and being ill make it easier to get an infection.
- It helps keep you from getting an infection.



How to use CHG after your shower:

- Wash your hair, face and body with regular soap. Rinse with warm water. Pat body dry with a clean towel.
- Turn off the water before you apply CHG.
- Wipe your body with a new CHG wipe or pour CHG Solution onto the first wet washcloth and wipe area #1. Continue to use a new CHG wipe or wet washcloth with CHG Solution for each numbered body area below.
- Let the CHG stay on your skin for 2 minutes. **Do not rinse off.** If you are cold you can put a towel over you but do not rub off the foam.
- **Pat dry with clean towel. Do not use lotion.** Please call the office if you have questions.

REMINDERS:

Apply to all skin areas with special attention to:

- Neck, all skin folds, underarms, between fingers/toes/legs and private parts.
- Be careful not to go into any body openings with CHG wipes/solution. Treating around it is ok.

You will need 8 wipes or washcloths.

Use soap & water on face. **DO NOT** use CHG above your jawline.

1) neck, chest and tummy

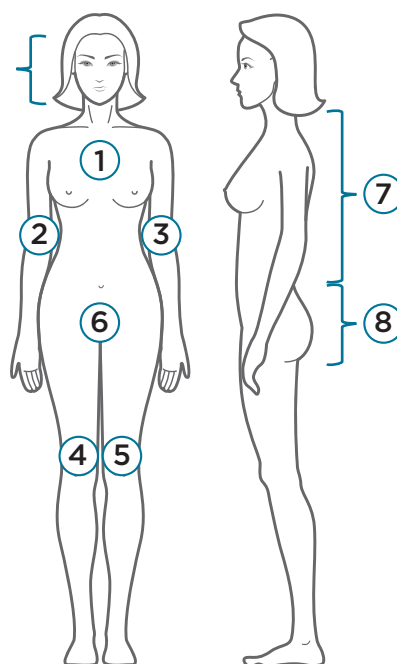
2 & 3) both arms, arm pits, hands and fingers

4 & 5) both legs, feet and toes

6) between your legs and private parts — be careful not to go into any body openings with CHG

7) back of neck, back, and shoulders

8) bottom



What to Expect on the Day of Surgery

The day of your surgery:

SHOULD I TAKE MY MEDICINE THE DAY OF SURGERY?

- Stop taking all medicines except for the ones that your doctor has told you to take. Talk to your doctor if you are unsure

YOUR BATH OR SHOWER THE DAY OF SURGERY:

- Use the second medicated (CHG) liquid soap or second pack of wipes. Use the directions on page 4 or page 5

DO NOT BRING:

- Valuables (including jewelry)
- Do not wear any jewelry
- Do not wear wedding rings, earrings and any other body piercings
- All jewelry must be removed before to surgery

WHAT TO BRING:

Bring only needed items the morning of surgery, including:

- Insurance cards
- ID card (driver's license)
- A list of all your medicines (with doses and how often you take them)
- An Advanced Directive (if you have one), if you have questions about this ask our staff
- This booklet
- Computers, tablets and cellphones
- Bathrobe
- Toiletries

WHAT TO WEAR TO THE HOSPITAL:

- Loose, comfortable clothing

PARKING AND CHECK-IN:

- Arrive three hours before your scheduled surgery
- Obtain visitor passes from guest services
- Take the elevator to the 6th floor North Hospital. Look for the Obstetric Care Unit
- Check-in

Visitors:

Due to Covid, visitor restrictions may be in place.

During flu season, the visitor policy may change.

We welcome Family-Centered Visiting on both the Obstetric Care Unit and the Mother Baby Unit with some guidelines.

GUIDELINES:

1. Only one visitor, the main **Support Person**, can be present for a c-section in the Operating

Room and in the Recovery Room. This is for the patient's safety and so that the nurses and doctors can properly care for the patient. This visitor must have photo ID. This visitor has to leave their ID at guest services on the first floor of the hospital by the main entrance to obtain a visitor pass.

2. After delivery, the main **Support Person** will have a bracelet that matches the baby and a badge.
3. You can have three visitors at a time on the Mother Baby Unit. One of these visitors is the main **Support Person**. All visitors must have photo ID. All visitors have to leave their ID at guest services on the first floor of the hospital by the main entrance to obtain a visitor pass.
4. Although visiting is generally 24 hours a day, **Hospital Quiet Time begins at 9 pm** so that patients can rest. The main Support Person can stay overnight with you in your room. All other visitors should go home.
5. The patient's children under the age of 18 are not visitors. They may visit with an adult present at any time.*
6. No children under age 12 are allowed to visit unless they are the patient's child.* Your children under the age 12 must have another adult caring for them at all times. These children cannot be left in your care at any time.
7. Videotaping is not permitted in the Operating Room during a c-section. Photographs of the baby are permitted in the Operating Room after birth.

