

IMPORTANT: This packet includes information that will help you and your little one recover as best as possible. Please understand that sucking correctly and consistently after the procedure takes time. Improvements with feedings are usually gradual and may take anywhere from 2-4 weeks. In most cases, frenectomy alone will not fix all of the feeding problems and additional therapies may be needed. Therefore, it is critical to work with an IBCLC who has extra training in suck dysfunction in order to achieve an optimal end goal. Outcomes may vary from baby to baby.

WHAT TO EXPECT AFTER THE PROCEDURE: Healing times are different for every baby.

DAYS 1-3	WEEK 1	WEEKS 2-4
<ul style="list-style-type: none"> • Most babies will be very sore during the first 24-48 hours. • Expect baby to be fussier than usual. • The healing “white patch” will begin to form. • Pain medicine and/or sugar water can be given as indicated. • Difficulty with latch may occur; refer to LC for “back up” feeding plan. • Have comfort measures prepared. 	<ul style="list-style-type: none"> • Baby may show sore muscle fatigue (fussy, not feeding as well) days 3-4. • Baby’s soreness starts to taper off days 7-10. • Baby may still be fussy. • The healing “white patch” continues to form. • Pain medicine can be given as needed. • Improvement may be minimal during first week. 	<ul style="list-style-type: none"> • Baby should not be sore and exercises only mildly irritating. • The healing “white patch” is beginning to shrink. • Pain medicines aren’t necessary. • New frenulum is forming. • Baby is showing improved progress with feeding.

PAIN MANAGEMENT

- Infant Acetaminophen/Tylenol (160 mg/5mL concentration).
- Talk to your pediatrician about the appropriate dose.
- Give every 4-6 hours for the first few days as needed for pain.
- If infant is older than 2 months and Tylenol seems to be ineffective, ask your pediatrician if Ibuprofen use is appropriate.

GETTING STARTED

NOTE: Babies are often most sore on days 3 and 4 following their revision. Often the soreness is not just from the revision site, but the muscles of the mouth working hard at a new task. If possible, it can be good to plan to just stay home, snuggle, do lots of skin-to-skin, and feed your baby on these days.

WHITE DIAMOND PATCHES: The released area will form a wet scab after the first day. It will appear white and soft because it is wet. This is nature's "band aid." It is not always white, and in some cases it can be yellow, neon yellow, green, or grey. The diamond will usually peak in size by day 7 and then shrink from day 7 to 21. Make sure you are gently rubbing into this scab because the healing is occurring underneath it. After one week, the white area will get smaller each day, but healing is still happening. Even though the scab will heal, it is important to continue stretching or the new frenulum will not be as long as possible and the surgery may need to be repeated.

WORK TOWARD A VERTICAL WHITE DIAMOND SHAPE



NO



NO



YES

YOUR GOALS:

- Completing the exercises will help the frenulum heal and re-form as far back as possible.
- Stretch 6 times per day, taking care to do one before bed and one in the morning. We find these two are the most important. The others can be at night or during the day when you and your baby are in a good mood.

TO PREPARE:

- Keep your fingernails short and clean. Some people prefer to do stretches with gloves.
- Get positioned with your baby in your lap lying down, feet away from you.
- Give baby some kisses on the face. Talk to them about how cute and wonderful they are.
- Gently touch the outside of baby's mouth and tap their lips, asking to come in.
- When baby licks your finger or opens their mouth, slide your finger in and let baby suck.
- Run your finger along their gums.

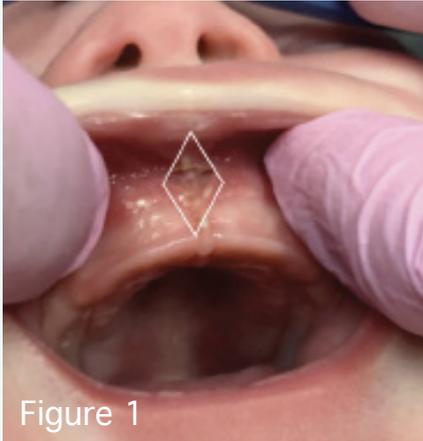
STRETCHING EXERCISES

DAY OF PROCEDURE: (optional)
Complete one set of exercises at night before bed.

FOLLOWING DAY: Start first thing in the morning, continuing every 4 hours, overnight.

FULL 3 WEEKS: Continue exercises for 3 full weeks until the white diamond is gone.

LIP STRETCH:



LIFT: With clean hands, grasp the upper lip and lift up and back, toward the nostrils.

