

# Frenotomy Aftercare Instructions: Infant

Your goal is to have the frenum heal and re-form as far back as possible. With proper stretches during the healing process, this helps to ensure that happens.

**Stretches:** Begin doing the first set of stretches the **EVENING OF** the procedure. You should do the stretches with the baby laying down in your lap, head towards you, like your baby was in the Dr. 's lap during the exam. Gloves (preferred) or clean fingers with nails neatly trimmed should be used for the stretches.

### **Stretching Instructions**

- *Lip:* If the lip was revised, first put your fingers all the way into 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 of the nostrils, **hold for 2-3 seconds.** It may bleed slightly the first day or two; this is not a concern.
- *Tongue:* 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 2-3 seconds**. It may bleed slightly for the first day or two; this is not a concern.
  - The main goal is to 'open the diamond' all the way up on the lip and especially the tongue. If you notice it becoming tight, then stretch a little more to open it back up.
- Repeat these stretches **6 times a day**. You will perform 5 through the day, and one session in the middle of the night (roughly between the last session of the day and the first session of the next day)
- Repeat this for 21 days (3 weeks).
- 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 a scab in the mouth as it is healing. This is normal. The white/yellow area will get smaller each day lengthwise, but HEALING IS STILL HAPPENING. 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. Mild swelling is normal within the first few weeks. The area will be sore for a few weeks. At one week it will look much better, and at two weeks it will likely look nearly back to normal.

### Dr. Ghaheri's aftercare resources

• <a href="https://www.drghaheri.com/aftercare">https://www.drghaheri.com/aftercare</a> - This webpage was created by Dr. Ghaheri, showing how to do the stretches. It provides excellent photos.!

## **Pain Medication**

### Infant or Children's Tylenol (160 mg / 5 mL)

- Give as early as when you get home, for the next 2-3 days, as often as every 4-6 hours
- To give:

6-8 lbs: 1.25 mL

9-11 lbs: 2 mL

12-14 lbs: 2.5 mL

15-17 lbs: 3 mL

## Children's Motrin

• If your child is 6 months or older and weights 12-17 lbs, you can give Infant Motrin (Ibuprofen) at 1.25 mL (50 mg)

## **Helpful Tips**

- Tummy-time as much as possible. Visit TummyTimeMethod.com for helpful tips.
- Skin-to-Skin time as much as possible.
- Warm baths or soothing music
- Play in your child's mouth a few times a day with clean fingers to avoid causing oral aversion. Tickle the lips, the gums, or allow your child to suck on your fingers

**Follow up with a lactation consultant is critical if nursing.** Bottle-feeding babies will benefit from visiting a feeding therapist. A body-worker (chiropractor, craniosacral therapist, etc.) is also very helpful. You should expect one better feed a day (two better feeds the second day, etc.). Sometimes there is an immediate difference in feeding, and sometimes it takes a few days. It is important to understand that the first 24-48 hours can be the most challenging. Some babies will not want to feed as often, as much, or may appear to struggle with feeding as they adjust to the new mobility of their tongue and tolerate the soreness in the area.

**Follow-Up:** No follow-up appointment is needed. Should you have any questions or concerns, please contact our office during normal business hours, or Dr. Kingma or Dr. Randall after hours.

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