

# The Candy is Out of the Wrapper: The Journey of the Fourth Trimester

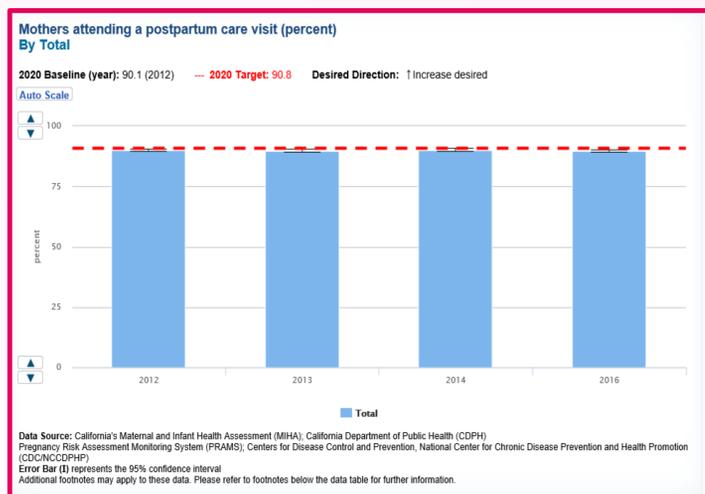
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## Background

The fourth trimester is a transition phase post-delivery that is marked by significant biological, physiological, and social changes. The fourth trimester encompasses the care of the women-infant dyad in the first three months post delivery. The American College of Obstetricians and Gynecologists as well as Healthy People 2020 have noted that there is a lack of women attending their postpartum visits. Currently as many as 40% of women do not attend their postpartum visit. Evidence based research has suggested a neglect in the care of the postpartum mother with a need to make change to enhance the well-being of the mother-infant dyad.



## Introduction

Change needs to occur while a mother is in an inpatient setting to provide her with better education and acknowledgement of the postpartum period including care for herself as well as her newborn child. An action plan will be put in place to begin discharge instructions at the start of the postpartum process, to provide mothers with clear concise information and resources to have a successful transition home.



## Methodology

New resources/education provided to mothers will include the following:

- UPMC Ubicare
- Cipher Health Discharge Calls
- Postpartum RN Phone calls
- "I delivered" bracelets
- AWHONN POST BIRTH Magnets
- Outpatient Lactation Appointments
- Safe Harbor referrals
- Outpatient mental health resources
- Health wise pamphlets
- Home Health Referrals

## Conclusion

- In conclusion, the authors will be checking with the hospital's obstetrical offices for statistics on postpartum visits to see what percentage of women truly do attend their appointment.
- Also, data will be collected to see the amount of outpatient lactation appointments conducted as well as the amount of referrals placed for Safe Harbor and home health nursing.
- Data will be collected from cipher health phone calls and in return postpartum RN's will call patient's who "flag" for further follow up.
- It will also be our responsibility to follow up with the perception of the nurses as well as our patients with our new discharge process.

## References

- Office of Disease Prevention and Health Promotion. (2020, March 2). Maternal, infant, child health. Retrieved from <https://www.healthypeople.gov/2020/data/Chart/4855?category=1&by=Total&fips=-1>.
- The American College of Obstetricians and Gynecologists. (2018). Optimizing postpartum care. Retrieved from <https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Optimizing-Postpartum-Care>
- Verbiest,S., Tully, K., & Stuebe, A. (2017). Promoting maternal and infant health in the 4<sup>th</sup> trimester. *Zero to Three*, March 2017.

**SAVE YOUR LIFE!** Get Care for These **POST-BIRTH Warning Signs**

Most women who give birth recover without problems. But any woman can have complications after the birth of a baby. Learning to recognize these POST-BIRTH warning signs and knowing what to do can save your life.

**Call 911 if you have:**

- Pain in chest
- Obstructed breathing or shortness of breath
- Seizures
- Thoughts of hurting yourself or your baby

**Call your healthcare provider if you have:**

- Bleeding, soaking through one pad/hour, or blood clots, the size of an egg or bigger
- Incision that is not healing
- Red or swollen leg, that is painful or warm to touch
- Temperature of 100.4°F or higher
- Headache that does not get better, even after taking medicine, or bad headache with vision changes

Trust your instincts. Always get medical care if you are not feeling well or have questions or concerns.

Tell 911 or your healthcare provider: "I had a baby on \_\_\_\_\_ and I am having \_\_\_\_\_."