

Elective Cesarean Section (C-section)

Cumberland Regional Health Care Centre

If you have questions before your surgery, call the Labour and Delivery Unit:

› Phone: 902-667-5400 (extension 6144)

Elective Cesarean Section (C-section)

What is a cesarean section (c-section)?

- A c-section is a surgery done to deliver a baby. It is done through an incision (cut) in your abdomen (belly) and uterus (womb). You and your obstetrician (a doctor who cares for pregnant people) will decide together if a c-section is right for you.
- You may choose to have an elective (by choice) c-section because:
 - › you have had a c-section before.
 - › your baby is in a breech (feet or bum first) or a transverse (sideways) position.
 - › you have placenta previa (your placenta is covering your cervix [opening to the uterus]).
 - › you are having more than 1 baby (like twins).
- You will be asked to sign a consent form to show that you understand and agree to the surgery. The consent form is usually signed in your health care provider's office or in the Labour and Delivery Unit.
- Your health care provider's office or hospital nursing staff will give you the date and time of your surgery.
- You will need to have blood work done the morning of your surgery. Please bring your provincial health card and your prenatal records with you.

The night before your surgery

- You may eat solid food until midnight. **Do not eat any food (including gum or candy) after midnight** the night before your surgery.
- You may drink liquids until midnight. **Do not drink any liquids (including water, energy or sport drinks, milk or yogurt drinks, or pop) after midnight** the night before your surgery.
- **Do not smoke after midnight the night before your surgery or the morning of your surgery.**
- You may be asked to take medications to lower acid reflux (heartburn) the night before and morning of your surgery.
 - › If you are taking any other medications, your health care provider will tell you if you should take them on the day of your surgery.

- Please take off all jewelry at home. **You must remove any item used to pierce any body part** (like your nose, belly button, tongue, face, or ear).
- **Do not** wear makeup, nail polish, or gel nails to the hospital.
- Arrive 3 hours before your surgery. Go to the registration desk at the Emergency entrance. After you register, go to the Labour and Delivery Unit on the 2nd floor.
- The nurses will help you get ready for surgery. They will fill out a nursing admission form, measure your height and weight, and check your vital signs (blood pressure and temperature, and your baby's heart rate). The nurse will answer any questions you have.
- Before you go to the Operating Room (O.R.), you may need a catheter (a thin, hollow tube) put in your bladder to drain urine (pee). The catheter usually stays in place until the next morning.
- A nurse will take you to the O.R.

What is anesthesia?

- Anesthesia is medication to relax you and stop you from feeling pain during surgery.
- Spinal anesthesia (numbing medication injected in the space around your spine) is used most often for c-sections. You will be awake during the surgery, and you will be able to see your baby right away after they are born. **When you have a spinal anesthetic, you can bring 1 support person into the O.R. with you.**
- If you have a general anesthetic, you will be asleep during the surgery. **When you have a general anesthetic, a support person cannot come into the O.R. with you.**
- You and the anesthesiologist (a doctor who gives you anesthesia for surgery) decide together what anesthesia is best for you and your baby.

What will happen after my baby is born?

- The nurse will check your baby.
- You may be able to have skin-to-skin contact with your baby while you are in the O.R. During skin-to-skin contact, the baby is placed on your bare chest. This has many benefits for both you and your baby.

- The nurse will take you and your baby to the recovery room.
 - › Your support person should be able to stay with you if you wish.
 - › You can keep holding your baby.
 - › We will help you start breast or chestfeeding, if you wish.
- If you had a general anesthetic, we will bring your baby to the Women and Children's Unit. They will stay there until you are fully awake.
 - › Your support person can go with your baby to the unit and do skin-to-skin contact, if they wish.
- When you are fully awake, we will bring you and your baby to the recovery room.
- You may have 1 support person stay overnight with you.

At home

Call the hospital or 911, or go to the nearest Emergency Department right away if you have:

- › Fever (temperature above 38 °C or 100.4 °F) or chills
- › More swelling, redness, or warmth around your incision
- › More drainage (fluid) from your incision
- › A bad smell from your incision
- › Blood clots bigger than the size of a golf ball (smaller clots are normal)
- › Nausea (feeling sick to your stomach)
- › Vomiting (throwing up)

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here:
<https://library.nshealth.ca/Patients-Guides>

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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