



Postpartum Support Quick Reference

Save this two-page call sheet, add your local contacts, and share it with the person most likely to notice when you are not yourself. It covers urgent warning signs and practical paths to qualified support during the first year after birth.

Get medical care now for urgent warning signs

Seek immediate medical care for a severe or worsening headache, vision changes, fainting, chest pain or a fast heartbeat, trouble breathing, fever of 100.4 F (38 C) or higher, severe belly pain, heavy bleeding, extreme swelling of the hands or face, severe swelling or pain in one arm or leg, overwhelming weakness, or thoughts of harming yourself or your baby. Tell the care team: **I am pregnant or I gave birth within the last year.** If something feels wrong, trust your instincts and get help.

- [CDC HEAR HER urgent maternal warning signs](#)

1. Blood pressure and postpartum preeclampsia

Postpartum preeclampsia can develop after delivery, even if your blood pressure was normal during pregnancy. It most often begins within a few days but can occur up to six weeks after birth.

Ask your clinician whether you should monitor at home and what action plan to follow. If either number is **140/90 or higher**, call your clinician right away. A reading of **160/110 or higher**, or a high reading with warning symptoms, needs immediate medical care.

- [ACOG guide to postpartum preeclampsia](#)
- [Preeclampsia Foundation blood pressure guide](#)

OB or midwife

After-hours number

Nearest emergency department

My usual blood pressure

2. Mental health support

You do not need a diagnosis to ask for help. Tell a clinician if you have persistent sadness or numbness, intense anxiety or dread, trouble bonding, intrusive thoughts, sudden confusion, paranoia, hallucinations, delusions, extreme agitation, unusually elevated energy, or little need for sleep.

For immediate danger, call 911. For a suicidal or mental-health crisis in the U.S., call or text 988. The maternal hotline and PSI HelpLine below provide support and referrals but are not emergency services.

- [National Maternal Mental Health Hotline: call or text 1-833-TLC-MAMA](#)
- [Postpartum Support International HelpLine and resources](#)
- [988 Suicide and Crisis Lifeline](#)

Mental health clinician

Trusted person I can call

3. Infant feeding and lactation

Ask an IBCLC, pediatrician, OB or midwife, WIC program, or trained peer counselor to observe a feeding and help make a plan that fits your goals, comfort, milk supply, and your baby's growth.

- [U.S. Office on Women's Health breastfeeding support guide](#)
- [Find an IBCLC through USLCA](#)

Pediatrician

Feeding support contact



Build Your Postpartum Support Pathway

Choose the next useful call. Ask for observed, hands-on help where possible, and write down who will follow up and when.

4. Physical recovery

Contact your OB, midwife, or primary-care clinician about worsening pain, incision or wound concerns, painful urination, incontinence, pelvic pressure, painful sex, abdominal separation, limited mobility, or difficulty with daily activities. Ask whether pelvic-floor physical therapy or another postpartum rehabilitation service is appropriate.

Primary-care clinician

Pelvic-floor physical therapist

5. Practical and doula support

Ask for concrete help: meals, sleep coverage, rides, sibling care, appointment notes, medication pickup, laundry, or provider calls. Postpartum doulas provide non-clinical physical, emotional, informational, and household support.

- [Find a DONA-certified doula](#)
- [Fourth Trimester customizable postpartum plan](#)

Person and help they can give

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6. Birth trauma and nervous-system support

If birth or postpartum felt frightening, violating, or overwhelming, look for a therapist or group experienced in perinatal mental health and birth trauma. For non-emergency stress, try one small grounding action while connecting with care: place your feet on the floor, lengthen your exhale, name five things you see, reduce stimulation, drink water, or ask someone safe to sit with you. Grounding can support you, but it does not replace urgent or professional care.

- [PSI specialized support resources](#)
- [Birth Trauma Association](#)

7. Community and safety resources

In the U.S., call 211 or visit 211.org for local food, housing, transportation, childcare, health-care, and financial-assistance resources. For domestic-violence support, call 800-799-SAFE (7233), text START to 88788, or use TheHotline.org. If you are in immediate danger, call 911.

- [Find local help through 211](#)
- [National Domestic Violence Hotline](#)

Make it yours: Add local and culturally relevant resources, confirm insurance and referral needs, save care-team numbers, and ask at every handoff: What symptoms mean I should call, seek urgent care, or get emergency help?

Prepared by Fourth Trimester Podcast with contributions from Casey Keen, MS, author of *The Alchemy of Motherhood*. Educational information only. This guide is not medical advice and does not replace care from a qualified professional. Resources and contact information verified September 19, 2026.

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