

Cesarean (C-section) Delivery

A Cesarean section or C-section delivery occurs when a baby is delivered through an incision made in the mother's abdomen and uterus. C-section deliveries occur in about 25% of all births. A cesarean birth may be planned because of certain problems or it may be determined during labor that a cesarean birth may be necessary.

There are several situations when a Cesarean delivery may be needed. These include:

- Maternal or Fetal Complications
- Breech or transverse position
- Previous cesarean birth
- Multiple pregnancy
- Large baby or small pelvis
- Umbilical cord problems
- Placenta problems, such as placenta previa
- Labor fails to progress

Prior to a cesarean delivery, you will receive an IV and intravenous fluids. Oral and intravenous medications may also be given prior to your surgery. A method of pain control will be provided so that you will not feel pain during the surgery. A urinary catheter will be placed to keep your bladder drained during and after your C-section. Your nurse may shave your lower abdomen and upper pubic area where the incision will be made.

During surgery, your vital signs will be monitored closely and sometimes oxygen will be given through a face mask or nasal tubes. Your labor coach will dress in scrubs or a clean gown and will wear a clean face mask during delivery. He or she will normally sit beside the surgery table near your head and upper body.

A nurse will cleanse the abdomen with an antiseptic prior to delivery. Sterile drapes are then placed over the mother's abdomen around the area where the incision will be made. The doctor will check to be sure that you have adequate pain control before beginning the surgery.

An incision, usually about five to seven inches long, is made horizontally in the lower abdomen, just above the pubic hairline. The abdominal muscles are gently separated and an incision is made through the lining of the abdominal space. Another incision is then made into the wall of the uterus, and the baby is lifted out through this incision. The doctor will cut the umbilical cord and pass the baby to a nurse who will assess the baby. The placenta is then removed from the uterus. The incisions made in the uterine and abdominal walls will be repaired with dissolvable stitches. The outer skin is closed with surgical staples or stitches and a large bandage dressing will be placed over the incision. A cesarean delivery normally lasts between thirty minutes and one hour. After surgery, you will be transferred to a postpartum or recovery area.

Cesarean (C-section) Delivery (Cont'd)

As with any type of surgery, risks are involved with cesarean birth. Many of the same risks may also occur with a vaginal birth. These include: infection, blood loss, blood clots, injury to the bladder or bowel.

Depending on the reason for your cesarean section and the type of incision made into your uterus, you may be able to deliver other babies vaginally. This is called vaginal birth after cesarean or VBAC. There are multiple risks associated with VBAC. Your doctor will help to determine if VBAC is an appropriate choice for you.

You may need a slightly longer recovery period after a cesarean birth. Most women usually stay in the hospital two to three days after a cesarean delivery. When you go home, you may need more help at first since you will still be recovering from surgery. It will be very important for you to keep your incision clean and dry. Strips of paper tape called steristrips are sometimes left in place over the abdominal incision. These may fall off in the shower or tub. If not, you may safely remove them within one to two weeks after surgery. If surgical staples were used to close your incision, you will return to our office to have those removed within a few weeks after delivery. If you notice any signs of infection around your incision, you should call the office to see if you need to come in for evaluation. All new mothers should return to our office in six weeks for a postpartum check-up.