**POST-OP INSTRUCTIONS FOR INFANT TONGUE-TIE RELEASE**

Your goal is to have the area heal and give the most mobility possible. You should do the stretches with the baby laying down on a changing table, bed, or couch facing away from you like during the exam. Please follow-up within 7-10 days. **Begin doing the stretches the DAY AFTER the procedure**. Gloves (preferred) or clean hands with nails trimmed should be used for stretches.

1. If the lip or cheeks were released also, first put your fingers all the way in the fold of the lips and pull the lip or cheek up and out as high as possible, so you can see the white diamond(s) open. Hold 5-10 seconds. Then gently rub the wound side-to-side (a few swipes). It may bleed slightly (occasionally), but if you notice bleeding that is concerning, call us or Dr. Levy’s cell.
2. With one index finger, push down right behind the gum pad in the floor of the mouth, and push into and lift the tongue up and back just above the white diamond to put tension on the wound for 5-10 seconds.. Use your non-dominant thumb to push down on the gum pad and hold the mouth open (the idea is to separate the tongue from the lower jaw). Then gently rub the wound side-to-side (a few swipes). It may bleed slightly the first day or two, this is not a concern.
3. The main issue is to open and see the “diamond” all the way up on the lip and especially the tongue. If you notice it is becoming tight, then stretch/push a little more to open it back up.
4. Repeat this **4 times a day for 4 weeks (plus once overnight if baby is waking up in the middle of the night).**
5. **If you can’t follow up in person**, please do a “deeper stretch” and push twice as hard one time at 7 days to ensure it isn’t growing back together. You will notice some bleeding if it reopens or stretches out, which means it was growing back a little bit, and now it’s reopened. Hold pressure with gauze or a paper towel for 4-5min and it will stop. Symptoms may improve after the stretch.
6. 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. Watch Michelle Emanuel’s YouTube channel for tummy time and guppy exercises. Do them daily.
8. Exercises:

-Tug of war- let baby suck on your finger, then pull it out slowly as baby tries to suck it back in.

-Put your finger in baby's mouth, tickle the roof of the mouth to get baby to start sucking.  Once the baby is sucking, gently press down with your finger into his/her tongue.  Baby will try to push back up against your finger, strengthening the muscles that push up.

-Floor of mouth massage- gently rub the floor of the mouth (between the jaw bone and the tongue) on both sides of the tongue (not directly on the wound, but to the sides/behind it).  This helps to loosen up the muscles on the floor of the mouth.  The goal is to reduce tension in the mouth.

1. 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 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 is not as visible, you must continue stretching or 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 to weeks. Skin to skin, warm baths, and soothing music can be very beneficial to calm the baby.**

**For pain 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 check the Tylenol dose is correct, and find an alternative way to get milk in (bottle, syringe, cup).**

**Your child’s lip will swell up slightly for a few days, and the released areas will be sore for a few days, at one week look much better, and at 2-3 weeks look much better and almost normal.**

If you have any questions, please call us at 203-724-7744, or Dr.Levy’s cell at (917) 841-7780.