



POST-OP FRENECTOMY

HOME CARE GUIDE

DENTAL HEALTH ASSOCIATES

Welcome home.

Here's a timeline of what you can expect after the procedure:

**Please note that a small amount of spotting or bleeding is common for a few days after the procedure. Not all babies follow the typical healing timeline depicted below*



Days 1-3	Week 1	Weeks 2-3	Week 4
Most babies will experience mild to moderate discomfort in the first 24-48 hours. Expect your baby to be fussier than normal.	Your child will begin to improve this week as the soreness tapers off. Continue quality stretches to minimize re-attachment and contractional healing.	It is critical that stretching exercises continue even though your child is improving. Maintain 4-6 quality stretches.	Healing is almost complete at this stage but it is important to continue with stretching routine and to massage the healed frenulum regularly to prevent scar tissue.
Administer pain meds and any comfort measures.	Don't be concerned if you see minor bleeding from the wound in the corners or crease after stretching. This likely means you are stretching properly.	Continue with stretching and targeted functional exercises as directed by your lactation consultant.	Healing diamond. Your child's new frenulum is taking its shape and position.
A white or yellow patch will appear where the laser wound is. This is nature's way of healing.	Your child is adjusting to their new suck patterns and mobility now.	The diamonds are starting to fade away and form a new connection. The lip should be fully healed at the two-week mark.	You will notice your child's coordination improving as they are also gaining strength.
Start stretches within 4 hours of procedure.	Feeding will be inconsistent but will continue to improve.	At this stage your child is having consistent improvements with feedings.	By now your child should continue to improve.
It is not uncommon for your child to have difficulty latching due to soreness and relearning muscular control to suck properly.	Continue to follow up with your lactation consultant and bodyworker.	Continue to follow up with your lactation consultant and bodyworker	Continue to follow up with your lactation consultant and bodyworker

RECOMENATIONS FOR PAIN MANAGEMENT

Children's Tylenol:

*Next 2-3 days ok to give every 4 hours as needed

*Follow instructions on bottle

Weight:

6-8 pounds: 1.25 mL	8-10 pounds: 1.50 mL
10-12 pounds: 2.00 mL	12-15 pounds: 2.50 mL
15-20 pounds: 3.00 mL	20-25 pounds: 4.00 mL

Infant's Motrin/ Ibuprofen if older than 6 months:

*OK to give every 6 hours as needed.

Weight:

12-15 pounds: 1.25 mL	12-20 pounds: 1.50mL
20-25 pounds: 2.00 mL	25-30 pounds: 2.50 mL

Natural Remedies

Breast milk ice chips

Can act as a natural numbing agent and help with pain. Freeze milk flat in a baggie and place tiny pieces under lips, tongue, or cheek and let melt slowly.

Organic Coconut Oil

Best if kept chilled and safe for any age. Simply apply small dab to treated areas 4-6 times a day.

Homeopathic remedies

Homeopathy is a system of holistic medicine that stimulates the body to heal itself using natural plant and mineral extracts, producing very little side effects. Homeopathy is ideal to use with infants, pregnant and nursing women, chemically sensitive individuals and those seeking a more natural alternative to pharmaceuticals.

Suggestions:

- Bach Kids Rescue Remedy
- Chamomilla (irritability and inflammation) Boiron Camilia single doses
- Arnica Montana 30C (wound healing)-Dissolve 5 pellets in 1 oz dropper bottle of distilled water; give 5-10 drops every 2-3 hours as needed. Store Chilled.
- Staphysagria 6C (wound healing)- 1 pellet 2x/day
- Skin to skin contact & warm baths

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, there are some cases it is yellow. The “diamond” will peak in size by day seven and then start to shrink as healing continues in the following weeks.

STRETCHING PROTOCOL

Stretch each site for 5 seconds every 4-6 hours or approximately 4-6 times a day. You do not need to wake your infant while he/she is sleeping during the night but instead, be sure to complete a thorough stretch after he/she wakes. **Start no more than 12 hours after procedure.** Stretches can be done before, after or in the middle of feeding.



