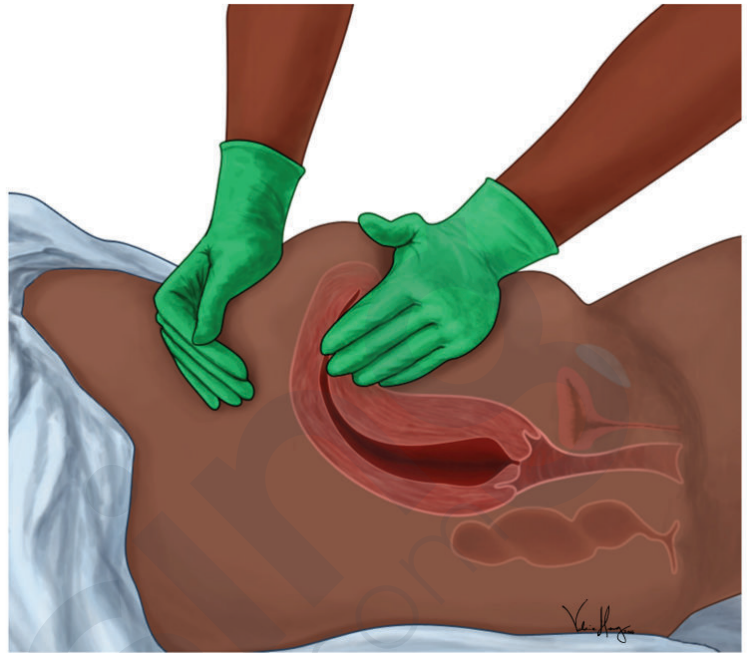


# POSTPARTUM CARE

## Postpartum Assessment Mnemonic

<b>B</b>	Breasts - size, shape, engorgement
<b>U</b>	Uterus - firm or boggy
<b>B</b>	Bowels - bowel movement
<b>B</b>	Bladder - tender, distended, retention
<b>L</b>	Lochia - amount, odor, clots, color
<b>E</b>	Episiotomy - location, stitches, edema, redness
<b>E</b>	Emotional - emotional status & bonding

Fundal Massage - used to firm up uterus and prevent postpartum hemorrhage



By Valerie Henry - Own work, CC BY-SA 4.0, <https://commons.wikimedia.org/w/index.php?curid=48357595>

## POSTPARTUM PHYSIOLOGIC CHANGES

### Uterine and cervical involution

Rapid shrinking to baseline due to oxytocin release after delivery. Fundal height decreases 1 cm / day, cervix should return to normal in 1 week.

### Presence of lochia

Uterine lining shed in 3 stages. Rubra – bloody, Serosa – brownish pink, Alba – milky white. Assess amount using number of saturated pads.

### Vaginal changes

Decreased tone

### Resuming of menstrual cycle

Breastfeeding - 3-6 months  
Not breastfeeding - 1-2 months

### Breast changes

Colostrum x 72 hours. Milk on day 3 or 4.

### Urinary changes

Excessive output in first 72 hours due to fluid shifts. Retention may indicate hematoma.

### GI changes

Hemorrhoids and/or constipation are common.