

Post-Operative Instructions

After the surgery:

Patients can expect some mild swelling, pain, and or discomfort as part of the normal process of wound healing. Generally, this is mild and can be controlled with over-the-counter pain medications. Possible (but very rare) complications of frenuloplasty may include anesthesia complications, bleeding, pain, numbness, failure of procedure, voice and swallowing changes, infections, injury to adjacent structures, and scarring.

Immediately after surgery:

- Bleeding: It is normal to experience some bloody oozing during the first 1-2 days. If steady bleeding occurs, place gauze or a moist tea bag under the tongue to hold pressure and call the doctor you saw. If heavy bleeding persists, please go to your local emergency department.
- 2. Wound Care: You will be provided with a prescription for 2% viscous lidocaine. We recommend getting gauze from the pharmacy. Apply 5 ml to the gauze and hold it over the wound for at least 5 minutes prior to doing the Active Wound Care.
- 3. Pain Medications: We recommend using Tylenol and/or Ibuprofen as needed for pain, alternating them every 3 hours. We have given you a prescription for 2% viscous lidocaine and possibly Tramdol. If you are experiencing pain not relieved by Tramadol, Ibuprofen, Tylenol, apply 5 ml (1 teaspoon) of lidocaine to the gauze.

- Leave the gauze in place as long as you can for the first 24-48 hours. Replace the gauze as needed.
- **4. Sutures:** We use absorbable sutures that will fall off on their own around 5-7 days after surgery. On day 5, start stretches with fingers.
- 5. Oral Hygiene: We recommend rinsing with saltwater and/or alcohol-free mouthwash several times a day to keep the wound clean and reduce the risk of infection.
- 6. Myofunctional Therapy Exercises: It is especially important to perform the stretches we prescribe, and exercises as prescribed by your therapist to obtain the most optimal results.

Be gentle with exercises for the first 3-5 days.

Stretching is better than strain. Exercises will be uncomfortable but should not cause sharp pain.

At any time, call our practice if you experience any of the following:

Severe pain that does not improve with medication, Brisk bleeding, Severe swelling at the site of surgery,

Difficulty breathing, fever higher than 102 F.

If you have any questions or concern, please call the office at 720-507-0077 or Dr. Jesse at 303-913-9172 or Dr. Chad at (720) 445-5622

POST OPERATIVE FRENECTOMY ACTIVE WOUND CARE (EXERCISES)

START ACTIVE WOUND CARE (EXERCISES) RIGHT BEFORE BED THE NIGHT OF SURGERY. THE NEXT DAY, BEGIN EXERCISING FIVE TIMES A DAY.

Sutures – While in front of a mirror, open mouth wide not allowing your jaw to close while lifting tongue up and back. Lift tip of tongue up and back toward soft palate, hold for 20 seconds 3-5 times, 5 times a day. You should feel some resistance behind the front teeth.

After sutures dissolve – Open wide. Use thumb or index finger to hook around lower front teeth to anchor floor of mouth (should feel squishy), then use opposite thumb or index finger to swipe tongue, up and back toward soft palate using some pressure to lengthen tongue, hold for 10-20 seconds. You should feel some resistance behind the front teeth. Repeat 5 times a day. This will be uncomfortable, but you should not feel sharp pain.

Lip – Pull out and up (upper lip) or down (lower lip), hold separating lip from gum tissue for 10 seconds, 5 times a day.

ACTIVE WOUND CARE MUST BE DONE 5 TIMES A DAY FOR 6 WEEKS IN ADDITION TO ANY MYOFUNCTIONAL EXERCISES TO AVOID REATTACHMENT/CONSTRICTION.

We recommend rinsing with saltwater and/or alcohol-free mouthwash several times a day to keep the wound clean and reduce the risk of infection.