WOMO HEALTH

WOMO HEALTH GUIDE

Postpartum

After birth, *you matter too.*

Notice your recovery.
Know when to speak up.

What to notice · What to ask · What to track

Your body has a story. WOMO reads it.

01 / BEFORE YOU BEGIN

Your recovery matters

The weeks and months after birth bring changes to your body and mind. You deserve care that pays attention to you, not only your baby.

HOW TO USE THIS GUIDE

Read the warning signs, jot down what you notice, and bring the recovery log and provider summary to your visits.

CARE IS ONGOING

A postpartum check-in should happen early, with a full visit no later than 12 weeks after birth and more visits as needed.

SAY IT EVERY TIME

Tell any clinician you see during the year after birth that you were recently pregnant. It can change what they consider.

This guide is educational, not a diagnosis. A new or worrying symptom is a reason to contact your care team, even before a scheduled visit.

02 / READ THIS FIRST

Warning signs after birth

Serious problems can happen after you go home, including weeks or months later. Seek immediate care for these warning signs.

- [ ] Headache that worsens or will not go away
- [ ] Bleeding that soaks a pad in an hour
- [ ] Vision changes or fainting
- [ ] Large clots or severe belly pain
- [ ] Chest pain or a fast-beating heart
- [ ] Swollen or painful leg
- [ ] Trouble breathing
- [ ] Extreme swelling of hands or face
- [ ] Fever of 100.4°F or higher
- [ ] Thoughts of harming yourself or baby

Call 911 for a medical emergency. Say that you gave birth recently. Do not wait to finish a tracker.

03 / YOUR MIND MATTERS

When mood needs care

The “baby blues” often ease within one to two weeks. Depression, anxiety, or another mental health condition can begin later and deserves support.

SPEAK UP ABOUT CHANGES

Sadness, hopelessness, panic, persistent worry, rage, or feeling disconnected are reasons to tell your care team.

SLEEP AND FRIGHTENING THOUGHTS

Mention inability to sleep even when you can, or intrusive thoughts that frighten you. You do not have to handle this alone.

ASK FOR SCREENING

“Can we screen for postpartum depression and anxiety, and talk about support or treatment?”

SUPPORT NOW

National Maternal Mental Health Hotline: 1-833-TLC-MAMA. If you may harm yourself or your baby, seek emergency help immediately.

04 / PHYSICAL RECOVERY

Healing is not one deadline

Recovery may continue after the first postpartum visit. Tell your provider what has changed or still interrupts your life.

- [ ] Bleeding or pain that worries you
- [ ] Persistent exhaustion
- [ ] Pain, pressure, or leaking urine
- [ ] Hair shedding or thyroid concerns
- [ ] Pain with sex
- [ ] Breast or feeding discomfort
- [ ] Back or wrist pain
- [ ] Sleep disruption
- [ ] Belly muscle concerns
- [ ] High blood pressure readings

Ask whether pelvic floor therapy, blood pressure follow-up, or blood tests for iron or thyroid make sense in your situation.

05 / SPECIFIC FOLLOW-UP

Bleeding, pressure, and energy

A provider can help decide whether symptoms fit expected healing or need evaluation. Bring details about timing and severity.

BLOOD PRESSURE

If you had high blood pressure during pregnancy, ask about early blood pressure checks and your ongoing care plan.

BLOOD LOSS AND FATIGUE

If you had heavy bleeding or feel persistently exhausted, ask whether a blood count or ferritin would help.

THYROID SYMPTOMS

Mood, energy, heart rate, and temperature changes can overlap with thyroid issues. Ask whether testing fits your history.

FEEDING AND MEDICINES

Tell your provider how you feed your baby and what medicines or supplements you use before changing treatment.

06 / PRINT AND REPEAT

Your recovery tracker

Use this page over the first weeks and again when symptoms change. It is a record for care, not a reason to delay urgent help.

WEEK	BLEEDING / PAIN	SLEEP / ENERGY	MOOD / BODY
1			
2			
3			
4			
5			

Also note: blood pressure if known, feeding, help at home, and what feels hardest.