HOLD: Hold this position for about 5 seconds. (see figure 1)

OPTIONAL MASSAGE: Use the pad of your finger to slowly press along the gum ridge. Complete this step one time.

TONGUE STRETCH:



PLACE: With clean hands, place both index finger tips near the top corner above the diamond. It is usually easier to place one finger at a time before getting both fingers positioned (see figure 2).

LIFT: In a controlled manner, bend fingers to lift tongue upward. Use middle finger(s) on the chin to help stabilize and keep the jaw opened. You should see the top and bottom corners of the diamond move away from each other. One lift should take 5 seconds.

OPTIONAL MASSAGE: Gently press inside the diamond and hold for 5 seconds. (see figure 3)

HEALING:

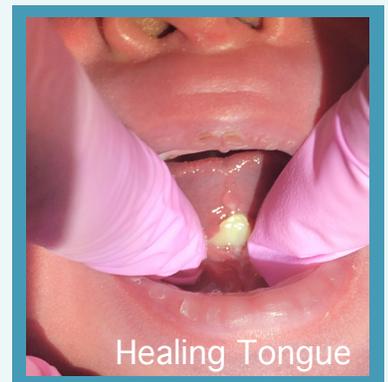
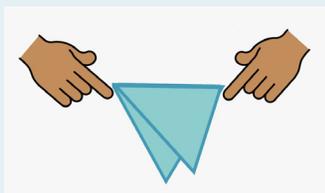
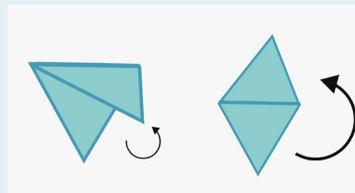


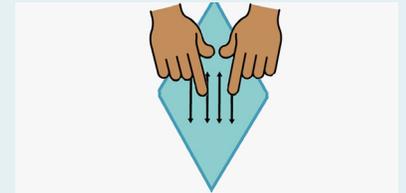
FIGURE 3: Summary of Stretching and Massaging Techniques



START: Tongue or lip at rest and halves are resting on top of each other. This is the "closed" position. Place fingers above top corner of diamond.



Lift and unfold opposing halves to create the "open" position. Hold "open" position for about 1 second.



Lift tongue/lip. You should see the top and bottom corners move away from each other.

MORE INFORMATION

WHAT TO EXPECT:

- **Increased fussiness and inconsolable crying during the first week.** Immediately after the procedure, it is best to give pain medication(s) and/or sugar water around the clock to stay ahead of any discomfort. This may be necessary during the first few days and sometimes up to one week.
- **Bleeding after doing the stretches.** Keep in mind that a little bit of blood in a pool of saliva is not as bad as it looks. This is not a concern and it is safe to feed your baby.
- **Difficulty with latch during the first week.** Due to the initial soreness and re-learning of suck, feedings may be inconsistent during the first week. In some cases, symptoms may worsen before it gets better. **It is critical to follow up with your IBCLC for any troubleshooting issues.**
- **Increased coughing and spitting up.** Initially, babies may have a hard time adjusting to the change in latch. This is usually temporary and should be addressed with your IBCLC.
- **Increased drooling and saliva bubbles.** The healing process increases saliva production. Additionally, the new movement of tongue creates a surplus of saliva. This is usually temporary.
- **Increased sleeping.** This may be due to medication, exhaustion, or that the infant is feeding better and is more satisfied. Sleep may also act as a coping mechanism for discomfort.

EMERGENCY CONTACT:

919-391-3651

SUGGESTIONS:

- **If your baby is extra fussy or inconsolable** be sure to use lots of skin to skin contact.
- **If your baby is fussy and struggling to latch,** try feeding your baby while taking a warm bath.
- **If your baby is extra squirmy during the stretching exercises** and you do not have a second person there to help, try using a swaddle.
- **Use good lighting and an LED head light** during stretches to help visualize the diamonds and ensure accurate and precise technique.
- **Use nitrile gloves** if you happen to find them more comfortable during stretching exercises. Make sure gloves fit well.
- **Freeze breast milk for a natural numbing agent, helping with pain.** Freeze the milk flat in a baggie, then chip off tiny pieces to place under lip, tongue or cheek and let the milk melt slowly.
- **Vary stretches with feeding times.** They can be done before, after, or in the middle of a feeding - whichever seems to work best. It may be best to feed before the stretches during the first week when the infant is experiencing the most soreness.

CALL YOUR DOCTOR IF:

Although rare, please don't hesitate to call us if you experience the following:

- Fever greater than 101.5°F
- Uncontrolled bleeding
- Refusal to feed for over 8 hours (bottle and/or breast)