Lingual Frenum (Tongue)- for 4 Weeks

- With clean hands, place both index finger tips at the left and right corners of the diamond. This area is squishy so make sure your fingers sink behind the diamond. Use other fingers to push down on chin to counter any chomping.
- Stretch the tongue up (indicated by arrow shown) and hold for 5 seconds. You should be able to see the entire diamond stretching vertically.



Liabial Frenum (Lip)- for 2 Weeks

- With clean hands, rest pads of index fingers on the upper jaw and flip the upper lip back towards the nose. Hold for 5 seconds and be sure you can see the entire wound site.
- Gently swipe 1x with index finger from side to side in the fold under the lip.

THERE ARE TWO IMPORTANT CONCEPTS TO UNDERSTAND ABOUT ORAL WOUNDS:

1. Any open oral wound likes to contract towards the center of that wound as it is healing (hence the need to keep it dilated open).
2. If you have two raw surfaces in the mouth in close proximity, they will reattach.

Remember:

- Post-procedure stretches are key to getting an optimal result.
- These stretches are not meant to be forceful or prolonged. It's best to be quick and precise with your movements.
- It is recommended that you purchase an affordable LED headlight (like a camping headlight) to allow you to get the best results.
- We highly encourage you to approach these exercises in a positive manner.
- After 4 weeks the tongue should be healed enough that the stretches are no longer needed. However, if you notice regression of progress after stopping, continue stretching 3x/day for 1 week.
- If healing site feels firm in the center after 3 weeks, apply vitamin E oil 3x/day for 1-2 weeks until soft.
- Refer to video posted on our website under Frenectomies- ‘Before Your Visit.’
(<https://www.youtube.com/watch?v=jCQ6xBAbbhA&t=2s>)

HELPFUL TIPS & NORMAL POST-TREATMENT

HELPFUL TIPS:

- Give pain medication and remedies within the first hour after the procedure. You may need to give medication at a consistent interval every 4 hours for the first day or two.
- Do lots of skin-to-skin during the first 24-48 hours after the procedure. Even a nice warm bath or shower can really help settle your little one down.
- Frozen breast milk can act as a natural numbing agent and help ease pain for some. Transfer a couple ounces of milk into a plastic baggie and let it freeze while lying flat. Then chip off tiny pieces and place under the lip, tongue or cheek and let it melt slowly.

NORMAL POST-TREATMENT OCCURANCES

Increased fussiness and inconsolable crying during first week

Make sure you stay ahead of discomfort and be proactive with pain medications.

Bleeding after stretching

A little bit of blood in a pool of saliva appears worse than it really is. If this occurs, nothing needs to be done and it is safe to feed immediately.

Trouble with latch during the first week

Due to the initial soreness and re-learning of suck, feedings may be inconsistent for the first week. In some cases, latch or symptoms may worsen before they get better. It is critical to work with an IBCLC for any feeding related issues.

Increased choking and spitting up

Some babies may have a harder time adjusting to an increased milk flow. This is usually temporary and should be addressed with your IBCLC.

Increased drooling and saliva bubbles

The healing process increases saliva production. Also, your infant may be adjusting to a new range of motion and can have difficulty controlling saliva. This is usually temporary.

Increased sleeping

This may be due to medication, exhaustion, or that the infant is feeling better and is more satisfied. Sleep can act as a coping mechanism for discomfort.

WE ARE HERE FOR YOU!

Although rare, please do not hesitate to call the office (320-762-1551) if you experience the following:

- Fever greater than 101.5F
- Uncontrolled bleeding
- Refusal to feed (bottle and/or breast) for over eight hours

Thank you so much for choosing us! We truly wish you and your baby a fast and easy recovery. Understand that feeding problems are quite common so you are not alone. Please reach out for emotional support from others who understand.

SUCK TRAINING INFORMATION

Important: Suck training exercises are helpful for regaining proper tongue function. These exercises are NOT intended to replace the in-person help of a lactation consultant or health care professional. Any delay in seeking expert help may put the breastfeeding relationship at further risk.

Use these exercises before feeding or as a playtime activity. Be sure to stop any exercise that your baby dislikes. It is not necessary to do every exercise; only use those that are helpful for your baby. Before beginning, wash hands and be sure nails are short and smooth. It is best to work directly with a lactation consultant to determine which exercises are best for you and your baby.



