

Postpartum Warning Signs

With all the changes occurring in your body after childbirth, you may have difficulty knowing if something you experience is a natural part of the postpartum period or a sign of a problem. This chart describes the discomforts and danger signs that are most often confused and how to tell the difference. Because no two women are alike, your health-care provider's advice may differ from these suggestions. Please discuss with your birth attendant and your childbirth educator any therapeutic measures you take or any questions you have.

PROBLEM	ACTION	CAUSE	
BREAST PAIN Nipples are sore or cracked.	Gently massage own milk into nipples. Avoid alcohol, soap, and perfumed creams. If problem persists, contact childbirth educator, midwife, or lactation consultant.	During nursing, nipple probably not centered over baby's tongue or far enough inside her mouth. Baby may be chewing or pulling nipple.	
Small, red, tender lump develops on breast.	Nurse more often and longer. Change baby's position during feedings. Hand express remaining milk from breast.	Clogged milk duct.	
Breast feels hard, tight, and tender two to five days after birth.	Nurse more often or hand express excess milk. Apply ice packs. (If not nursing, avoid expressing milk. May use acetaminophen for pain.)	Breast engorged as milk supply comes in.	
Tender, reddened area or entire breast is hot and hard. (May also have fever, chills, nausea, or aching.)	NOTIFY YOUR BIRTH ATTENDANT	You may have mastitis (breast infection).	
LEG PAIN. Painful area is hot, swollen, and red.	NOTIFY YOUR BIRTH ATTENDANT	May have thrombophlebitis (blood clot with inflammation).	
Sharp cramp in calf (charley horse).	Sit with leg straight, foot flexed. Gently stretch upper body toward foot till pain eases.	Cause not definite; may be due to too much or too little calcium.	
URINARY DIFFICULTY. Urine is dark and concentrated; may have strong odor.	Drink more fluids (at least eight cups of water daily). If problem persists more than 24 hours, notify birth attendant.	Insufficient fluid intake.	
Urge to urinate is frequent, but little urine is passed and is accompanied by pain. (May have pain in back, side, or lower abdomen. Urine may be dark and concentrated).	NOTIFY YOUR BIRTH ATTENDANT	May have cystitis (bladder infection).	
VAGINAL DISCHARGE Discharge is rusty or cream colored.	Use sanitary pads. Do not use tampons.	Normal postpartum discharge (lochia).	OTHER WARNING SIGNS <hr style="width: 50%; margin: 0 auto;"/> Fever over 100.4° F for more than 24 hours. Intense, persistent episiotomy pain. Intense vaginal or pelvic pain NOTIFY YOU BIRTH ATTENDANT
Lochia returns to bright red color.	NOTIFY YOUR BIRTH ATTENDANT	A piece of placenta may remain inside uterus.	
Discharge with pain, itching, foul odor, or foamy texture.	NOTIFY YOUR BIRTH ATTENDANT	May have uterine or vaginal infection.	