

THERE ARE TWO IMPORTANT CONCEPTS TO UNDERSTAND ABOUT ORAL WOUNDS:

- 1) **Any open oral wound likes to contract towards the center of that wound as it is healing (hence the need to keep it dilated open).**
- 2) **If you have two raw surfaces in the mouth in close proximity, they will reattach.**

It is known that post-procedure stretches are **key** to getting an optimal result. These stretches are NOT meant to be forceful or prolonged. It's best to be quick and precise with your movements. I feel that getting an affordable LED headlight (like a camping headlight) allows you to get the best results.

You may use Tylenol, Ibuprofen (if 6 months of age or older), Arnica, Hypericum, Rescue Remedy or other measures to help with pain control. As of October 2016, the FDA has requested that Hyland's Teething Gel or Orajel Naturals gels no longer be used. **A suitable replacement is an organic olive oil, which can be safely used in the mouth following the procedure.** To provide additional pain control you may add 100% clove oil to the olive oil (see attached handout for directions on how to make).

The main risk of a frenectomy is that the mouth heals so quickly that it may prematurely reattach at either the tongue site or the lip site, causing a new limitation in mobility and the persistence or return of symptoms. The exercises demonstrated below are best done with the baby placed in your lap (or lying on a bed) with the feet going away from you.



A SMALL AMOUNT OF SPOTTING OR BLEEDING IS COMMON AFTER THE PROCEDURE, ESPECIALLY IN THE FIRST FEW DAYS. WASH YOUR HANDS WELL PRIOR TO YOUR STRETCHES (GLOVES AREN'T NECESSARY).

TIMING: DO ONE STRETCH ON THE EVENING OF SURGERY. THEN, SKIP AHEAD TO THE NEXT MORNING (KEEP IN MIND THAT THIS IS THE ONLY TIME THAT YOU SHOULD SKIP THE OVERNIGHT STRETCH). MY RECOMMENDATION IS THAT STRETCHES BE DONE 6X/DAY FOR THE FIRST 3 WEEKS, AND THEN SPENDING THE 4TH WEEK QUICKLY TAPERING FROM 6 TO 5 TO 4 TO 3 TO 2 TO 1 PER DAY BEFORE QUITTING COMPLETELY AT THE END OF THE 4TH WEEK. I FIND IT'S EASIEST FOR PARENTS TO DO 5 OF THE STRETCHES DURING THEIR WAKING HOURS AND ONE OF THOSE STRETCHES IN THE MIDDLE OF THE NIGHT, TAKING CARE TO NOT GO MORE THAN 6 HOURS BETWEEN STRETCHES. DIAPER CHANGES ARE A GOOD TIME TO DO THE EXERCISES.

The lips/cheeks are the easier of the 2 sites to stretch. If you must stretch both sites, I recommend that you start with the lips/cheeks. Typically, babies don't like either of the stretches and may cry, so starting with the lip allows you to get under the tongue easier once the baby starts to cry. For lip ties or buccal ties, you will want to do two motions; swiping and stretching.

- **Swiping:** Simply place your finger under the lip/cheek and move it up as high as it will go (until it bumps into resistance). Then gently sweep side to side for 1-2 seconds. Remember, the main goal of this procedure is to insert your finger between the raw, opposing surfaces of the lip/cheek and the gum so they can't stick together.
- **Stretching:** With your fingers still inside the mouth and under their lip, gently pull upper lip up or push lower lip down (depending on what was released) and hold for 5 seconds. If stretching the cheek, hook the inside of the cheek with your finger and pull up or push down (depending on what was released) and hold for five seconds. **Please watch videos on drghaheri.squarespace.com/aftercare for reference.**



The tongue should be your next area to stretch. You will want to do 3 different motions; stretching/lifting, swiping and massaging. For all three motions I suggest placing thumbs on your baby's forehead for stability while placing your middle fingers on their chin to keep their mouth open while using your index fingers to do the exercises for all three motions.