Exercise 1: Finger Sucking

Use a finger (with a trimmed and filed nail) that closely matches the size of your nipple. Place the backside of this finger against the baby's chin with the tip of your finger touching the underside of the nose. This should stimulate the baby to gape widely. Allow the baby to draw in finger, pad side up, and suck. The *tongue should cover the lower gums* and your finger should be drawn into the juncture of the hard and soft palate. If the tongue is not forward over the lower gums, or if the back of the tongue bunches up, gently press down on the tongue (saying "down") and use forward (towards the lips) traction.



Exercise 2: Down and Out Stroking

- Begin as in exercise 1, but turn finger over and press down on the back of the tongue and draw slowly out using with downward and forward (toward lips) pressure on the tongue. Repeat a few times.



Exercise 3: Lateralizing Side to Side

- Gently stroke the baby's lips until the opens mouth, and then stroke the lower and upper gums side to side. The tongue should follow your finger.



Exercise 4: Circular Strokes

- Touch the baby's chin, nose and upper lip. When the baby opens wide, gently massage the tip of the tongue in circular motions pressing down and out, encouraging the tongue to move over the lower gums. Massage can continue back further on the tongue with light pressure as the finger moves back on the tongue and firmer pressure when the finger moves forward. Avoid gagging baby.



Exercise 5: Desensitizing Gag Reflex

- If a baby has a *high or narrow palate* and gags on the nipple or insists on a shallow latch, it may help to desensitize the palate. Begin by massaging the baby's palate near the gum-line. Progressively massage deeper, but avoid gagging the baby. Repeat exercise until the baby will allow a finger to touch his palate while sucking on a finger. It may take several days of short exercise sessions to be effective.

Infant Massage to Ease a Baby with TIGHT and TENSE Muscles.

If your baby does not open wide, a gentle massage may help relax the jaw and facial muscles. A skilled body-worker such as a chiropractor, osteopath or craniosacral therapist who specializes in infant care may also help your baby. Begin with a light fingertip circular massage under the baby's jaw from back to front on both sides. Using fingertips, massage the baby's cheeks from the center toward the temple on both sides. Massage in tiny circles around the mouth, near the lips, clockwise and counter clockwise. Massage around the baby's mouth, near the lips, from center outward, on both sides of the mouth, top and bottom. Gently tap a finger over the baby's lips. Massage the baby's chin.

GENERAL INFORMATION ABOUT BODY WORK

Body work is the general term used to describe therapies that may help relieve and normalize structural issues in the body. Some babies may need more body work than others. Babies who receive some form of bodywork seem to heal and rehabilitate better.

Common types of Body Work

Tummy Time

This is a simple at-home therapy you can perform a few times a day for 5-20 minutes. This may help your infant gain strength in the neck muscles which support proper sucking.

Craniosacral Therapy

Craniosacral Therapy (CST) is a gentle, hands-on approach that releases tensions deep in the body to relieve pain and dysfunction. It also improves whole-body health and performance. CST is usually performed by a chiropractor or an osteopath.

Myofascial Release Therapy

Myofascial Release Therapy is a safe and very effective hands-on technique that involves applying gentle sustained pressure into the myofascial connective tissue restrictions to eliminate pain and restore motion. Myofascial Release Therapy is usually performed by a physical therapist or massage therapist.

Who are the providers?

IBCLC – (International Board Certified Lactation Consultant) The IBCLC has the highest level of training with breast and bottle feeding. Some IBCLCs may have extra training in suck dysfunction. We highly recommend working with an IBCLC after the procedure in order to optimize your progress.

OT/PT – (Occupational or Physical Therapist) There are some physical therapists that work mostly on infants and may utilize techniques to relieve tension and restore function.

SLP – (Speech Language Pathologist) – May help with speaking and/or feeding difficulties in infants/children.

OMT – (Orofacial Myofunctional Therapist) OMT is a relatively new and emerging field and this type of specialist helps restore proper muscle balance and function of the mouth. An OMT helps restore proper muscle balance and function of the mouth for children and adults.

Chiropractors- Chiropractors may help work on structural issues that may affect one's overall health.

