

Day Before Surgery

You may be scheduled for pre-procedure testing and lab work. Your provider or hospital staff will schedule an appointment time with you.

Night Before Surgery

Shower with the antiseptic antibacterial soap you received using our instructions.

Morning of Surgery

Remove nail polish, make-up, jewelry, and all body piercings. You can keep on artificial nails. Shower a second time with the antiseptic antibacterial soap. We will give you specific instructions on how to do this.

Take your medications as prescribed by your doctor.

Follow Diet Restrictions on the back page.

Arrive at the hospital at least two hours before your scheduled surgery time or as directed by the hospital.

When You Arrive at the Hospital

A staff member will place an intravenous (IV) catheter into your arm for fluids. We may perform more lab work at this time.

We may give you oral pain medication, such as acetaminophen, just before your surgery. This will help reduce any post-operative pain and reduce the need for narcotic/opioid pain medication.

An anesthesia provider will speak to you about your anesthesia options. If possible, we prefer to use regional anesthesia such as spinal injections because they can lessen the need for postoperative narcotics/opioid pain medication.

We will place antibiotics into your IV to minimize the risk of post-operative infection.

We may also give you other medications to prepare you for your surgery.

We will place compression stockings on your legs to minimize the risk of postoperative blood clots.

Before Surgery – Be Informed and Get Healthy!

- Your provider will explain your operation to you, so you'll know exactly what to expect.
- Eat a balanced, healthy diet high in complex carbohydrates/protein unless suggested otherwise.
- Walk 30 minutes daily and avoid drinking alcohol, and smoking tobacco or vaping.

Your surgery is scheduled for

Date: _____ Time: _____ Location: _____

Your preoperative testing is scheduled for

Date: _____ Time: _____ Location: _____

Diet Restrictions

The day before your surgery:

You may eat and drink anything (**healthy choices are best**).

The day of your surgery:

- Up until 8 hours before surgery, eat as usual.
- Up until 6 hours before surgery, you may eat a light meal or low-fat snack.
- Until 2 hours before surgery
 - Drink lots of clear fluids such as water, juices (no pulp) like apple juice, gelatin, broths, coffee/tea, sports drinks, and popsicles.
 - DO NOT** eat any solid food.
 - DO NOT** drink or eat any milk or dairy products.
- 2 hours before surgery, consume 20 ounces of a sports drink (sugar-free if you have diabetes). You **MUST** complete this 2 hours before your surgery, then **NO MORE LIQUIDS!**



Medications Morning of Surgery

Name/Dose: _____

Name/Dose: _____



ENHANCED RECOVERY AFTER CESAREAN (ERAC)

A program that helps you heal faster with fewer problems so you can go home sooner!

We know surgery can be overwhelming, and we're here to help you through the experience with a recovery plan that's tailored for you.

Our new ERAC program delivers thoughtful, patient-centered care before, during, and after your cesarean section.



	Day of Surgery	Day 1 After Surgery	Days 2 & 3 After Surgery
Breathing Exercises	Use incentive spirometer (breathing machine) every 1-2 hours when awake 6-10 times per hour	Use incentive spirometer (breathing machine) every 1-2 hours when awake 6-10 times per hour	Use incentive spirometer (breathing machine) every 1-2 hours when awake 6-10 times per hour
Activities	Walk from bed to chair or walk in the hallway within 6 hours Wear compression stockings and pumps	Out of bed for more than 8 hours per day Walk in hall 25 feet, 4 X per day Up in chair for all meals Wear compression hose and pumps- may stop when walking consistently (4X/day for 25 feet) May shower once dressing on incision is removed	Out of bed for more than 8 hours per day Walk in hall 25 feet, 4 X per day Up in chair for all meals Wear compression hose and pumps- may stop when walking consistently (4X/day for 25 feet) May shower once dressing on the incision is removed
Pain control	Apply ice to incision Wear an abdominal binder, especially when out of bed Massage, aromatherapy and/or music therapy (ask your nurse for more information) We will administer non-opioid pain relievers and non-steroidal anti-inflammatory medication (NSAIDs) as scheduled, around the clock We will only use opioids (narcotics) when other medications don't help the pain	Alternate heat and ice to incision Wear abdominal binder, especially when out of bed. Massage, aroma therapy, and/or music therapy (ask your nurse for more information) Non-opioid (non-narcotic) pain relievers and non-steroidal anti-inflammatory medication (NSAIDs) will be given as scheduled, around the clock We will only use opioids (narcotics) when other medications don't help the pain	Alternate heat and ice to the incision. Wear an abdominal binder, especially when out of bed Massage, aromatherapy and/or music therapy (ask your nurse for more information) Non-opioid (non-narcotic) pain relievers and non-steroidal anti-inflammatory medication (NSAIDs) will be given as scheduled, around the clock. We will only use opioids (narcotics) when other medications don't help the pain
Nutrition	Begin clear liquids within 2-4 hours. Then eat as tolerated Chewing gum – start 4 hours after surgery, 4X per day for 30 minutes Take one nutritional supplement in the evening Drink two protein drinks each day	Eat as tolerated, focusing on adequate fluid intake Chewing gum – 4X per day for 30 minutes Two nutritional supplements each day Drink two protein drinks each day	Eat as tolerated, focusing on adequate fluid intake Chew gum - 4X per day for 30 minutes Two nutritional supplements each day Drink two protein drinks each day
Tubes, lines & dressing	We will remove your urinary catheter 6-12 hours after surgery (as long as your bleeding isn't excessive) IV fluids will be stopped once you can drink 20 ounces and no longer have nausea and vomiting	IV fluids will be stopped once you can drink 20 ounces and no longer have nausea and vomiting Dressing on the incision will be removed	No dressing on the incision
Bonding & breastfeeding	Please place your infant skin-to-skin on your chest when you feel well enough. Continue to hold your baby skin-to-skin until they have breastfed for the first time Breastfeed often, whenever the baby shows signs or feeding cues Continue to offer skin-to-skin contact Keep your baby in your room with you (rooming-in)	Breastfeed often, 8-12 times or more, every 24 hours, whenever the baby show signs of hunger Anticipate cluster feedings during baby's second night Continue to offer skin-to-skin contact Keep your baby in your room with you (rooming-in)	Breastfeed often, 8-12 times or more, every 24 hours, whenever the baby show signs of hunger Continue to offer skin-to-skin contact Keep your baby in your room with you (rooming-in)
Discharge planning		Review You & Your Baby book – ask questions!	Review You & Your Baby book– ask questions! You can expect to go home on your 2nd day. If discharge is delayed, you'll go home on the 3rd day. The decision to be discharged with a prescription for oral opioids (narcotics) pain medication will be made on a case-by-case basis.