



CHARLES A. SMITH, DDS & ASSOCIATES

Specialists for Aesthetic Dentistry

Frenectomy Post-Operative Instructions for Infants/Children/Adults

- It is essential that you **follow up with your lactation consultant** after the procedure to ensure optimal results **for infants**.
- It is normal for swelling to occur in the lasered areas. This will usually go down after about a day and a half.
- The baby can be fussy the afternoon and evening following the procedure and may not nurse as much. This is normal and will subside. You may use Baby Acetaminophen (Tylenol) if necessary.
- A small amount of spotting or bleeding is common after the procedure, especially in the first few days. Because a laser is being used, bleeding is minimized. If the lip is bumped, the area may bleed again. Just apply pressure to the area to stop the bleeding with the gauze provided. Make sure it is slightly damp, rather than dry, to avoid tearing the healing wound and skin.

STRETCHES:

- 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.
 - 2.) If you have two raw surfaces in the mouth in close proximity, they will reattach.
- 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.
- 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 are done best with the baby placed in your lap (or lying on a bed) with the feet going away from you.
- Wash your hands well prior to your stretches (gloves are necessary)
- Moisten your finger with aloe, coconut oil, or olive oil when stretching. If you do not have these, you can dampen your finger with water. Don't do the stretches with a dry finger.
- Begin stretches today before going to bed and once during the night (every night). Do not go more than 6 hours without stretching.

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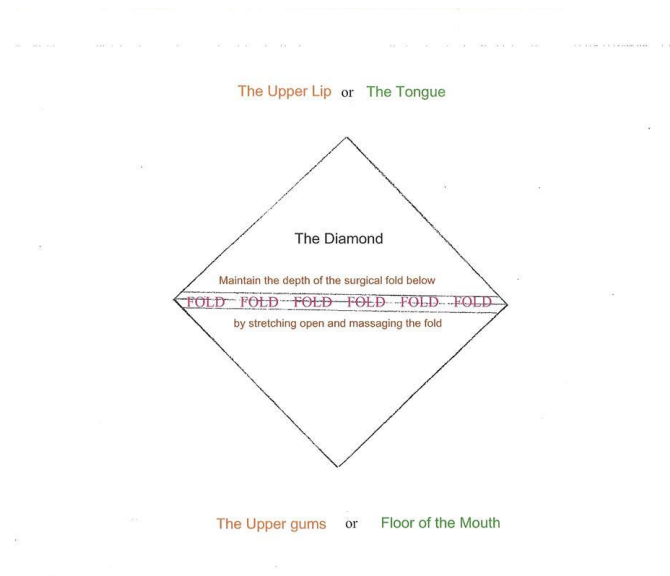
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- Do stretches 8 times a day for the first 3 weeks and then spend the 4th week quickly tapering from 7 to 6 to 5 to 4 to 3 to 2 to 1 per day before quitting completely at the end of the 4th week. Do not go more than 6 hours between stretches.
- Do not quit before 4 weeks or there will be reattachment.

Stretching Information:

Place the baby's head in your lap to aid in proper direction and force.

- A.) The stretching process should not take more than 30 seconds.
- B.) If your fingers do not fit well in the baby's mouth for the stretches then you can use a plastic tongue depressor or Q-tips.
- C.) For the lip: Lift the lip up to full extension with mild to moderate force.
- D.) For the tongue: Lift the lip up from the sides to the full extension with moderate force.



The wounds created are typically diamond-shaped. This diamond has 3 dimensions- height, width, and depth. This is especially important for the tongue wound, which is much deeper than the lip wound. Maintaining these 3 dimensions is the key to successful healing.



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The Upper Lip is the easier of the 2 sites to stretch. If you must stretch both sites, I recommend that you start with the lip. 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 the upper lip, simply place your finger under the lip and move it up as high as it will go (until it bumps into resistance). Then gently sweep from 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 and the gum so they can't stick together.

The Tongue should be your next area to stretch. Insert both index fingers into the mouth (insert one in the mouth and go towards the cheek to stretch out the mouth, making room for your index finger). Then use both index fingers to dive under the tongue and pick it up, towards the roof of baby's mouth. The tongue needs three separate stretching motions:

- Once you are under the tongue, try to pick the tongue up as high as it will go (towards the roof of the 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 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 tines completely under the pallet, you can lift the pallet straight up.** I recommend pushing your index fingers together to prevent them from separating, push towards the diamond and then make sure the tongue goes **up** and not **backwards**. 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.
- With one finger propping up the tongue, place your other finger in the middle of the diamond and turn your finger sideways and use a lifting motion from front to back to try and keep the diamond as deep as possible. 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.
- Massage on either side of the diamond (outside the diamond) to loosen up the musculature of the remainder of the floor of mouth. You can use more pressure when doing these stretches because you aren't in the wound at this point.



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This is an example of an improper stretch. Do you see how the fingers are away from the diamond? As these fingers lift up the tongue, too much of that force is directed at the sides of the tongue, and the middle portion is still pinned down. This will lead to reattachment. Focus on getting your index fingers mentally glued together- this forces you to stay in the middle, right on top of the diamond. As you push into the diamond and then lift the tongue up, the top half of the diamond will ideally come away from the bottom half of the diamond. It is attention to separating the fold across the diamond that results in a successful post-operative stretching regimen.