***Please scan the QR code to get the most up-to-date FLU/COVID visitor restrictions.*



***We restrict visitors during Flu season.**

The flu limits are:

- No children under the age of 18 are permitted to visit on either unit
- Visitors are limited to two adults, including the main Support Person

When you get to the Obstetric Care Unit we will:

- Take you to a pre-op room and you will meet your nurse
- Talk about what to expect
- Put in an IV
- Give you medicine through the IV and by mouth to help with pain and nausea
- Clip hair from around the surgery site
- Wash off your belly and upper legs with special soap
- Put sleeves around your lower legs. This will help to prevent blood clots
- Give you a glass of a clear, sugary drink before your surgery, unless you are a diabetic

Operating Room:

WHAT TO EXPECT:

- You will get hooked up to a monitor
- You will get antibiotics to help prevent an infection
- If you get an epidural catheter, it will be placed into your lower back
 - The epidural placement will take about 30-60 minutes
 - This will allow the doctor to give you medicines right into the pain fibers in your back

- This will keep you comfortable during surgery
- It will allow you to be awake for the birth of your baby
- Your support person will come into the operating room when we are ready to start your c-section
- If you get medicine to go to sleep (general anesthesia) your support person will not be able to come into the operating room. You will see them in the recovery room right after surgery
- After you get your anesthetic we will:
 - Insert a small tube (catheter) into your bladder
 - Wash your belly one more time
 - Put blue drapes on your belly and the surgeon will begin your c-section
- Most c-sections last about an hour. Do not be worried if your surgery takes longer than this

WHAT HAPPENS AFTER MY BABY IS BORN?

- A special group of doctors and nurses just for babies (Pediatric staff) will check your baby
- Most likely your baby will stay with you in the operating room
- Sometimes we need to take your baby to the Neonatal Intensive Care Unit (NICU). This may happen quickly. The doctor will make every effort to talk with you and let you see your baby before they leave the operating room



In the Recovery Room you will:

- Receive pain medicine. This will either be through your epidural or through your IV. This is called a Patient Controlled Analgesia (PCA)
- Have an IV in your arm giving you fluid while you are in the recovery room. This IV fluid will continue until you are eating solid food
- Get oxygen through a facemask
- Take deep breaths 10 x per hour using a special breathing device (incentive spirometer)
- Have a small tube in your bladder for about 6-12 hours after surgery. This is so we can find out how much urine you are making and how well your kidneys are working
- Wear sleeves on your lower legs to prevent blood clots
- Get clear liquids to drink when you are awake and stable
- Get two packs of sugarless gum unless you brought your favorite flavor from home. You will chew one piece of gum for at least five minutes three times a day after your cesarean section. Chewing gum will help your bowels start to work faster
- Get a binder around your belly to support your stitches so that you can sit up and move around

ROOMING IN: Your baby will stay with you in the recovery room, unless your baby needs to go to the NICU.

SKIN-TO-SKIN: Your baby will be put on your bare chest. Your baby will stay there until the first breastfeeding or for at least one hour.



Skin-to-skin has a lot of benefits:

- Helps with breastfeeding success
- Helps with mom and baby bonding
- Lowers pain and stress for mom and baby
- Helps keep baby's blood sugar normal
- Baby doesn't cry as much
- Helps keep baby's temperature and heart rate normal
- Helps keep baby's breathing regular

We encourage breastfeeding. This can begin right away in the recovery room.

If your baby is in the Neonatal Intensive Care Unit, we can help you pump your breastmilk. There are some medical reasons when breast milk cannot be given to your baby. You can visit your baby once you are stable. Until then, you can call the NICU to get updates on your baby.

Most patients remain in the recovery room for about two to three hours. You will go to the Mother Baby Unit (MBU) after you have recovered.

On the Mother Baby Unit:

You will stay on the MBU for about 3 days after your c-section. Here are the things that will happen when you first get to the unit.

You will:

- Sit up on the edge of the bed or get out of bed to a chair within 8 hours after surgery
- Wear sleeves on your lower legs to prevent blood clots until you are out of bed and walking most of the time
- Walk in the halls once you are able to get out of bed to a chair
- Take deep breaths 10 x per hour using a special breathing device
- Get IV fluids until you are drinking a lot of clear liquids
- Drink clear fluids
- Eat solid food when we see that you are able to drink clear liquids without a problem
- Get pain medicine
- Have a small tube in your bladder for 6-12 hours after surgery
 - When the tube comes out, we want you to pass urine every 2 hours. You may not feel like you have to pass urine but we want you to try
- Chew gum for at least 5 minutes three times a day to get your bowels moving

CALL DON'T FALL:

- You are at high risk for falling after you have had surgery
- Call us before you get out of bed
- Wear special slippers with grip bottoms
- Do not get out of bed by yourself



VISITING:

- Your family can visit and/or stay with you in your room. See visitor policy
- It is best to limit your visitors for the first day since you will still be very sleepy

ROOMING IN:

- Your baby will stay in your room 24 hours a day
- Allows you and your baby to get to know each other, bond and breastfeed

IF YOUR BABY IS IN THE NICU:

- We will help you pump your breastmilk
- You can visit your baby as soon as you are able to walk

Your Plan for the Next Few Days

Who will take care of me after surgery?

