

Postpartum Lesson 5
Intake Forms and Assessment Plus Considerations



What's included:

- **Postpartum intake form and assessments**
- **Postpartum exercise considerations**

As with a prenatal intake form,
general medical history must be
obtained



Postpartum
intake form

Additions to the postpartum intake
form should include:

Details about
activity during
pregnancy

Information
about any
pregnancy
induced
injuries

Type of birth
and any
tearing or
episiotomy

Breast feeding
considerations

Ask if they are
seeking Pelvic
floor physical
therapy

List of PFD
conditions

Sample Postpartum Intake Form

SAMPLE POSTPARTUM INTAKE FORM

Client Identification: _____

Please indicate type of most recent birth, and list any complications (e.g., tearing, episiotomy):

C-section Vaginal

List any children, DOB, and any complications with any other pregnancies:

List any activity level performed following the delivery:

Please describe your lifestyle habits. For example, are you active during the day, or do you mostly sit? In what sports or physical/recreational activities do you participate?

Have you experienced any emotional struggles (e.g., depression, anxiety) since giving birth?

Check all areas below in which you are experiencing pain, stiffness, numbness, or inflammation:

<input type="checkbox"/> Back	<input type="checkbox"/> Elbow	<input type="checkbox"/> Shoulder
<input type="checkbox"/> Glutes	<input type="checkbox"/> Thumb	<input type="checkbox"/> Neck
<input type="checkbox"/> Legs (e.g., Sciatica)	<input type="checkbox"/> Pelvis	<input type="checkbox"/> Wrist

Please explain in more detail any items that were checked above: _____

SAMPLE POSTPARTUM INTAKE FORM

Client Identification: _____

Please check the box of any of the following symptoms you experience:

- Anemia
- Bleeding unexplained
- Carpal Tunnel
- Diastasis Recti
- Digestive issues (i.e., reflux, constipation)
- Gestational Diabetes
- Heart Disease
- Hemorrhoids/varicose veins
- High/Low BP
- Incontinence
- Other _____

Please explain in more detail any of the items that were checked above: _____

Please describe any other information that you think would be beneficial: _____

THANK YOU

Postpartum Fitness Assessments

The intention of the initial appointment or consultation is to observe and listen to the client. Some information may come out that was not on the intake form, listening to clients likes and dislikes, comfort levels and observing her form and technique are crucial before any exercise design can occur. The first appointments should include:

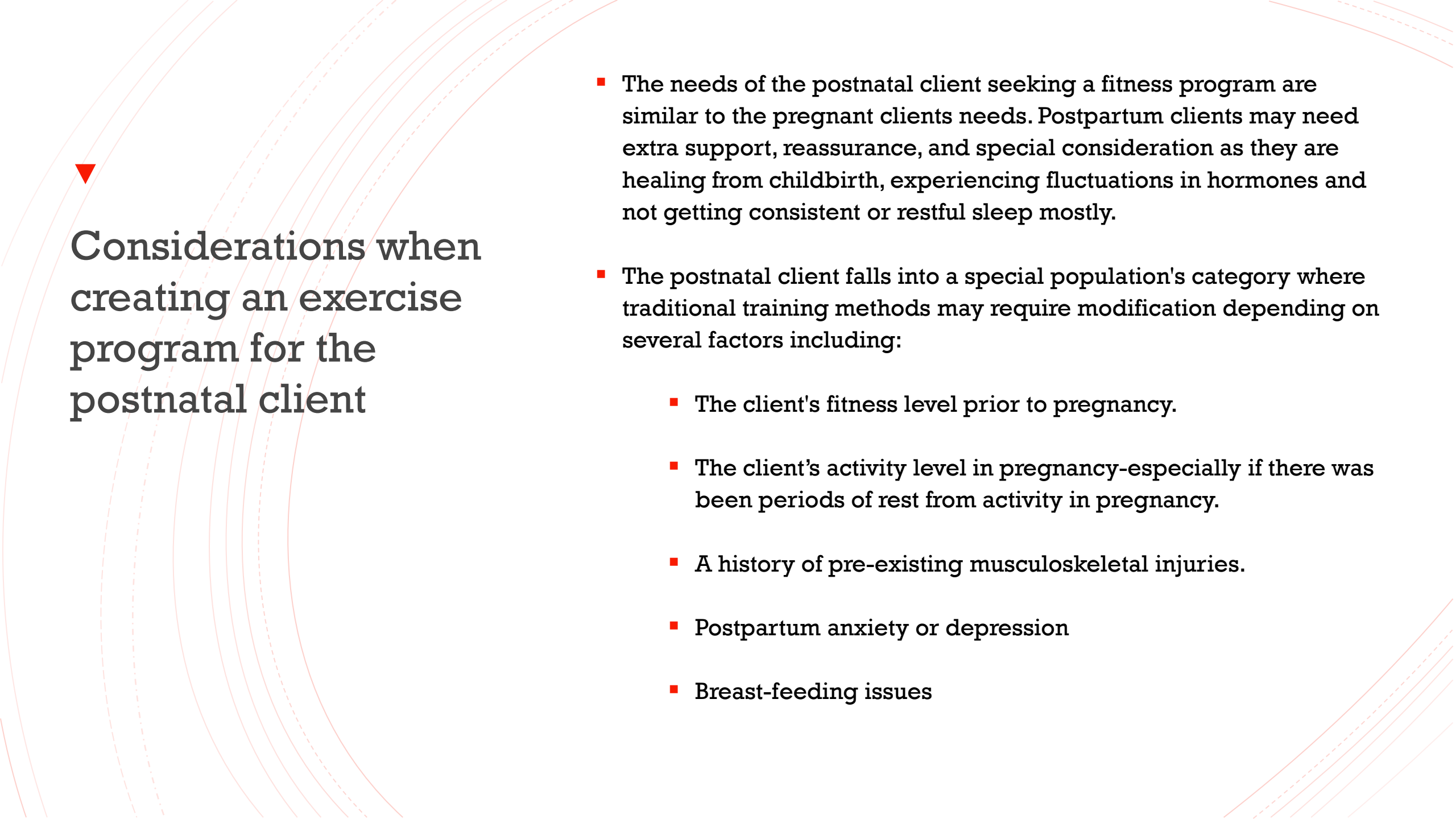
- Observe woman's posture both statically and dynamically.
- Teach her the ABC's.
- Look for any pelvic floor dysfunction both by observing and listening to her.
- Have her complete 5 essential movements to further evaluate where dysfunction and strengths are in her body and what kinds of movements seem challenging.
- Based on essential movements, begin to use other tests like putting movements together repetitively to test endurance and function with multi-planer, and multi-body parts moving in sequence.
- Use this information to begin to design future workouts and create an exercise program for this client.

