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Frenectomy Post-Op

- **Day 1-3:** Expect the surgical sites to be sore. It is normal for the child to be fussier than normal, especially during exercises. Feedings may be more inconsistent and there may be difficulty latching. You may notice a white or yellow patch formation at the surgical sites as they begin to heal, this is normal.
- **Week 1:** The child's soreness should be improved, though will likely still be fussy with exercises. Feeding should be slowly improving, but may still be inconsistent as the child is relearning how to suck. The white or yellow patch will continue as the surgical sites heal.
- **Weeks 2-4:** Soreness should be noticeably improved, but expect exercises to be irritating for the child. Feeding should be continuing to improve. The healing white or yellow patch will shrink and eventually disappear with formation of a new frenulum.

**Please note that the postoperative healing timeline above is an approximation and does not apply the same way for every child.*

Pain Management:

- **Under 6 months:** Infant Acetaminophen/Tylenol. 10 to 15 mg/kg/dose every 4-6 hours as needed for pain. Do not exceed 5 doses in 24 hours. **1 lb = 0.45 kg.*
 - Liquid (160mg/5ml concentration): 6 lbs = 1.25 ml dose, 10 lbs = 2.25 ml dose.
 - Suppository (80mg tabs): 6 lbs = 40 mg dose, 12 lbs = 80 mg dose.
- **Over 6 months:** Children's Ibuprofen/Advil/Motrin Infants' Drops (50mg/1.25ml) or children's concentration (100mg/5ml), 4 to 10 mg/kg/dose every 6 to 8 hours as needed for pain.
- **Arnica Montana 30c** (homeopathic remedy used to treat inflammation): Dissolve 2 pellets in 2-3 ounces of breastmilk. *Alternatively crush 2 pellets and put on the tongue to dissolve. Do this 4-6 times a day, as needed for pain, 30 minutes prior to stretches. 0 - 3 mo. = 90 min of relief / 3 - 6 mo. = 60 min of relief.*
- **Hypericum 30x** (homeopathic remedy used to treat pain): Dissolve 2-3 pellets in 2-3 ounces of breastmilk. *Do this 4-6 times a day, as needed for pain, 30 minutes prior to stretches. *Pain is when the child presents with discomfort and aversion to nursing that seems connected to post-op pain and pain related to stretches/bodywork.*

- **Olive oil/Clove oil mixture (DO NOT APPLY CLOVE OIL BY ITSELF):** Two drops of 100% clove oil in 10ml of olive oil. Mixture lubricates the surgical sites and offers localized relief. Simply apply a small amount to the surgical sites a minute prior to performing the exercises.

Highly recommended prior to surgery:

- Consultation with a lactation consultant (IBCLC). If bottle feeding only then consult with a feeding therapist.
- Preoperative bodywork w/ Dr. Neel Bulchandani (this is NOT to replace your other bodyworker if established elsewhere).
- The Tummy Time Method (<https://www.tummytimemethod.com/>).
- SLP for oral motor therapy/photobiomodulation therapy (if indicated).

Highly recommended after surgery:

- Continue with the lactation consultant if feeding concerns continue as breastfeeding is preferred over bottle feeding whenever feasible. If bottle feeding only then continue with the feeding therapist.
- Post-operative bodywork w/ Dr. Neel Bulchandani (this is NOT to replace your other bodyworker if established elsewhere).
- Continue the Tummy Time Method.
- If a pacifier is used, use it sparingly (rec. Ninni brand).
- Continue post-operative exercises listed in handout every 4 hours for 6 weeks.
- Sucking exercises and/or suck training if indicated.
- Myochew/Bebe Myounchee use post-operatively to optimize surgical results.
- Baby Led Weaning when of age.
- Establish with a general/pediatric dentist within 6 mo. - 1 year of age.

It is of the greatest importance to fully comply with post-operative exercises to achieve ideal results and avoid reattachment. Understand that the surgical sites will reattach if exercises are not performed as recommended.

Additional Resources:

- Michelle Emanuel (Neonatal / Pediatric Occupational Therapist):
 - https://www.youtube.com/channel/UC1Dg8-3daLaRbx3j_HYBWYA