- The nursing staff on the Mother Baby Unit, the OB and anesthesia doctors
- The baby doctors (pediatricians) will take care of your baby

Pain relief after surgery:

- You will be asked to tell us about your pain on a scale from 0 to 10
- This will help us know how much medicine to give you
- We have a plan to stay ahead of your pain. We will limit opioids because they slow down your recovery
- You will get other types of pain medicines on a regular schedule
- If you had a special medicine in your epidural, you will not need additional pain medicine for 18-24 hours after surgery
- If you have a pain pump, you will push a button to get medicine
- You can ask for more medicine if you need it
- We need you to take deep breaths, cough and move as much as possible. It is hard to do this if you have too much pain medicine



One day after surgery we want you to:

- Drink fluids and walk the hallways
- Eat regular food
- Get out of bed and sit in a chair for several hours
- Drink enough fluid so we can stop your IV and take the tube out of your bladder

Two to three days after surgery you will:

- Get your bandage removed (If you have a wound suction device, it will stay on for 7 days)
- Be out of bed for most of the day
- Walk in the hallway with help (if needed) several times

You will be ready for discharge when:

- You drink enough
- Your pain is better
- Your stomach is settled and you are not burping often
- You are passing gas
- You are able to walk around on your own



Complications that May Prolong Your Hospital Stay

Nausea and vomiting:

It is very common to feel sick to your stomach after your surgery. We give you medicines to decrease this feeling. If you do feel sick:

- Decrease the amount of food and drinks that you are taking by mouth
- Eat small, frequent meals or drinks
- As long as you can drink, the nausea will likely pass

Ileus:

After surgery, your bowels can shut down. This makes it hard for food and gas to pass through the bowels. This is called an ileus. We do everything possible to reduce the chance of an ileus. If you do develop an ileus, it usually only lasts two to three days. However, you may need a small tube to be put down your nose to relieve the pressure from your stomach. The best way to avoid an ileus is:

- Reduce the amount of opioid pain medications
- Get up as much as possible after your surgery
- Get your bowels working early after surgery with small amounts of food and drinks

Wound infection:

Sometimes germs can grow inside of a wound. We call this a wound infection. It can start three to ten days after surgery. We will:

- Tell you what to look for
- Tell you who to contact
- Tell you where to go for treatment

Urine retention:

Sometimes it is hard to pass urine on your own after surgery. We will put the tube back into your bladder until you can pass urine on your own. This can be caused by:

- Anesthesia
- Pain medication
- Decreased activity

Going Home

- You will need to have someone take you and your baby home
- Discharge is usually by 11am
- Discharge time may change if you or the baby need more medical care

Before you go home, you will get:

- ☐ A booklet: **“C-Section Mother and Baby Discharge Guide”**. This has information on how to take care of yourself after surgery. This also has information on how to care for your baby
- ☐ Prescriptions for medicines you need at home. You can fill these at our hospital pharmacy
- ☐ A follow-up appointment to see your doctor. Your follow-up will be in one to two weeks
- ☐ A follow-up appointment for your baby to see the doctor
- ☐ All of your questions are answered

At Home

A few days after you go home, we will call you to find out how you are doing.





Resources

MY BABY'S DOCTOR'S PHONE NUMBER

BABY'S FIRST DOCTOR'S APPOINTMENT IS ON

MY DOCTOR'S PHONE NUMBER

MY FOLLOW UP APPOINTMENT IS ON

UMMC LACTATION CONSULTANTS can be reached at

- LactationSupport@umm.edu
- Direct cell: 443-915-2748 (call or text)

MOMS BREASTFEEDING GROUP

- Meets every Thursday from 11:30 am to 1 pm
- Where: Family Medicine Office 29 S. Paca Street, Baltimore, MD 21201

Obstetric Care Unit..... 410-328-6030

UMMC Pediatric Emergency Room..... 410-328-6335

**UMMC Psychiatric Emergency Services
(Adult & Pediatric)**..... 410-328-1219

Pediatrics at Midtown 410-225-8780

WIC..... 410-767-5300 or 1-800-242-4WIC

Safe Kids Baltimore
www.umm.edu/safekids..... 410-328-7532

Maryland Kids in Safety Seats (KISS)
www.mdkiss.org 1-800-370-SEAT

Maryland Poison Center..... 1-800-222-1222

Family Stressline 24 hour Hotline 1-800-243-7337

University of Maryland Women's Health
at Paca/Redwood 667-214-1300
at Penn Street..... 410-706-2500

University of Maryland Family Medicine Associates
at Paca Street 667-214-1800

Notes

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**Privileged to care,
ERAC Team**

For more information visit umm.edu/ERAC



In partnership with:

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