

**CENTER FOR TETHERED ORAL TISSUES (TOTs)
CHILD FRENOTOMY/FRENECTOMY AFTERCARE**

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Introduction: As with any cut, your child's body wants to heal the released tissue back together and make it as it was before the procedure. Even though the frenotomy released abnormal attachments that were causing problems, your child's body doesn't realize this yet and it wants to put everything back together exactly as it was. This is NOT what we want. We want the frenotomy sites to heal in a new way to allow for increased mobility and function. A multidisciplinary team of tongue-tie experts from around the world has developed a protocol for post frenotomy therapy to assist this. This has been developed through the clinical experience of many providers and has demonstrated improved outcomes. Important to wash hands thoroughly beforehand or use gloves. **Tools will be provided in assistance for exercises since toddlers do have teeth and are susceptible to biting. (Given by aftercare nurse)**

IMPORTANT: the **wounds** will appear **yellow/gray/white** for the first two weeks. This is **NORMAL** and **not** a sign of infection!

1. **You can lay child on their back with their head towards you and feet away from you.** Or place child in seatbelt restraints such as a highchair, stroller, or car seat it's useful to come from behind this helps their head flex back making it easier to get into their mouth.
2. Bring the tips both pointer and index fingers together and slide them **under the upper lip** on either side of the central frenotomy site. (Lip can appear to be puffier but will resume to normal size shortly after).
Lift lip up to fully expose the entire wound.
Hold the lip up for a total of 5 seconds. Do this once, **5 times daily for 2 weeks.**
3. Bring tips of index fingers **under the tongue** with the pads of your fingers firmly pressing towards the base of the child's tongue. Your fingers should now be directly on either side the frenotomy site. Now **stretch** tongue **upward and backwards** toward roof of mouth (palate) to open up the "**DIAMOND**" shaped frenotomy site. Hold this position for a solid **5 seconds, five times daily for 2 weeks.**
4. Now take index finger and gently **pressing into the frenotomy site**, rub **side to side** for a few strokes. (This also will **take 5 seconds**).

Repeat these stretching exercises 5 times per day for the first two weeks unless otherwise specified. Do not go more than 5 hours between exercises. Begin stretches 5 hours after you leave office.

The goal of this therapy is to keep the tissue healing in an open or separated manor, without the released tissue healing back together. Being diligent with the therapy will help reduce the risk of this happening. It is not necessary to take a long time to do them. It is best to get in and out quickly, but to

be sure you are effectively separating the tissues when you stretch. Particularly in the first few days following the procedures, it is normal to see a bit of bleeding, especially if there has been some reattachment that releases with the therapy. If it is more than a little bleeding, please call your provider for guidance.

5. If you are using pharmaceutical or homeopathic medications for pain, you can time them so they will be at peak effect for the therapy sessions. For most children, the first two to three days are most intense and then the discomfort subsides considerably. Continue the therapy for 2-3 weeks and the area becomes completely pink, like the rest of child's mouth. Seek the guidance of your care providers for exactly how long your child needs this therapy.
6. Take note of what the incisions look like immediately after the procedure(taking a Photo during the first session is a great way to do this) watch for any changes to the shape. The edges of the diamond should stay sharp. If they begin to look muddled or "tucked in", or you see tissue protruding from the rest, there may be some reattachment starting. Be sure to pay extra attention to this area, using a slightly firmer pressure during the therapy session. You will likely be able to release it yourself with your fingers. (It may bleed a little, that's ok) Addressing it early is key.

***Pacifiers use:** Pacifiers may be used, but only for short intervals. This means no longer than 30 minutes at a time. After 30 minutes you should stretch the wound open, and then pacifier may be used again. Theory of pacifier use after the surgery is that it has the potential to increase risk of "Reattachment".

**** Any questions or concerns TEXT messages and pictures to Dr. Siegel at 516-217-8898**

*****TEXT Post- op pictures at 1 week and 2 week mark to Dr. Siegel's cell phone-body of text should include name, date of procedure and photos.**

PAIN MANAGEMENT

You may use whatever works for your family. This includes homeopathic remedies like Arnica or Rescue Remedy.

Children and Adults: Ibuprofen (Advil/Motrin) or naproxen sodium (Aleve) are typically best for pain relief.