

6 Week Visit

- Check on birthing parent's well being
 - Any issues, diet, hydration, adjustment to parenthood
- Physical checks on birthing parent
 - Vitals – temperature, pulse, blood pressure
 - Breasts – clogged ducts, nipple cracks or blisters, tenderness, lumps
 - Uterus – involution, should not be palpable, pressure
 - Lochia – color, amount, increased, decreased, odor
 - Perineum – if indicated, healing of stitched area
 - Offer internal exam for muscle tone and cervical check, PAP if indicated
 - Abdomen – muscle tone, diastasis recti
 - Blood work – hemoglobin and hematocrit, especially if feeling weak or a hemorrhage occurred
- Recommendations
 - If bleeding has increased or changed back to red, you are doing too much and need to slow down
 - If uterus still palpable try black haw and shepherd's purse tea or tincture
 - If still feeling pressure, visit to pelvic floor therapist may be indicated
 - If diastasis found, start mild abdominal exercises (leg lifts progressing to sit-ups, or yoga)
- Physical checks on baby
 - Vitals – heartrate, respirations, temperature
 - Weight check – gaining, losing, stable
 - Skin – wrinkling, peeling, diaper rash
 - Nursing – how often, how long, latch, thrush
 - Elimination – urinating and bowel movements regularly
 - Sleep – awake and sleep times
 - Penis - if circumcised
- Recommendations
 - Continue to nurse on demand unless baby is losing weight
- Discuss birth if you haven't already
- Handouts/Information
 - EPDS
 - Pelvic floor therapy
 - PP exercises/classes
 - Family planning/contraception options
 - MANA stats
 - How and when to contact the midwife

References

Davis, E. (1997). Heart & Hands: A midwife's guide to pregnancy & birth. (3rd ed.). Celestial Arts.

Lim, R. (2001). After the baby's birth: A complete guide for postpartum women. (revised ed.). Celestial Arts.