



CENTER FOR
OROFACIAL MYOLOGY

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Infant Release Post Op Instructions

Date of release:

Baby's weight today:

What to expect:

Day 1-3: Baby may be sore, fussy or clingy. Baby may have some trouble latching for the first few hours following release, topical numbing is used to decrease discomfort during the procedure so babies tongue may be numb for up to a few hours after. Wound check with your tongue tie release provider will occur to check for proper healing.

Week 1-2: Soreness should taper off. Minor spot bleeding may still occur with stretching. Baby is adjusting to their new tongue mobility and suck pattern. Improvements in feeding and latch may occur but can be inconsistent, baby is learning new patterns. Post-op body work and lactation highly recommended for optimal healing and function.

Week 4-6: Continue stretches and start to incorporate oral exercises and exploration. Healing patches should be healed, new frenulum shape and position is formed. Baby is continuing to build strength and coordination of their tongue. Continued feeding progress is expected.

Stretches- The Why, When and How:

Why: Our goal with an infant tongue/lip tie release is to restore the mobility of the tongue and lip, to do this we must ensure the wound heals open and does not close or tighten during the healing period. The stretches decrease risk of reattachment and scar tissue formation.

When: You will begin the stretches the evening of the procedure day and continue the stretches every 4 hours for the first 6 weeks post procedure.

How: "PUSH, SCOOP, STRETCH"

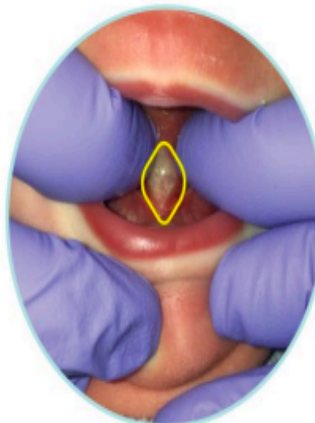


[scan here to watch a video on how to do the stretches!](#)

WHAT ARE THE "WHITE DIAMOND" HEALING PATCHES?

The released area will form a wet, soft scab after the first day. This is nature's "band-aid" and while typically white in color, in some cases it is yellow. The diamond will typically peak in size by day five and then start to shrink over the following weeks.

Lingual Healing Site (Tongue)



Labial Healing Site (Lip)



Pain Control Options:

Infants <1 month: please check with pediatrician before giving acetaminophen (tylenol). *infants <6 months cannot receive motrin (ibuprofen)*

Infants >1 month: acetaminophen (tylenol) can be given every 6 hours, dose is based off of weight, as needed for pain or fussiness. *infants <6 months cannot receive motrin (ibuprofen)*

Infants > 6 months: acetaminophen (tylenol) every 6 hours and/or ibuprofen (motrin) every 4 hours, dose based off of weight, as needed for pain or fussiness.

Natural/Homeopathic Options:

-Frozen breast milk: Can be frozen in a breast milk bag, teether or a soaked washcloth.

-Organic Coconut Oil: can be applied directly to the wound 4-6 times per day.

Vitamin D: infants >1 year should take 400u per day.

When to Call the Doctor:

Complications post procedure are rare but with any surgical procedure post surgical complications can happen. Please call our office at 208-793-7006 if you have any questions or concerns about your child's wound.

Please call 911, if your child experiences any of the following:

-Fever >100.4 (if your child is under 1 month of age a fever greater than 100.4 should be assessed in the Emergency room, if greater than 1 month it is ok to call pediatrician).

-Excessive bleeding from the wound bed that does not resolve quickly.

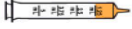

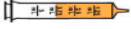
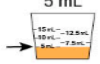
-Refusal to feed for greater than 8 hours or less than 2 wet diapers in 12 hours.

Normal Post-Op behaviors:

-Fussiness: Babies may be fussy or irritable for the first couple of days following the procedure due to some discomfort at the site.

-Sleepiness: Babies may be more sleepy following the procedure but should still be arousable to feed.

-Excessive drooling/spitting up or gagging: Increased tongue mobility increases saliva production.

Weight →	6 to 11 pounds (3 to 5 kilograms)	12 to 17 pounds (5 to 7 kilograms)	18 to 23 pounds (8 to 10 kilograms)	24 to 35 pounds (11 to 15 kilograms)
Age →	0 to 3 months	4 to 11 months	12 to 23 months	2 to 3 years
Infant's Acetaminophen (160 mg / 5 mL)	1.25 mL 	2.5 mL 	3.75 mL 	—
Children's Acetaminophen (160 mg / 5 mL)	—	—	—	5 mL 
Children's Acetaminophen Chewables (160 mg)	—	—	—	1 tablet 