

*Mamavela*

# The Fourth Trimester: Your Recovery After Birth, Week by Week

Recovering after birth: your body, your mood, feeding and the help you are entitled to ask for.



Free sample

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# Contents

|                                                                                  |          |
|----------------------------------------------------------------------------------|----------|
| <b>Welcome to the fourth trimester</b>                                           | <b>3</b> |
| What this book is, and what it is not                                            | 3        |
| US and UK: same body, different systems                                          | 4        |
| How to use this book                                                             | 4        |
| <b>Chapter 1. The fourth trimester: what to expect and when you will be seen</b> | <b>5</b> |
| Why the weeks after birth matter so much                                         | 5        |
| When you should be seen in the United States                                     | 5        |
| When you should be seen in the United Kingdom                                    | 5        |
| Your postpartum care plan                                                        | 6        |
| My care plan: who to call (printable, fill in)                                   | 6        |
| What the first twelve weeks usually look like                                    | 7        |

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# Welcome to the fourth trimester

You have just done something enormous. Whether your baby arrived after a long labor, a quick one, an assisted birth or a cesarean, your body has changed in a matter of hours, your sleep has been turned upside down, and a tiny person now depends on you around the clock. It is completely normal to feel joy, exhaustion, tenderness, doubt and pride, sometimes all within the same hour.

The American College of Obstetricians and Gynecologists (ACOG) calls the weeks after birth the "fourth trimester". In its Committee Opinion on postpartum care, it describes this period as a time of joy and excitement that "can present considerable challenges for women, including lack of sleep, fatigue, pain, breastfeeding difficulties, stress, new onset or exacerbation of mental health disorders, lack of sexual desire, and urinary incontinence". In other words: what you may be living through is common, it is recognized by doctors, and it deserves proper care.

This book is here to give you that care in a calm, organized form. It gathers in one place what the official health bodies of the United States and the United Kingdom say about recovering from birth, and turns it into plans, checklists and pages you can fill in. Every fact in these pages comes from a named source, listed at the end with its full web address and the date we checked it.

## What this book is, and what it is not

This book is information, not medical advice. It cannot examine you, it does not know your history, and it never replaces your midwife, your obstetrician, your family doctor (GP), your health visitor or your pediatrician. When something worries you, the right move is always to call them. You will find this sentence many times in these pages, on purpose.

You will not find any medicine doses, supplement recommendations or promises here. You will find what normal recovery usually looks like and what is not normal, the official warning signs with the numbers to call in the US and the UK, practical recovery for vaginal and cesarean births, pelvic floor exercises and the guidance on returning to exercise, feeding basics for breast, formula and combination feeding, a home plan for rest and visitors, an honest chapter on emotions, a chapter for your partner or support person, special situations (twins, premature birth, gestational diabetes, loss), your postpartum check, and checklists you can print.

### **Every birth counts.**

Vaginal birth, assisted birth, planned or emergency cesarean, with or without an epidural: each is a real birth, and each deserves the same respect and the same care afterwards. There is no "better" way to have had your baby.

## US and UK: same body, different systems

Recovery is the same whether you gave birth in Ohio or in Leeds, but the names and the appointments differ. Here is a quick key to the words you will meet in this book.

| You may hear (US)                                | You may hear (UK)           | What it means                                                   |
|--------------------------------------------------|-----------------------------|-----------------------------------------------------------------|
| OB-GYN, obstetric care provider, nurse-midwife   | Midwife, obstetrician, GP   | The professionals who look after your recovery                  |
| Pediatrician                                     | Health visitor, GP          | Your baby's routine care (the health visitor also supports you) |
| Postpartum visit, comprehensive postpartum visit | 6-week postnatal check      | The appointment that reviews your recovery                      |
| Cesarean birth, C-section                        | Caesarean section           | Birth through a cut in the abdomen                              |
| Diaper                                           | Nappy                       | Same thing, same quantity                                       |
| 911                                              | 999 (or 112)                | Emergency number                                                |
| 988                                              | NHS 111, Samaritans 116 123 | Urgent mental health help (see Chapter 9)                       |

## How to use this book

You do not have to read it in order. If you are pregnant now, read Chapters 1, 2, 8 and 10 with your partner, and fill in the plans before the birth. If you are already home with your baby, start with Chapter 2 (warning signs), then go straight to the chapter that matches your birth: Chapter 4 for a vaginal birth, Chapter 5 for a cesarean. Keep Chapter 14 (checklists) open on the fridge or on your phone.

A note on words. Health bodies use different words for the person who gave birth: woman, mother, mom, mum, birthing parent. We mostly say "you". Whatever your family looks like, this book is for you.

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# Chapter 1. The fourth trimester: what to expect and when you will be seen

## Why the weeks after birth matter so much

For a long time, care after birth was organized around a single appointment, usually about six weeks after delivery. In 2018 ACOG revised its guidance to change that. Its Committee Opinion No. 736, "Optimizing Postpartum Care" (reaffirmed in 2025), states that "postpartum care should become an ongoing process, rather than a single encounter, with services and support tailored to each woman's individual needs".

