



# *What to expect after the procedure*

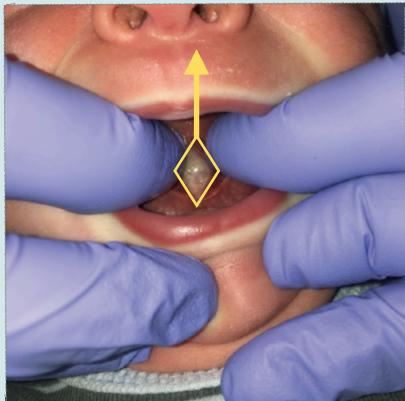
## Pain Management Recommendations:

- ♦ Infant Acetaminophen/Tylenol:  
Please refer to Pediatricians dosing guidelines.
  
- Natural Remedies:
  - ♦ Breastmilk 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 cheeks and let melt slowly.
  - ♦ Organic Coconut Oil: Simply a small dab to treated areas 4-6 times daily. Also works well as a lubricant for stretches. Safe for any age.
  - ♦ Arnica 30C: Dissolve 5 pellets in 1 oz dropper bottle of distilled water. Give 5-10 drops every 2-3 hours as needed. Store chilled.
  - ♦ Bach Kids Rescue Remedy: May add 7 drops to Arnica bottle or take on own.
  - ♦ Lots of Skin to Skin
  - ♦ Co-bathing, may add Rescue Remedy

Days 1-3	Week 1	Week 2	Week 3
Baby will be sore, expect fussiness.	Soreness starts to taper off days 7-10.	Implement suck training exercises 2-3 times per day.	Last week of stretching exercises.
Healing “white patch” forms, this is “nature’s bandaid.”	Continue stretching exercises.	Healing patch starts shrinking from sides, inward.	Healing patch gone and new frenulum takes final position.
Pain meds given as needed.	Baby is re-learning how to suck.	New frenulum forming.	Bodywork, OT, PT, LC follow-ups as needed.
May have trouble with latch.	Feedings may still be inconsistent.	Bodywork and LC follow-ups as needed.	Continual progress with feedings.
Have back up feeding plan and comfort measures prepared.	Lactation Consultant (LC) follow-up at 5-7 days.	Start to see signs of improvement with feedings.	
Begin stretching exercises.	Appointment with Cranio-Sacral Therapist recommended.	Continue stretching exercises.	

# Stretching Protocol

Stretch each site for 5 seconds 4x daily. 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.  
Remember: Post-procedure stretches are key to getting an optimal result and prevent re-attachment.



## Lingual Frenum (Tongue)

- 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.



## Labial Frenum (Lip)

- 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.

## 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 peak in size by day seven and then start to shrink over the following weeks.

Video Examples are available at:

[www.drghaheri.com](http://www.drghaheri.com)

[www.tonguetieal.com](http://www.tonguetieal.com)

[www.kiddsteeth.com](http://www.kiddsteeth.com)



# Helpful Tips

- ♦ If your baby is extra fussy, be sure to use lots of skin to skin contact. This increases oxytocin levels, lowering pain sensitivity.
- ♦ If latch has become difficult, try taking a nice warm bath with your baby and try latching in bath.
- ♦ If your little one is extra squirmy during the exercises, try using a swaddle.
- ♦ Although not necessary, you may find the exercises more comfortable using nitrile gloves.

## Normal Post-Treatment Occurrences

### 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 first week:

Due to the initial soreness and re-learning of suck, feedings may be inconsistent the first week. In some cases, latch or symptoms may worsen before they get better.

### 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 may act as a coping mechanism for discomfort.

## When to Call the Doctor

Although rare, please do not hesitate to call your provider if you experience the following:

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



# Suck Training Exercises

\*Mouth massage exercises can promote jaw mobility, assist with strengthening oral musculature and bring awareness to oral structures.

\*The massage routine serves as a “warm-up” for feedings so you can try them just before feeding or during a break from feeding towards the start of a meal.

\*Massaging your baby's mouth should be a pleasant and positive experience for your child. If he/she shows signs of irritability or seems uncomfortable with the massage, discontinue the exercise and either try a different one or try again another time.

\*These exercises can be done a few times daily and completed in just a few minutes.

## Begin at day 5-7 after procedure

### Cheek & Lip Circles

1. Massage your baby's face by making circles with your index and middle fingers. Press firmly but gently into your baby's cheeks, making 3-5 circles while moving towards the lips.
2. Make 3-5 smaller circles on the lips while moving toward the center of the lips.

### Tongue “Tug-of-War”

Gently stroke your baby's lower lip and allow your baby to suck your index finger into his/her mouth. Swipe the roof of the mouth gently to stimulate baby to suck if necessary. Pull your finger slightly out of the mouth until just before baby loses suction. Allow him/her to suck it back in. (We want your baby's tongue to cup or groove around your finger.) Repeat a few times.

### Tongue “Walking”

Use the tip of the index finger to press on the tip of the baby's tongue for a few seconds. Keeping the finger in the baby's mouth, move back a little farther on the tongue, pressing again for a few seconds. Stop mid-tongue and slide finger out.

### Cheek & Gum Massage

1. Use small, firm but gentle strokes inside of your baby's cheeks. Extend high enough to feel the bottom of baby's cheekbones from the inside of his/her mouth.
2. Slowly rub the lower gumline from side to side and your baby's tongue will follow your finger. This will help strengthen the lateral movements of the tongue.

### Slide Back

After stimulating mouth opening, slide your fingertip midline from the tip to about halfway back. Repeat several times as tolerated.