

PATIENT INFORMATION**FRENULOTOMY AFTERCARE
LEAFLET**

This information will provide advice on the aftercare of your baby following a frenulotomy (a procedure to release tongue tie).

Wound healing

Following the release of baby's tongue tie, there may be a diamond shaped wound under the tongue. It could look red and raw for the first 24 hours, but over the next few days go white, yellow or even orange. This is part of the normal healing process.

The size of the wound will reduce and then disappear over the following 7 to 14 days. The mouth heals very quickly, aided by breast milk and saliva.

You should continue to feed your baby responsively. This will help with healing and it will comfort your baby.



Post-procedure (Immediate)



When to be concerned?

Infection is very rare but you should contact your GP or out of hours 111, if

- Your baby's wound looks red, inflamed and swollen
- Your baby develops a high temperature
- Your baby has fed well since the procedure but becomes reluctant to feed.
- Your baby is sleepy or irritable

To reduce the chance of infection you should pay careful attention to the cleaning and sterilising of any feeding equipment such as bottles, teats and dummies.

Formula feeds should be made up using the NHS guidance
<https://www.firststepsnutrition.org/making-infant-milk-safely>

Bleeding from the wound

There may be a small amount of bleeding from the procedure, but feeding your baby immediately after can help to stop this. The specialist midwife will check that bleeding has stopped before you go home.

Further bleeding at home

Further bleeding after the frenulotomy is unusual but can sometimes happen.

You can stop the bleeding by feeding your baby, just as you did immediately after the procedure. Feed your baby either breast or bottle for at least 15 minutes

If baby refuses to feed, sucking on a dummy or your clean finger will have similar effect.

If the bleeding is heavy or doesn't stop with a feed, then apply continuous pressure **under** the tongue, on the wound area with one finger. This can be done using a clean cloth, such as a muslin cloth (not cotton wool). This should be done for at least 10 timed minutes. The bleeding should stop. Do not put pressure under the baby's chin and this can affect breathing.

If the bleeding continues after this time, attend your local Emergency Department or call 999 to get your baby checked. Remember to take your personal child health record (red book) with you.

Further information can be found;
<https://www.tongue-tie.org.uk/bleeding-guidelines>

Your baby's behaviour.

You should respond to your baby's needs as normal, and feed responsively. You may notice that your baby's feeding technique improves immediately after the frenulotomy, but for some babies, it can longer. You and your baby will have been managing for some time with restricted tongue movement, so you will both need time to get used to your baby's tongue becoming more mobile.

Calming Strategies that can help settle your baby.

- Skin to skin contact.
- Frequent cuddles.

- Using a Sling.
- Co bathing (sharing a bath)
- Baby massage techniques.
- Letting you baby sucking on your clean finger to calm before latching.
- Using a spoon or cup to offer a feed

Frequent feeds will be comforting, and means baby will get lots of practice at moving the unrestricted tongue.

Can I give my baby liquid paracetamol to help with pain?

Studies have suggested that breastfeeding or giving breast milk is a good way to reduce pain in baby's who have undergone a minor painful procedure. However if you feel your baby would benefit from liquid paracetamol.

For babies under 8 weeks of age and premature baby's:

- Paracetamol medicine is safe but must be prescribed by a General Practitioner to work out the dose based on baby's weight.

For babies over 8 weeks:

- Paracetamol can be given without a prescription as guided on manufacturer's instructions.

How can I help to prevent the reformation?

Reformation is when the wound heals so well that scar tissue can form that can have the same impact on feeding as before. This can occur in (4 in every 100 babies that have a frenulotomy).

There is some evidence to suggest that doing some fun, gentle exercises with your baby can help strengthen tongue mobility and prevent scar tissue.

- Stick your tongue out for your baby to copy.
- Run your finger along baby's gums to encourage sideways movement.
- Encourage sucking on your upturned little finger and attempt a tug of war game.

How often should the tongue exercises be performed?

Aim to do each exercise, two to three times a day for a few weeks or until your baby's feeding technique has improved.

Continued support with feeding

All babies are different, you may notice your baby's feeding improves immediately, or more likely, it may take time as you both get used to the improved tongue function.

If you nipples were sore before the procedure, this may take time to heal.

In some cases no noticeable improvement in feeding occurs.

Continue to access help from the breastfeeding support team and at local groups if you feel you need it. Optimising positioning and attachment will mean your baby feeds more effectively and will help resolve any feeding issues that are not tongue-tie related.

You may find these links helpful;

Breastfeeding support workers and groups

<https://www.startingwellworcs.nhs.uk/breastfeeding-support-workers>

Positioning and attachment

www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/positioning-and-attachment-video

Paced bottle feeding

<https://www.youtube.com/watch?v=xlrk5T0jWwQ>

If you notice a marked deterioration in feeding **4 weeks** after the frenulotomy and your baby is under 16 weeks old, please contact the tongue tie service again.

Wah-tr.Tongue-tie@nhs.net

Feedback is important to our service.

Take your Friends and Family Test now!

When you attend our hospital for treatment you will be asked to take the Friends and Family Test. You can fill in one of the postcards available in clinic or you can complete the online survey by visiting:

<https://apps.worcsacute.nhs.uk/PublicSurvey/FFTWEBMAT/>

You will also receive a questionnaire from the tongue tie team with a stamped addressed envelope. This feedback is important to us and will inform us how feeding is going and how well baby is doing.

We would appreciate you completing this form to improve our service and audit.

Contact information;

Infant Feeding specialist midwives Team

01905 760507 (office hours 9-5)

Useful Resources

- NICE Guideline available at: [Overview | Division of ankyloglossia \(tongue-tie\) for breastfeeding | Guidance | NICE](#)
- Association of tongue tie practitioners: www.tongue-tie.org.uk
- UNICEF: <http://www.unicef.org.uk/BabyFriendly/>
(Search for tongue-tie)
- Association of breastfeeding mothers [Information Library – ABM](#)
- La leche league: <http://www.laleche.org.uk/>
- Breastfeeding network: <http://www.breastfeedingnetwork.org.uk/>
- NHS : <https://www.nhs.uk/conditions/tongue-tie/>

Breastfeeding support can also be accessed on the following telephone helplines:

- On evenings and weekends calls can be made to The National Breastfeeding Helpline 0300 100 0212 available from 9:30am-9:30pm
- NCT helpline 0300 330 0700 from 8am-midnight
- La Leche helpline 0345 120 2918 from 8am-11pm

Get social

Our Infant feeding team also run the

[Worcestershire Welcomes Breastfeeding Facebook Page](#)

Feel free to 'like' our page for infant feeding updates and news and a little humor .

The Starting Well Partnership can also be followed on social media, for updates on breastfeeding support groups.

[The Starting Well Partnership on Facebook](#)

[The Starting Well Partnership on Instagram](#)

Look out for this logo in shops cafes, bars and library's
This means you are welcome to breastfeed your baby here



If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.