Common posture mistakes among postpartum women

- Rounding of upper back while nursing or holding baby
 - Can be corrected by practicing better ergonomically friendly positions while nursing
 - Use a nursing pillow
 - Avoid rounding back towards baby, rather bring baby up towards mother
 - Learn how to use baby carrier properly and avoid long periods of carrying baby in carrier
 - Practice better methods of carrying car seat
- Exaggerated internal rotation of the shoulders - be cautious not to internally rotate shoulders when nursing or holding baby and practice external strengthening exercises.

Other ways to improve posture with efficient breathing and movement

- Teach the “A,B,C’s”
 - Improve core to pelvic floor strength
 - Improve breathing
 - Increase circulation
 - Avoid PFD issues created by too much intra-abdominal tension by improper alignment.
- Cue her to engage her TVA (transverse abdominus) creating enough tension to enhance her posture.
- Direct client on non-exercise movements to improve their posture and function is important, for example teaching how to move from lying to sitting without creating additional stress on the abdominal muscles.
- Teach her to avoid sitting or standing in one position for too long to avoid fatigue which essentially may lead to improper alignment.
- Advise her to “recover” and rest between workouts and practicing good nutrition to the muscles may also improve alignment.
- Have her practice balancing movements to improve unilateral strength.



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Considerations when creating an exercise program for the postnatal client

- The needs of the postnatal client seeking a fitness program are similar to the pregnant clients needs. Postpartum clients may need extra support, reassurance, and special consideration as they are healing from childbirth, experiencing fluctuations in hormones and not getting consistent or restful sleep mostly.
- The postnatal client falls into a special population's category where traditional training methods may require modification depending on several factors including:
 - The client's fitness level prior to pregnancy.
 - The client's activity level in pregnancy-especially if there was been periods of rest from activity in pregnancy.
 - A history of pre-existing musculoskeletal injuries.
 - Postpartum anxiety or depression
 - Breast-feeding issues

Postpartum depression or anxiety

Definition:

- Perinatal depression is a mood disorder that can affect women during pregnancy and after childbirth (called postpartum depression).
- Mild to extreme levels from “baby blues” to Postpartum psychosis

Symptoms:

- Extreme sadness
- Anxiety
- Extreme Fatigue
- Difficulty caring for themselves or others

Screening: Both the Edinburgh Postnatal depression scale questionnaire and a PAR-Q medical history questionnaire will help give insight to healthcare practitioner and patient on treatment methods.

For Full Questionnaire: <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/practicing-safety/Documents/Postnatal%20Depression%20Scale.pdf>

Can Exercise help treat women with Postpartum Depression?

- According to several studies, exercise has been proven as an effective method of treating and preventing depression. Some studies suggest that physical activity may be as powerful as anti-depressants for treating mild to moderate depression over time.
<https://pubmed.ncbi.nlm.nih.gov/26003406/>
- Considerations for exercise environment to ease feelings of PP anxiety:
 - Convenience
 - Community
 - Clean and safe exercise environment

Breastfeeding considerations regarding exercise

- Release of Lactic acid through breast milk may alter taste but does not affect quantity as long as woman is properly hydrated
 - Exercise does not seem to affect lactation and lipid effects in PP women
[https://pubmed.ncbi.nlm.nih.gov/25138123/#:~:text=There%20were%20no%20significant%20differences ,and%20lactation%2Dassociated%20hormone%20levels.](https://pubmed.ncbi.nlm.nih.gov/25138123/#:~:text=There%20were%20no%20significant%20differences,and%20lactation%2Dassociated%20hormone%20levels.)
- Soreness of breasts and nipples
- Conditions from nursing that may affect woman's ability to comfortably perform upper body exercises:
 - Engorgement: Breasts may become hard and sore from being filled with milk.
 - Mastitis: Infection that can occur to women who are and are not nursing/bacteria enters breast through crack in nipple/One area is reddened, sore and hot /fever over 100.4 degrees F.
 - “Let Down” reflex: Breastmilk may feel like it is leaking out or it is/Occurs when breasts become stimulated, exercise can do this.