# Tongue and Lip Tie Center Postoperative Patient Resource Book



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## **Infant Postoperative Pain Management**

### **INFANTS YOUNGER THAN 6 MONTHS:**

### Infant Acetaminophen/Tylenol/Genexa (160mg/5mL concentration)

- Follow the below chart from the Academy of Pediatrics for dosage instructions.
- You can give Tylenol every 4-6 hours, but no more than 4 doses in a 24-hour period:
  - ♦ Example The procedure was at 12 pm. Baby is fussy at 4 pm. Give the first dose of Tylenol. If your baby is still fussy 4 hours later at 8 pm, you may give a second dose. Since you started the first dose at 4 pm, you may only give two additional doses before 4 pm the next day.

How to give the right amount of ACETAMINOPHEN (also known as Tylenol) is different depending on which medicine you plan to give.							
Dose: Give every 4 to 6 hours as needed for fever or pain. DO NOT GIVE MORE THAN 4 DOSES IN 24 HOURS.  Do NOT use with any other medicine containing acetaminophen.							
Weight	Age	Infant's Acetaminophen (160 mg / 5 mL)	Children's Acetaminophen (160 mg / 5 mL)	Children's Acetaminophen Chewables (160 mg)	Children's Acetaminophen Dissolvable Packets (160 mg / powder pack)	Adult's Acetaminophen Tablets (325 mg)	Adult's Acetaminophen Tablets (500 mg)
6 to 11 pounds (3 to 5 kilograms)	0 to 3 months	1.25 mL					
12 to 17 pounds (about 5 to 7 kilograms)	4 to 11 months	2.5 mL ₽∞ ₹% ₹ <mark>% ₹</mark> ₩					
18 to 23 pounds (about 8 to 10 kilograms)	12 to 23 months	3.75 mL					
24 to 35 pounds (about 11 to 15 kilograms)	2 to 3 years		5 mL → -15 mL -10 mL -7.5 mL -5 mL -7.5 mL -10 mL -7.5 mL	1 tablet			
36 to 47 pounds (about 16 to 21 kilograms)	4 to 5 years		-15 mL12.5 mL -10 mL7.5 mL	1 ½ tablets			
48 to 59 pounds (about 22 to 26 kilograms)	6 to 8 years		10 mL → -15 mL12.5 mL -5 mL -7.5 mL -	2 tablets	2 packets	1 tablet	
60 to 71 pounds (about 27 to 32 kilograms)	9 to 10 years		-15 mL12.5 mL -10 mL7.5 mL	2 ½ tablets	2 packets	1 tablet	
72 to 95 pounds (about 33 to 43 kilograms)	11 years		15 mL	3 tablets	3 packets	1 ½ tablets	1 tablet
96 pounds or more (more than 43 kilograms)	12 years or older		10 mL → 15 mL - 12.5 mL - 10 mL → 15 mL - 7.5 mL - 10 mL → 10 mL - 7.5 mL - 10 mL + 10 mL = 20 mL	4 tablets		2 tablets	1 tablet



## **Infant Postoperative Pain Management**

### **HOMEOPATHIC REMEDIES (FOR ALL AGES)**

Homeopathic remedies can be used as an alternative to conventional medication. Homeopathy strengthens the body's ability to heal itself and can be used to decrease pain and inflammation. Homeopathic remedies typically come from plants and animals and are a great safe, natural alternative for very young children.

- **Arnica 30C** Give every 15 minutes for one consecutive hour (example: 1:00 pm, 1:15 pm, 1:30 pm, 1:45 pm) and then give hourly. If you stop administering Arnica at any point during each hour period, you must start dosing every 15 minutes again.
  - ♦ You can place the tablet directly under the tongue OR
  - ♦ Dissolve 5 tablets in 5mL (1 teaspoon) of water. Syringe 1mL under the tongue using the same protocol as above
- Homeopathic Tincture made by Tongue and Lip Tie Center (Arnica Montana 200C, Hypericum 200C, Aconitum 200C, Byronia 200C)
  - ♦ Give 3-4 drops every 15 minutes as needed the first few days, then every 90 minutes or as needed. Administer 3-4 drops every time you do exercises for the first 24 hours.
  - ♦ If you are making your own, dissolve 5 pellets of each remedy in 1 ounce of water. Place in a glass dropper bottle.
  - ♦ You may purchase this from our office for \$30. Please let Laura know the day before your appointment so it can be made for you.

#### Borion Camlia

- ♦ Place the entire liquid drop under the tongue every 15 minutes. May repeat two more times.
  - Example: Give at 1:00 pm, 1:15 pm, 1:30 pm.
  - May repeat this two more times in 24 hours.
  - You can purchase a pack of 5 tubes for \$5

### Rescue Remedy

♦ 1-2 drops in the mouth every 2 hours

### · Hyland's Oral Pain Relief

- ♦ Children age One month 6 months
  - Dissolve 2 tablets under the tongue every hour for up to 4 hours (you can pre-mix with water or breastmilk if you want)
    - If pain persists, you can use 2 tablets every 4 hours during the night
- ♦ 6 MONTHS 3 YEARS
  - Dissolve 2 tablets under the tongue every hour for up to 4 hours (you can pre-mix with water or breastmilk if you want)
    - If pain persists, you can use 2 tablets every 4 hours during the nightfirst dose at 4 pm, you may only give two additional doses before 4 pm the next day.

## **Infant Postoperative Pain Management**

### OTHER HELPFUL TRICKS FOR A FUSSY BABY

### • Skin To Skin or Baby Wearing

♦ Research has shown that close contact with your baby can regulate their physical and emotional response.

