



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Dear Colleagues:

The weeks after birth are a critical period for a woman and her infant, setting the stage for long-term health and well-being. There is a need to educate health care providers and patients on the importance of attending postpartum visits and leveraging postpartum care as a doorway to future to future health. During my presidential term, I convened a task force with the goal of redefining the concept of the postpartum visit by reevaluating the timing and content of postpartum care.

The Redefining the Postpartum Visit Task Force revised the American College of Obstetricians and Gynecologists' Committee Opinion on postpartum care (Committee Opinion No. 732, *Optimizing Postpartum Care*) to reflect the importance of the "fourth trimester" period. Instead of a single visit, the new Committee Opinion recommends that services and support should be tailored to each woman's individual needs. It is recommended that all women have contact with their health care providers within the first 3 weeks of the postpartum period. This initial assessment should be followed up with individualized ongoing care as needed, concluding with a comprehensive postpartum visit no later than 12 weeks after birth. The Committee Opinion also highlights the importance of health care providers counseling women who have experienced pregnancy complications, as well as women who may have chronic conditions, to receive timely follow-up care with their obstetrician-gynecologists or primary care providers to reduce the risks of short-term and long-term complications.

We recognized the importance of educational tools to help health care providers implement more comprehensive postpartum care in their practices. To this end, the task force developed the online ACOG Postpartum Toolkit that serves as a companion piece to the revised Committee Opinion. The toolkit includes resources on the key components of postpartum care such as long-term weight management, pregnancy complications, reproductive life-planning, and a sample postpartum checklist for patients to complete before their visit. Reimbursement guidance also is provided in the toolkit.

I would like to thank the members of the Redefining Postpartum Care Task Force, which included Alison Stuebe, MD, MSc; George Saade, MD; Diana Ramos, MD, MPH; Tamika Auguste, MD; Maria Manriquez, MD; Wanda Nicholson, MD, MPH; Carolyn Zelop, MD; John P. Keats, MD, CPE; Mary Rosser, MD, PhD; Martha Gulati, MD, MS; Judette Louis, MD; Elizabeth M. Alderman, MD; Catherine McCarthy, MD; Ira Kantrowitz-Gordon, PhD; Jamille Nagtalon-Ramos, EdD, MSN, WHNP, IBCLC; Florence Momplaisir, MD, MSHP; Zsakeba Henderson, MD; David Chelmow, MD; Stephenie Wallace, MD, MSPH; Christine Olson, MD; Tina Sherman; and ACOG staff, including Christopher Zahn, MD; Debra Hawks, MPH; Ijeoma Obidegwu, MPH; Donna Tyler; and Nevina Jakopin. The efforts of the task force, individually and collectively, were coordinated by Alison Stuebe, MD, MSc.

Sincerely,

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