- **Stretching/lifting:** Once you have your thumbs and middle fingers placed, you will insert both index fingers into their mouth (insert one in the mouth and go towards the cheek to stretch out the mouth, making room for your other index finger). Then use both index fingers to dive under the tongue and pick it up, towards the roof of the baby's mouth. Once you are under the tongue, try to pick the tongue up as high as it will go (towards the roof of the baby's mouth). Hold it there for 1-2 seconds and then relax. The goal is to completely unfold the diamond so that it's almost flat in orientation (remember, the fold of the diamond across the middle is the first place it will reattach). The key to the success of this stretch is that your fingers are placed deep enough prior to lifting the tongue up. Picture how a forklift works: If you don't get the forklift tynes completely under the pallet, lifting the pallet up will cause it to tip backwards. If you get the tynes completely under the pallet, you can lift the pallet straight up. I recommend pushing your index fingers together to prevent them from separating, then push at the top of the diamond into the tongue (in the direction of the tonsils). Once you are under the tongue, then lift the tongue so that the middle of the tongue comes up with you. If your fingers separate and go on either side of the diamond, your lifting pressure will be directed at the sides of the tongue and not at the diamond itself which is not what we want.



- **Swiping:** With one index finger propping up the tongue, place your other index finger in the middle of the diamond and turn your finger sideways and use a lifting motion from low to high to try and keep the diamond as deep as possible. Do this for 5 seconds. Use a lifting motion when you sweep through the diamond, trying to separate the horizontal fold across that diamond. Make sure your finger starts within the diamond when doing this stretch. This stretch should not be forceful or rough within the wound.
- **Massaging:** Using index fingers massage on either side of the diamond (outside the diamond, towards the floor of the mouth) to loosen up the musculature. You can use more pressure when doing these stretches because you aren't in the wound at this point. Massage each side for 5 seconds. **Please watch videos on drghaheri.squarespace.com/aftercare for reference.**

SUCKING EXERCISES

It's important to remember that you need to show your child that not everything that you are going to do to the mouth is associated with pain. Additionally, babies can have disorganized or weak sucking patterns that can benefit from exercises. The following exercises are simple and can be done to improve suck quality. I would start these on the 3rd day following the procedure, and spend 30-45 seconds on each exercise **prior** to the wound stretches (no need to do these sucking exercises during your nighttime stretch).

- Slowly rub the lower gum line from side to side and your baby's tongue will follow your finger. This will help strengthen the lateral movements of the tongue.
- Let your child suck on your finger and do a tug-of-war, slowly trying to pull your finger out while they try to suck it back in. This strengthens the tongue itself. This can also be done with a pacifier.
- Let your child suck your finger and apply gentle pressure to the palate. Once the baby starts to suck on your finger, just press down with the back of your nail into the tongue. This usually interrupts the sucking motion while the baby pushes back against you. Listen for a seal break and then put your finger back up into the palate to re-stimulate sucking. Repeat as tolerated.
- With one index finger inside the baby's cheek, use your thumb outside the cheek to massage the cheeks on either side to help lessen the tension.



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STARTING SEVERAL DAYS AFTER THE PROCEDURE, THE WOUND(S) WILL LOOK WHITE AND/OR YELLOW AND WILL LOOK VERY SIMILAR TO PUS.

This is a completely normal inflammatory response. Do not let your child's regular doctor, lactation consultant, friend who thinks they're an expert, or anyone else make the determination for you. If you think an infection exists, give our office a call.

IT IS ESSENTIAL THAT YOU FOLLOW-UP WITH YOUR LACTATION CONSULTANT AFTER THE PROCEDURE TO ENSURE OPTIMAL RESULTS. I ALSO RECOMMEND ESTABLISHING WITH A PEDIATRIC CHIROPRACTOR/ BODY WORKER IF NOT ALREADY DONE AND TO FOLLOW UP WITH THEM AFTER THE PROCEDURE AS WELL.

During office hours (8:00am -4:30pm, Monday-Thursday) call the office at (530) 222-1400. After 4:30pm, call the office first to leave a message, then call or text Dr. Barnhart directly at (530) 334-6736 if any of the following:

- **Uncontrolled bleeding**
- **Refusal to nurse or take a bottle**
- **Fever > 101.5 degrees F**