

How much do you know about birth and newborn care?

If you've never had a baby before, there are things you have to educate yourself about when preparing for your baby's arrival. After we have discussed labor and birth, and then basic postpartum information, see if you and your partner can answer the following questions.

Questions:

1. Labor is divided into _____ stages. Name the stages and describe a little bit about each stage.
2. Describe how a contraction is timed.
3. What is the main hormone involved in labor and what does it do?
4. True or False- During the transition stage of active labor, it is not uncommon for the woman to shake, vomit, cry or even ask for pain relief.
5. True or False- It is not important at all to remind the laboring woman to empty her bladder occasionally while in labor.
6. When should the cord be cut after birth?
7. What's the best way to care for the umbilical cord stump?
8. Babies can afford to lose _____% of their birth weight in the few days following birth but almost always regain, reaching their birth weight by _____ weeks.
9. True or False- Girl babies may experience a period-like bleeding from their vaginas after birth, and this is considered normal.
10. True or False- It is normal if you notice your baby's nostrils flaring, see him grunting or notice any chest retractions.
11. True or False- The baby does not get any nutrition at all until the milk comes in on the 3rd day.
12. Describe what jaundice is. On what day after birth is it considered normal to have a jaundiced baby?
13. Assuming jaundice is within a normal range, what are some things you can do to help your baby process this extra bilirubin?
14. True or False- You must act as a baby warmer and a baby cooler for your baby for the first few days of life.
15. Name some warning signs that may indicate a sick baby.

Answers:

1. Labor is made up of 3 stages: The first stage is when the cervix softens, shortens and opens to it's maximum. 2nd stage is the pushing of the baby out of the uterus, and 3rd stage is the delivery of the placenta.
2. A contraction is timed from the beginning on one contraction to the beginning of the next, noting how long the contraction actually lasts. So, if a contraction starts at 3:01 and lasts 30 seconds, with the next contraction starting at 3:07, you'd describe it as "contractions are 6 minutes apart lasting 30 seconds".
3. The main labor hormone is oxytocin. Oxytocin is the "hormone of love" and is released by

both males and females-during orgasm, nursing, etc. During labor, oxytocin is responsible for uterine contractions as well as the "high" you (and everyone else in the room) feel immediately after birth that encourages bonding.

4. This is kind of a trick question. It is mostly true, because it is not uncommon for a laboring woman to feel this way. But, when birthing at home in the water, it is also not uncommon for the woman to be in pain, but in pain she is prepared to handle (because she is feeling safe, confident and relaxed).
5. This is false. While in labor, a woman often just isn't focused on this and at certain points in the process is actually dulled to the sensation of needing to urinate. The bladder must be relatively empty (not distended) in order for the baby to descend and also to prevent the loss of too much blood after birth. While no one in the room has to interrupt or disturb the woman to remind her of this, it is a good thing to keep in mind.
6. Unless there is some kind of emergency that warrants immediate cutting of the cord at birth, it is recommended that the cord be left attached to the baby so that the baby receives the maximum amount of blood from the placenta. Usually by about 4-5 hours after birth, the cord will have stopped pulsing, be cold and ready to be cut. After it is cut at this time, there is no need for clamping or tying.
7. The cord stump needs oxygen so that it can dry out and decompose. This means leaving the area free from diapers and clothes for at least a few days. Rubbing alcohol actually preserves the rotting flesh, so this is not recommended. The best way to heal, nourish and dry out the area so it heals beautifully is for baby to take the 3 herb baths with mom. The herbs, salt and essential oils are antibacterial, anti-bleeding as well as soothing and cleansing.
8. Babies can lose up to 10% of their birth weight safely. Once mama's milk comes in, most babies regain (and then some) by 2 weeks of age.
9. True. Because of the excess hormones, girls can have bleeding and/or mucus discharge from their vaginas after birth.
10. False! These are not normal signs and may indicate a sick baby. More than likely, a baby that exhibits these signs is also not nursing well. Call for help immediately.
11. False. Even if you can't see it, your baby is getting colostrum from your breasts that provide him with nutrition and fluids until the milk comes in. Colostrum also acts like a laxative to help get rid of the meconium in the baby's gut.
12. Jaundice is the result of the breakdown of red blood cells as they make bilirubin that comes to the surface of the skin, creating a yellowish/orangeish hue to your baby's trunk and face. When this happens at about the 3rd day after birth, it is considered normal (physiological) jaundice- it usually peaks around day 5 and then starts to fade. Pathological jaundice is jaundice that appears within the first 24 hours after birth and is not considered normal. The further down on the baby's body that the jaundice reaches is considered to be higher levels of bilirubin- the concern with bilirubin is brain damage if the level gets too high.
13. Nursing, nursing, nursing. Jaundice babies may be sleepy and not ask to nurse as much, but the more nursing they do, the sooner their body will be able to process the extra blood cells. Also, vitamin E on mom's nipples (before baby nurses) also help break the cells down. Another idea is to massage the area on your baby's abdomen where the liver is (baby's right side, under his rib) with olive oil. This will assist his liver in doing the processing as well.
14. True. Your baby cannot do this on his own yet and will die if left to make himself warm or cool himself off. Skin-to-skin contact ensures that your body knows exactly what your baby needs and when.
15. Generally, babies that are sick or have a problem do not nurse well or at all. To check dehydration, look at the soft spot on the front of your baby's head to see if it is sunken

in (indicating dehydration). Take your baby's temperature; normal temperature is 98.6. An abnormally low or high temperature may indicate infection. Lastly, a healthy baby is pink to red. A baby that is having problems may be blue or grayish.

Sources:

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