## When you should be seen in the United States

ACOG recommends three things about timing:

- **Within the first 3 weeks:** "All women should ideally have contact with a maternal care provider within the first 3 weeks postpartum." ACOG explains that this first contact does not have to be an office visit; it can be in person or by phone, and is meant "to address acute postpartum issues".
- **Ongoing care as needed:** the first contact "should be followed up with ongoing care as needed".
- **A comprehensive visit no later than 12 weeks:** care should conclude "with a comprehensive postpartum visit no later than 12 weeks after birth". ACOG adds that the timing "should be individualized and woman centered".

ACOG also says that women with severe high blood pressure should be seen within 72 hours. If you had high blood pressure in pregnancy or at birth, ask before you leave the hospital exactly when your blood pressure will be checked, and by whom.

One sentence in the ACOG document deserves to be framed: the comprehensive postpartum visit "is a medical appointment; it is not an 'all-clear' signal". Completing it "does not obviate the need for continued recovery and support through 6 weeks postpartum and beyond". You do not have to be "back to normal" at your check. Recovery continues.

## When you should be seen in the United Kingdom

In the UK, your midwife and your health visitor are your first points of contact after you go home; the NHS pages on recovery repeatedly tell you to speak to them about stitches, bleeding, feeding and mood. The NHS then describes a postnatal check for you: "You should have your postnatal check 6 to 8 weeks after your baby's birth to make sure you feel well and are recovering properly." Your GP surgery "should offer and provide you with a postnatal check", and you "can request an

appointment for a check yourself, especially if you have any concerns".

Your baby has their own 6 to 8 week check with a GP. The NHS notes that your check "can be done immediately before or after your baby's 6 to 8 week check", or at a separate time if you prefer.

## Your postpartum care plan

ACOG recommends that planning for the weeks after birth begins during pregnancy, with "a postpartum care plan that addresses the transition to parenthood and well-woman care", and a care team that includes "family and friends who will provide social and material support in the months following birth". It also points out that women "often are uncertain about whom to contact for postpartum concerns", and suggests that the care plan include contact information and written instructions about follow-up.

That is exactly what the next page is for. Fill it in before the birth if you can, or as soon as you are home. Photograph it, and give a copy to your partner or support person.

## My care plan: who to call (printable, fill in)

| Need                                                      | Name                       | Phone number | Hours  |
|-----------------------------------------------------------|----------------------------|--------------|--------|
| My main provider for my recovery (OB-GYN, midwife or GP)  |                            |              |        |
| Maternity unit or labor and delivery triage line          |                            |              |        |
| After-hours number                                        |                            |              |        |
| My baby's doctor or health visitor                        |                            |              |        |
| Lactation or breastfeeding support                        |                            |              |        |
| Mental health support (therapist, perinatal team, if any) |                            |              |        |
| My pharmacy                                               |                            |              |        |
| Emergency number in my country                            | 911 (US) / 999 or 112 (UK) |              | Always |

### My first postpartum contact is planned for (date):

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My comprehensive postpartum visit / 6-8 week check is planned for (date): \_\_\_\_\_

Conditions from my pregnancy or birth that need follow-up (for example high blood pressure, gestational diabetes, heavy bleeding, a severe tear): \_\_\_\_\_

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## What the first twelve weeks usually look like

No two recoveries are identical, and the official sources are careful not to promise timelines. Still, it helps to see the broad shape of the fourth trimester. The table below only uses time frames given by the sources cited in this book.

| Time after birth     | What the official sources describe                                                                                                                                       |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First hours and days | Bleeding is heaviest; your breasts make colostrum; feeding may be very frequent (NHS). After a cesarean, most women go home 1 or 2 days after the birth (NHS).           |
| Days 2 to 6          | Milk usually "comes in": around 2 to 4 days after birth (NHS), or within 3 to 6 days (US Office on Women's Health). Breasts may feel full and tender.                    |
| First 2 weeks        | Baby blues, if they come, usually ease within about 2 weeks (NHS, NIMH). Symptoms of postpartum psychosis, which is rare, usually start within the first 2 weeks (NHS).  |
| Within 3 weeks       | ACOG recommends contact with a maternal care provider. You can get pregnant again from 3 weeks after birth (NHS).                                                        |
| Weeks 2 to 3         | Pain after an episiotomy rarely lasts longer than 2 to 3 weeks; if it does, speak to a professional (NHS).                                                               |
| By about 4 weeks     | Episiotomy stitches should heal within 1 month (NHS).                                                                                                                    |
| Weeks 6 to 8         | UK postnatal check (NHS). Many women return gradually to driving, exercise and sex after a cesarean, "when you feel able", which "may not be for 6 weeks or so" (NHS).   |
| Around 8 weeks       | Separated tummy muscles usually come back together by the time your baby is 8 weeks old (NHS).                                                                           |
| By 12 weeks          | Comprehensive postpartum visit at the latest (ACOG).                                                                                                                     |
| Up to 1 year         | Postpartum depression can start up to a year after birth (NHS, ACOG). The CDC asks you to know the urgent warning signs during pregnancy and in the year after delivery. |

Keep this in mind: these are typical patterns, not deadlines. If your recovery looks different, that is a reason to talk to your provider, not a reason to worry alone.

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# End of the sample

Thank you for reading this far. We hope these first pages already feel useful, and that you can see how the rest of the book is built: clear steps, pages to fill in, sources you can check.

**The full book has 57 pages.**

Get it here: <https://mamavela.com/shop/the-fourth-trimester/>

One-time payment, instant PDF.