### • Take a Warm Bath with Baby

♦ Take a warm bath with the baby while feeding/nursing with skin-to-skin contact. It's a triple threat! The warm water is great for soothing.

### · Bouncing/Walking with Baby

♦ Babies love this movement - it reminds them of the womb!

### • Breast-milk Chips/Ice Treats

- ♦ Freeze one ounce of breast milk or any liquid. Flake off little crystals and place them under their tongue.
- ♦ For an older child, try teething toys or popsicles!

#### Get Fresh Air!

- ♦ This will regulate the baby and probably the caregiver too!
- ♦ Babies love their mommas, but sometimes we need a break! Let dad or another caregiver cuddle with baby!









## **Normal Post-Operative Occurrences**





Remember all babies are different and all bodies heal differently! Below are some common experiences among past patients. You and your baby may experience all, some, or none of the following!

### Increased Sleepiness

♦ Some babies will sleep a significant amount after the procedure.

### Decreased Appetite

♦ Your baby may not have much of an appetite at some point during the first week. On rare occasions, some babies have refused to eat for the first 10-12 hours after the procedure. Continue trying to feed and if you get to 12 hours without your child eating, you can try to syringe feed your baby. Contact your IBCLC/SLP or Dr. Amy if this occurs.

#### Inconsistent Feeds

♦ Your baby has a new tongue that functions very differently now. Feeds may feel "off" or even disorganized. That is okay, it will get better with the help of your team!

#### Increased Drooling

♦ You may notice your baby drooling more. That is very normal. Increased tongue function is going to initiate the baby's salivary glands!

### Increased Spit Up/Projectile Vomiting

♦ If your baby struggles with spitting up/reflux, this may get worse before it gets better. After the release, your baby will struggle less while eating; therefore, will eat much quicker than before. Babies will over-eat and spit up might increase. It will level out!

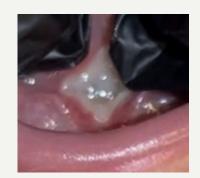
### Bleeding at Wound Site

♦ Some bleeding may occur, especially in the first few days. You will NEVER rip the wound farther than where Dr. Amy released the tissue. If bleeding occurs, it means part of the wound had reattached and you opened it back up. This is exactly what we want you to do! Feed your baby to calm him/her down and the bleeding will stop. The more your baby cries or you try to mess with the wound by applying pressure/etc, the more it will bleed!

# **Normal Post-Operative Healing**

**48 HOURS** 





1 WEEK





2 WEEKS





Reattachment Fiber





Swipe this away with your finger or a q-tip!

## **Important Instructions for** Patients with Sutures (Stitches)

- If lip/buccal releases were completed, please begin those stretches the night of your child's procedure.
- DO NOT complete any stretches on the tongue until the sutures fall out. Your sutures will last around 3-4 days. Once the sutures have fallen out, it is imperative that you continue stretching as directed by your therapist.
- There are salivary glands under the tongue. Sutures can not be placed in those. If you see a 'hole' right behind the lower teeth, it is because Dr. Amy could not suture into the gland. That area will turn very white and possibly be the most sore.
- · Your child can eat and drink as normal.
- Any movement of the tongue is helpful to prevent reattachment. Even though your child's tongue may be sore, have them keep moving their tongue! Tongue clicks, licking teeth/lips, moving their tongue from the front of their palate to the back, suctioning, etc is very helpful.

### **EXAMPLE OF SUTURES**

### **OPEN WOUND**



### **CLOSED WOUND**



# **Links for Videos Showing Stretches**



**VIDEO LINK 1** 



**VIDEO LINK 2** 



**VIDEO LINK 3** 

## **Frequently Asked Questions**

1 Should I immediately dose Tylenol after the procedure?

No, Dr. Amy recommends waiting until your child is extremely fussy and you have exhausted all other care options. Most babies will be extremely fussy at some point, most likely for 10-12 hours. Some start at hour 5, others the next day. Some babies will have the most difficulty on day 5. So, we dose Tylenol when it is necessary.

- 2 Should I give Motrin before my child's frenectomy?
  No, we do not recommend this, as it may increase bleeding risk.
- Can my baby still take their pacifier?

  Yes! It's absolutely recommended as it will keep the tongue moving and help prevent reattachment.
- Is there a risk of infection to the wound site?

  No, the laser sterilizes as it cuts and there are no reports of post-operative infection with this laser. If your baby develops a fever above 101, it is most likely a bacterial or viral infection.
- When will I begin to see changes in my baby?

  Sometimes it is immediate and sometimes it takes about 3 weeks for all symptoms to disappear.

  Give it time, Rome wasn't built in a day!
- Are there any diet restrictions for my child/baby?

  Nope! Continue eating and drinking as normal.
- When do I begin stretches?

  Dr. Amy usually likes to give the child a 10-12 hour break after his/her procedure. Typically, your first stretch will be right before the baby's 'bedtime' (around 7 pm-10 pm).

If your release is done late afternoon (for example - 3 pm), you can wait until 10 pm-2 am to complete the first stretch.

- Do I need to attend all postoperative sessions with my therapists?

  YES! 100% Absolutely! The wound is still healing and can even reattach between 5-6 weeks after the procedure. It is imperative that your therapist have eyes on the wound. Trust the process! Research has shown that outcomes increase significantly if the post-operative care plan is followed.
- My toddler/child will probably bite me when attempt post-operative stretches, what can I do?

We recommend getting this bite block before procedure. We also sell these for \$5!

Have a question not listed above? Please text Dr. Amy at 606-303-3939