

	Mom	Baby
Days 1-4	<ul style="list-style-type: none"> • May still be running on a feeling of adrenalin and have difficulty resting • In awe of baby, or unsure of baby • Significant perineum discomfort • Cramping, sometimes very painful • Uterus will be checked often to be sure it is firm and getting smaller • Lochia is often still heavy • May have anxiety, or experience discomfort and pain when emptying bladder and bowels • Nipple irritation and discomfort, engorgement of breasts • Weepy, emotional, feeling “not herself” • Often desires closeness with baby, uneasy about separation, “mama bear” instincts 	<ul style="list-style-type: none"> • Often still sleepy and not extremely alert, may need to be woken for feeds • May experience newborn jaundice • Umbilical stump often appears still tender, parents should be confident they will not hurt it though • Stomach is the size of a marble on the first day and ping-pong ball on day 3. Stomach can be stretched but should NOT be. Small frequent feeds are best, think teaspoons not ounces • 1 soiled diaper and 1 wet diaper for each day of life per 24hrs until day 5 and beyond where a minimum of 5-6 is expected • May want to nurse 16-20+hours per day, this encourages milk to come in it is not an indicator of moms supply • May not settle unless being held, this is normal • Loses up to 10% of birth weight, normal and often on higher end if mom had lots of IV fluids • Patterns breathing after adults when held closely
Week 1-2	<ul style="list-style-type: none"> • Mature milk often comes in around days 2-5 and engorgement may cause discomfort. Frequent nursing, hand expression, and warm/cold compresses for discomfort • After cramping may continue, especially during feeds • May experience the baby blues • Fatigue from labor and disrupted sleep starts catching up with her • Will often sweat, cry, and urinate a lot, body has a lot of extra fluids to release • Lochia discharge continues up to six weeks postpartum • May still have significant perineum discomfort and difficulty emptying bladder and bowels 	<ul style="list-style-type: none"> • Stomach continues to grow a little bit each day until reaching the size of a chicken egg on day 10 • Continues to feed a minimum of 8-12 times per 24 hours, up to 16+ hours per day, not indication of supply • Minimum 6 diapers per 24hrs • Some babies fall into a pattern of eating every 2-3 hours, while some continue to have smaller more frequent meals. Both are normal, feed baby on demand • Should be back at birth weight by two weeks • Sleeps the majority of the time • May have acne, peeling skin, etc • Is wired to desire close contact, especially

	<ul style="list-style-type: none"> • Hip, pelvic, and back pain may occur as she recovers • May worry about not bonding, it can be completely normal for it to take time to feel bonded • May be in awe of baby and feel completely bonded 	<p>with mom</p> <ul style="list-style-type: none"> • Continues to pattern breathing after an adult when held closely • Umbilical cord stump often falls off
Week 3-6	<ul style="list-style-type: none"> • Lochia may begin to slow • Often cramps and body aches are beginning to disappear • Fatigue may be an issue • Signs of PPD may be present, EPDS can be used as a SELF assessment tool • Insomnia (cannot sleep even if baby is asleep) is a red flag for PPD • Very emotional, possibly struggling with not feeling like herself, identity crisis, things not how she expected • Begins falling into a daily routine • Starts making clearer definition between night and day 	<ul style="list-style-type: none"> • May become a little more alert a little longer each day • Becomes more efficient at latching and milk transfer, still feeding often as stomach is small • Often experiences a growth spurt around 3 and 6 weeks and will feed more frequently for a couple days, this is no indication of supply • Allergy or sensitivity symptoms might appear around this point, excessive spit up, rash, blood in stool, etc should be reported to pediatrician • May fall into more of a routine, recognizing day vs night • May still have jaundice, can be normal but should be under care of provider
6 Weeks and Beyond	<ul style="list-style-type: none"> • Lochia and most symptoms such as cramping and aches are gone • Can use EPDS as a self assessment tool if feels she may have PPD • Begins to fall into a new “normal” • Accepts life with a new baby, or may still be adjusting • Begins coping with a new sleep schedule • Distinct differences between night and day • May begin pumping if she is returning to work • May return to work as early as two weeks, but most wait at least 6-12 weeks, some longer and some choose to stay home. 	<ul style="list-style-type: none"> • Becomes more alert and interactive • May fall into a predictable sleep and feeding routine • More alert of surroundings and may experience over stimulation, fight falling asleep, and become over tired • Dimly light rooms with white noise can be a soothing break from a busy day • Becomes a little easier to read as mom and baby develop a relationship • Still desires closeness to mom and patterns breathing after adults in close proximity • Can follow day vs night pattern, but may not sleep straight through the night for several months