



FRENECTOMY POST OP INSTRUCTIONS

Healing time for the release wound is approximately **30 days**.

Following the procedure for newborns, breastfeeding and bottle feeding will have to be retrained, so the initial attempts may be challenging. Helpful supplies to have on hand include coconut oil and any postoperative pain management supplies approved by your physician including Tylenol, Ibuprofen or homeopathic remedies you may wish to use (Arnica, Rescue Remedy, etc.).

Keeping the lip and tongue mobile through our exercise recommendations (and those proposed by your oromyofunctional therapist) is important during the healing time. Complete the wound care described above daily for the directed amount of time.

A white/yellow patch around the treated area is normal. This is how the mouth forms a “scab”. Keep the area mobile until all the white is replaced by pink tissue. Some families find that “body work” by an experienced chiropractor, craniosacral therapist or physical therapist is critical to achieving successful results.

RISKS OF PROCEDURE

While the majority of patients have an uneventful procedure and recovery, a few cases may be associated with complications, which may include:

- Reattachment of the frenum requiring additional surgical procedures *this is the most common complication
- Bleeding either at the time of the procedure or in the first 2 weeks following
- Infection
- Pain
- Fussiness
- Damage to, or infection of the sublingual gland, which sits below the tongue which may require further surgery
- Temporary or permanent nerve damage
- Refusal to feed (nursing strike or bottle refusal)
- Impact on speech
- Lack of improvement
- Injury to the teeth, lip, gums, or tongue
- Alterations in child’s smile, including increased show of upper gums when smiling (for lip tie release)
- Burns from the equipment
- Swelling and inflammation, especially of upper lip
- Scarring
- Eye damage if baby looks directly into the laser beam (eye protection is always used)