

## Plain Language Summary

# Postnatal Midwifery Care for Mother and Infant

### Who is this summary for?

This summary is intended for women who have recently given birth, as well as their partners.

### What is this summary about?

The National Women and Infants Health Programme (NWIHP) has developed clinical guidelines to support healthcare professionals to provide evidence-informed postnatal care. This plain language summary provides an overview of the National Guideline: Postnatal Midwifery Care for Mother and Infant. This Guideline describes routine care for healthy women following birth (including caesarean birth) and infants born from 37 weeks' gestation.

### What information is covered in the guideline?

The information guides care for women and infants in the postnatal period. It applies to all postnatal settings, including postnatal wards, midwifery-led units and homebirth settings. It explains what usually happens after birth, what's normal, and when to seek medical advice.

### What is postnatal care?

The postnatal period begins immediately following the birth of the infant and the afterbirth and extends up to 6 weeks after this. The postnatal period is a time of recovery and adjustment for the woman and her baby. Postnatal care focuses on supporting the physical, emotional, and psychological wellbeing of both the mother and infant.

### Care of the woman after birth

All women should receive a full physical assessment following birth.

This includes; checking the amount of vaginal bleeding, checking that the woman's womb is reducing in size by placing a hand on the woman's abdomen, and checking vital signs like temperature, pulse, and blood pressure, checking that the woman is passing urine and opening her bowels, assessing healing of perineal (vaginal) or abdominal wounds, managing pain and monitoring for headaches, and completing a venous thromboembolism (VTE) risk assessment.

Women should be informed about the signs and symptoms of potential complications, including very heavy vaginal bleeding; abdominal, pelvic or perineal pain, fever, or unpleasant smelling discharge; leg swelling and tenderness or shortness of breath; chest pain; persistent or severe headache; or worsening reddening and swelling of the breasts persisting for more than 24 hours. Women should seek medical attention immediately if any of these symptoms occur.

<https://www.rcpi.ie/Faculties-Institutes/Institute-of-Obstetricians-and-Gynaecologists/National-Clinical-Guidelines-in-Obstetrics-and-Gynaecology>

### **What are common postnatal discomforts?**

Women may experience perineal (vaginal) or abdominal pain, constipation, or breast discomfort after birth. Pain relief such as paracetamol and non-steroidal anti-inflammatory medicines are effective and safe for most women, unless contraindicated. Adequate fluid intake, a high-fiber diet, and gentle activity help maintain normal bowel function. Ensuring correct infant positioning and attachment during feeding can help prevent nipple soreness and breast engorgement. The midwife will provide pain relief, practical advice and support to the woman.

### **What is anaemia after birth?**

Some women may experience low iron levels (anaemia) after birth. If the haemoglobin (Hb) level is below 10 g/dL but the woman feels well, it is recommended that oral (by mouth) iron supplements are commenced and should be taken for at least three months. On completion of the iron supplements, a blood test should be arranged to check iron levels are now at a normal level.

Women who experience weakness, dizziness, or other symptoms should be seen by a healthcare professional. This could be the midwife, medical team, or general practitioner (GP), depending on where the woman is being cared for (in hospital or at home) and when the symptoms present.

### **What advice should be given to Rhesus D negative women?**

Women who have Rhesus D-negative blood and her baby had Rhesus D-positive blood, should be offered an Anti-D immunoglobulin injection within 72 hours of birth. This injection helps prevent her body from making antibodies that could harm a baby in a future pregnancy.

### **What is needed to support the emotional wellbeing and mental health of the woman?**

Many women experience emotional changes after birth. Temporary mood changes, sometimes called the 'baby blues', are common and usually resolve within two weeks.

If low mood, anxiety, or other symptoms persist, the woman should speak with her midwife, public health nurse, or (GP). Support is available through GPs, perinatal mental health services, and community support networks.

Women who experience severe mood changes, confusion, or distressing thoughts should be assessed urgently. The woman should be referred to the most appropriate service available such as a GP, hospital medical team, or perinatal mental health team.

### **What advice should be given to the woman about contraception after birth?**

Fertility can return quickly after childbirth, even before the first menstrual period. All women should be offered information about contraception before discharge from maternity care. All forms of contraception, including long-acting reversible methods such as implants, intrauterine devices, and injections, are available. The chosen method should reflect the woman's preferences, health needs, and feeding choices.

## What advice should be given to the woman about caring for a newborn infant?

### Skin-to-skin contact

The woman should be supported to place the newborn directly on their bare chest after birth, this helps to keep the baby warm and calm, regulate breathing and heart rate, support bonding and attachment, and encourage successful feeding. Skin-to-skin contact should occur as soon as possible after birth and continue for at least one hour or until after the first feed.

### Infant feeding

Infant feeding is an important part of postnatal care. Education and support need to be provided as soon as possible after birth. Breastfeeding provides excellent nutrition and protection against illness. Women who breastfeed should receive support to establish and maintain breastfeeding. Women who bottle-feed should receive support and advice on safe preparation and responsive feeding practices to promote bonding and infant wellbeing.

### Newborn examination and Vitamin K

A full head to toe examination of the newborn should be completed by a midwife, doctor, or paediatrician/neonatologist within the first few hours after birth, and again within 72 hours. This includes checking the baby's heart, hips, eyes, and overall health. All infants should be offered Vitamin K shortly after birth to prevent a rare but serious bleeding disorder.

## When to seek help for the baby

Parents and caregivers should seek medical advice immediately if the baby has difficulty breathing or repeated vomiting, appears unusually sleepy or floppy, feeds poorly or has fewer wet nappies than expected, or develops a fever or worsening jaundice (skin will appear to have an orange colour).

### Further information:

<https://www2.hse.ie/pregnancy-birth/>

Duggan J, Helen H, Dixon A, Cronolly C, Stanciu C, Murphy H, Gilligan E, Joyce L, Sarma S, Keegan C & Rowland M. National Clinical Practice Guideline on Postnatal Midwifery Care for the Mother and Infant: National Women and Infants Health Programme and the Institute of Obstetricians and Gynaecologists. 2026

