

POSTOPERATIVE INSTRUCTIONS CLEFT PALATE

FOLLOW-UP

Schedule office visit (202)444-9302 one to two weeks after surgery
Schedule team visit 3-6 months after surgery (703)970-2690

WHAT TO EXPECT

Right after surgery your baby may be fussy or asleep. The face may appear swollen. There may be some bloody discharge coming from the baby's mouth and nose. This will slow and then stop by the evening of surgery. The baby may have sore areas in the corners of the mouth from having the mouth open during surgery.

An IV will be in place to provide the baby with sugar water. This will give him/her energy and fluids until he/she feels up to drinking again.

A tongue suture may be placed but it will be removed the night of surgery or the next morning. This helps keep the tongue forward and the airway open when swelling is present.

Expect changes in your child's sleeping, eating, and playing routine after surgery.

For 2 weeks after surgery your child may need extra attention and understanding. Remember that this situation is temporary and that his or her regular routine will return.

Your baby will want to be held by you for comfort. Don't worry about spoiling your child during this time.

LENGTH OF STAY

With cleft palate repair, there may be swelling that needs close monitoring. If this happens, your baby may spend one day in the Pediatric Intensive Care Unit (PICU). Typically, baby is assigned a room on the regular pediatric wing.

When your baby begins to feed well by mouth, is breathing easily, and is feeling comfortable you may go home. This is usually 2-3 days after surgery.

SUTURE CARE

Education regarding feeding will be provided by the nurse. You may request a dietary consult.

Dissolvable sutures are used to close the palate. They do not need to be removed but will dissolve on their own in about 3-4 weeks.

No formal wound care is needed for palate sutures. Your baby's saliva will wash the wound clean. Baby should drink clear water after feeds to

prevent crusting and breakdown of intraoral sutures.

With cleft palate repair, a small amount of blood from the mouth and nose is normal. If a large amount of blood occurs, call your doctor.

MEDICATIONS

Antibiotics are not usually postoperatively. Tylenol with hydrocodone elixir may be used for pain control. A prescription will be given to you before hospital discharge. You may use the elixir for a few days post surgery but then try to see if pain can be controlled with Tylenol alone. Irritability related to pain should improve in about 3 days. **Do not give Aspirin or Ibuprofen. These can cause bleeding after surgery.**

RESTRAINTS

Baby should wear No-Nos for four weeks from the day of surgery. This keeps baby from putting anything in the mouth that may hurt the sutures. Avoid letting anything hard and/or sharp near the sutured area. Instruct other family members and friends that hard food and toys are not allowed. Teach other children not to put anything near baby's mouth. Arm restraints may be removed during bathing for a short time, however, close supervision is needed.

Throughout the day, check your baby's arms for skin irritation and circulation. Baby powder may ease any irritation that occurs. Notify your doctor if it does not go away.

POSITIONING

The baby can sleep in any position after surgery. It is best to keep the baby in a position that allows secretions to drain. The head of the bed may be elevated to reduce swelling.

FEEDING

Right after surgery your baby will have an IV line in place. This is to keep the baby hydrated since he or she may not be up to eating yet.

After palate repair, your child will be given sips of water and then move to clear liquids. Slowly soft foods will be added. Keep baby on soft foods only for 3 weeks after repair. No hard candy or crunchy foods are allowed (crackers, Cheerios). Also, do not feed peanut butter or sticky foods (soft cheese or bread) as it may stick to the palate.

Use cups or spoon with feeds. Place spoon on tongue only. Avoid straws and forks. Do not allow you child to self feed. Sometimes you can wean your child from the bottle before surgery so that they are comfortable with cup drinking.

*Provide routine healthy diet to promote healing. Arrange dietary consult as needed.

You may need to feed your child more frequently as the soft diet may not satisfy his or her hunger as a regular diet with solid foods.

Drooling may be seen 1-2 weeks after surgery. This is normal. Offer

liquids frequently to replace fluids lost.

TOYS

Use stuffed, soft animals without button eyes, large blocks that do not fit into the mouth, large balls, soft water toys, and busy boxes. Do not use balloons, pencils, sharp pointed toys, small toys, rocking horses, or crayons.

QUESTIONS

During routine office hours contact Dr. Baker at (202)444-9302. After hours call the Inova Fairfax Hospital for Children operator at (703)698-1110 and have them page the plastic surgery resident on-call or call Dr. Baker at (202)444-7243 at Georgetown and have Dr. Baker paged.

Swelling is normal and will take months to completely resolve, but the majority of the swelling should go down after several weeks.

CALL DOCTOR IF

Fevers less than 100.5 degrees are not uncommon after surgery. If a fever persists or is greater than 101 degrees, call your doctor to let him know. Do not take oral temperature.

If your child develops: excessive swelling, redness at the mouth or surgical site, fever, severe pain, infection/drainage (bright red, green or yellow), unusual bleeding, poor feeding (less than 12-16 ounces per day) and fewer than 6 wet diapers per day, baby is overly cranky or weak. Snoring is normal after this surgery. If baby appears to be having difficulty breathing, then call your doctor.

For unknown reasons, it is possible that the wound will separate and need to be repaired at a later date. This is extremely rare. Typically, the baby will have excellent surgical results.