

## Active Wound Management

These exercises are mandatory to ensure your infant's successful healing outcome. Failure to follow these stretching methods may result in reattachment and the need for additional surgery.

**BEGIN THESE PHYSICAL THERAPY EXERCISES TONIGHT AND THEN CONTINUE THEM EVERY 4-6 HOURS FOR A MINIMUM OF 3 WEEKS.** Wash your hands prior to completing the exercises and keep your nails short. Gloves are not necessary but they are helpful to reduce slipping.

When stretching, use enough force to make sure the area is as open as possible. You will feel resistance in the tissue when you have opened the area enough. Take comfort in knowing that you cannot accidentally make the wounds bigger with stretching.

If you find stretching before a feeding makes feeding too challenging, try doing it in the middle of a feeding or at the end instead. Place your infant in your lap with their head toward you and feet away from you. If a second person can help hold your baby's hands this will help.



All Photos courtesy of Dr. Larry Kotlow

## The Upper Lip Stretch

Place your index fingers in the mouth under the upper lip. Grasping the upper lip with your index fingers and thumbs, gently pull the lip out and upward as far as you can over the nostrils and hold the position to a slow count of 3. Be sure to be in the center, close to the wound so that the force of the lift is being applied to the central area of the lip.



## The Tongue Stretch

Place your index fingers in the mouth and position them directly under the tongue. Touch your index fingers together underneath the tongue keeping them as centered as possible and push the tongue back and down to flatten the diamond-shaped wound. Hold for a slow count of 3. Using your middle fingers or an extra helper to hold the chin down is helpful.



As seen in the example photos, a thick white healing scab is expected within 12-24 hours after surgery. The thick white colour is normal healing and does not indicate any type of infection. A more yellow wound is common in newborn babies with jaundice symptoms. This healing scab will completely go away by the end of the 3-week stretching period. If this healing scab appears to tear or bleed during a stretch, this is an indication that the wound is reattaching and that more force is needed with stretching to fully open the original wound.

A fever is not a common side effect of this procedure. Please visit your primary care physician immediately if your baby develops a fever as it is often unrelated to the wounds.

Slight bleeding can be expected in some cases with stretching. Feeding your baby will often stop it quickly.

In the rare case that the bleeding is excessive you can moisten a black tea bag (herbal tea will not work) and apply it directly to the wound with pressure for several minutes. The most important rule is that if you cannot reach Dr. Kerr and the bleeding will not stop, proceed immediately to an emergency room.

Improvements in feeding will take time as healing occurs. Most infants will start to exhibit pain symptoms around 3-6 hours after the procedure. The most challenging time is within the first and second day.

Reattachment of the wounds may cause feeding issues to return.

Thank you for having the confidence in our dental office to provide your child's oral health care. The following information is designed to give you the best post-operative success rate following your infant's oral surgery.

In addition to the physical therapy stretches listed in this pamphlet the following services are highly recommend to improve your overall success rate:

It is strongly advised that you have an in-person consultation with an **International Board Certified Lactation Consultant (IBCLC)** prior to your procedure. We can offer resources who can support you with your surgical experience as Dr. Kerr's scope of practice is limited to caring for the oral wounds specifically. Even if you are experienced in breastfeeding we always encourage having IBCLC support for this procedure.

We also strongly recommend seeing a therapist knowledgeable in **Cranial-Sacral Therapy** for infants, such as a Pediatric Chiropractor, Cranial-Sacral therapist, or Osteopath who can aid in restoring full oral function and mobility. In many cases feeding issues can be directly related to body tension that cannot be resolved with oral surgery alone.

Regular **Tummy-Time Activity** should be practiced daily following your infant's procedure. Check out "Parent Resources" at [www.tummytimemethod.com](http://www.tummytimemethod.com) for more info.

The following Youtube videos are recommended to improve latch, oral function and mobility:

- 1) Lisa Lahey IBCLC - "Infant Massage", "Infant Oral Exercises, and "Infant Suck Training"
- 2) Michelle Emanuel OT – "Sleeping Tongue Posture Hold"

## Pain Management

**\*IMPORTANT\* Do Not Use any oral numbing products containing Benzocaine under the age of 2 as this may lead to a rare, but serious medical issue.**

**Acetaminophen or Ibuprofen medications** can be given as needed to reduce post-operative pain. Please follow the appropriate instructions given by Dr. Kerr or a Physician or Pharmacist for your infant's age and weight.

For a homeopathic option, **Arnica Montana 30CH** tablets can be found at Superstores, Pure Nature or other holistic stores and can be used to help with muscle pain. Follow the dosing on the vial and either dissolve the tablets in breastmilk and give the milk by syringe or place them directly in a bottle. Do not feed the tablets directly to an infant.

Staying ahead of hunger cues will help support easier feeding during wound care. A mother's breastmilk can act as an analgesic to help baby cope with post-operative pain. Plenty of skin-to-skin contact, reassurance and gentle rocking or walking motions can help to ease your baby's pain. Feeding your infant in the bath together is a wonderful and effective way to calm them when they are having a hard time settling.

If you have any questions or concerns following your infant's procedure please do not hesitate to contact Dr. Kerr directly at any time using the following methods:

By Text or Call to:  
**519-567-2878**

By personal email at:  
[jenniferkerr.dds@gmail.com](mailto:jenniferkerr.dds@gmail.com)



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