07 / KEEP THE VISITS

Questions for follow-up

Postpartum care can happen in several contacts. Bring up what matters now, even if the standard visit topics have moved on.

HEALING AND BLEEDING

“Is this bleeding or pain expected for my delivery and recovery? What changes would require a call?”

MOOD AND SLEEP

“Can we screen for depression and anxiety? What support is available while I am exhausted?”

BLOOD PRESSURE AND LABS

“Do I need blood pressure follow-up or iron or thyroid testing based on my symptoms?”

BODY AND FEEDING

“Would pelvic floor therapy help? What can we do about pain, leaking, or feeding concerns?”

FUTURE PLAN

“What contraception fits my goals and feeding plan? Who will follow up with me and when?”

08 / WHAT TO SAY

Words for the room

NAME THE TIMING

“I gave birth ___ weeks ago. This symptom started ___ and is getting ___.”

DESCRIBE THE IMPACT

“I cannot ___ because of this. I need help assessing what is happening.”

ASK ABOUT MOOD

“My mood or anxiety feels different from my usual self. Can we screen and make a support plan?”

ASK ABOUT A PHYSICAL SYMPTOM

“Would my bleeding, blood pressure, iron, thyroid, or healing need evaluation?”

IF YOU FEEL DISMISSED

“I am concerned because this changed after birth. What are we ruling out, and when should I return?”

09 / PEOPLE AROUND YOU

Make support specific

Recovery is easier to discuss when you can name the help you have and the help you need. Your care team can work with you on a plan.

ASK FOR PRACTICAL HELP

“Could you handle meals, laundry, or a short break so I can rest or attend a visit?”

SHARE THE WARNING SIGNS

Show a trusted person the urgent signs page. Ask them to help you seek care if you are too unwell to make the call.

KEEP YOUR OWN FOLLOW-UP

Ask who to contact for physical symptoms, mood care, feeding support, and ongoing primary care.

You can ask for help with pain, sleep, mood, and daily functioning. You are a patient too.

10 / BRING THIS PAGE

Your provider summary

BIRTH DATE, DELIVERY, AND PREGNANCY COMPLICATIONS

BLEEDING, PAIN, BLOOD PRESSURE, AND HEALING

MOOD, SLEEP, AND THOUGHTS THAT CONCERN ME

FEEDING, MEDICINES, SUPPLEMENTS, AND HELP AT HOME

WHAT I AM ASKING FOR TODAY AND NEXT VISIT

TELL EVERY PROVIDER

“I gave birth on ___.” Recent pregnancy matters during the year after birth, including at urgent or emergency visits.

Sources: CDC, Urgent Maternal Warning Signs; ACOG, Optimizing Postpartum Care.

11 / PLAIN LANGUAGE

Words worth knowing

POSTPARTUM

The period after pregnancy and birth, including ongoing recovery.

BABY BLUES

Common short-lived mood changes that typically improve within one to two weeks.

POSTPARTUM DEPRESSION

Depression after birth that merits screening, care, and support.

PREECLAMPSIA

A serious blood pressure condition that can also occur after birth.

CBC

Complete blood count; a test that can help assess anemia.

FERRITIN

A blood marker often used to assess stored iron.

PELVIC FLOOR THERAPY

Physical therapy that can address pelvic pain, pressure, or bladder issues.

POSTPARTUM THYROIDITIS

Thyroid inflammation after birth that may affect energy or mood.

Your body has been telling you something. Now you have the words.

Log mood, sleep, energy, bleeding, and recovery changes with Mae. Bring your notes to your care team.

Take the free 10-minute health assessment at womo-health.com

Explore more guides in the WOMO Library

WOMO

Track your health with Mae

SCAN TO DOWNLOAD WOMO

womohealth.onelink.me/eD3e/download

TECHMAE

Join the women's community

SCAN TO JOIN TECHMAE

go.onelink.me/LF9l/e3f27bf4

With you in this, the WOMO team ♥

Your body has a story. WOMO reads it.

This guide is educational and is not medical advice. It does not diagnose, treat, or replace care from a licensed provider. If you think you are having a medical emergency, call 911 or go to the nearest emergency room.