

## POST-OP INSTRUCTIONS FOR INFANT LIP/TONGUE-TIE RELEASE

Our goal is to have the frenum heal and re-attach as far back as possible. You should do the stretches with the baby laying down on a bed or couch facing away from you like during the exam. Please follow-up within 7-10 days. **Begin doing the stretches the EVENING of the procedure.** Gloves (preferred) or clean hands with nails trimmed should be used for stretches.

1. If the lip was revised also, first put your fingers all the way in the fold of the lip and pull the lip up and out as high as possible, so you can see the white diamond and cover the nostrils. It may bleed slightly the first day or two, this is not a concern.
2. With one or two fingers, lift the tongue up and back just above the white diamond to put tension on the wound and hold for 10 seconds. It may bleed slightly the first day or two, this is not a concern.
3. The main issue is to keep the “diamond” open all the way up on the lip and especially the tongue. If you notice it is becoming tight, then stretch a little more to open it back up.
4. Repeat this ideally 3-4 times a day (3 minimum) (change up the time during the day).
5. Repeat this for 3 weeks.
6. At other times, play in your child’s mouth a few times a day with clean fingers to avoid causing an oral aversion. Tickle the lips, the gums, or allow your child to suck your finger.
7. Tummy-Time as much as possible. Visit [www.TummyTimeMethod.com](http://www.TummyTimeMethod.com) for helpful tips.
8. The released area will form a wet scab after the first day. It will appear white and soft. It may change color to yellow or even green. This is not an infection, but is just a scab in the mouth. The white / yellow area will get smaller each day lengthwise, but HEALING IS STILL HAPPENING! So even though the white scab will heal you must continue stretching or the new frenum will not be as long as possible and the surgery may need to be repeated. If you have any concerns, please contact our office.

**Follow up with a lactation consultant is critical if nursing. Bottle-feeding babies will benefit from visiting a feeding therapist. A bodyworker (chiropractor, CST, etc.) is also very helpful. You should expect one better feed a day (two better feeds the second day, etc.). Sometimes there’s an immediate difference in feeding, and sometimes it takes a few days. Skin to skin, warm baths, and soothing music can be very beneficial to calm the baby.**

For pain make sure to give CHILDREN’S TYLENOL (160mg / 5mL) starting **WHEN YOU GET HOME** and for the next 2-3 days every 4-6 hours. For babies who weigh 6lbs give 40mg or 1.25mL, 7lb give 1.5mL, 8lb give 1.75mL, 9lb give 2mL, 10lb give 2.25 and 11lb give 2.25mL. Babies 12-14lb can have 80mg or 2.5mL, 15-17lb give 3mL. If your child is 6mo old and 12-17lbs, you can give Infant’s Motrin (ibuprofen) at 1.25mL (50mg). If your baby is refusing to nurse or seems to be in pain, please make sure the Tylenol dose is correct.

Your child’s lip will swell up slightly that evening or the next day. It is normal and will go down after a day or two. The area will be sore for a few days, at one week look much better, and at two weeks look much better and almost normal.

**If you have any questions, please call us at (818) 208-3932**

