Mouth surgeries, after-care

Your child may need mouth surgery to fix problems and help them speak, breathe, and eat better. These surgeries may include:

• **Frenuloplasty** (FREN-you-low-PLAS-tee): Repairing a short frenulum (thin tissue that connects the tongue to the bottom of the mouth) so your child can talk better. The surgeon makes a small cut on the frenulum to free the tongue to move.

• **Palatoplasty** (PAL-at-oh-PLAS-tee): Repairing a cleft palate (split upper lip and upper part of the mouth) to improve swallowing, eating, breathing, and speaking.

• **Pharyngoplasty** (far-IN-go-PLAS-tee): Reshaping the soft palate (tissue at the roof of the mouth) so less air escapes through the nose. This helps your child talk better.

What should I expect after my child’s mouth surgery?

• If your child had a **frenuloplasty**, don’t put them on their tummy for a while after surgery. This will put pressure on the jaw and make it harder to heal.

• If your child had a **palatoplasty**, the swelling in the back of the throat may make your child snore and have a stuffy nose. The stuffiness will get better in 3–5 days.

• If your child had a **pharyngoplasty**, have them lie on their side or tummy to breathe easier and prevent the tongue from blocking the new opening. Swelling in the back of the throat may make your child snore and have a stuffy nose. This will get better in 3–5 days.

What can my child eat after surgery?

After your child wakes up from surgery:

• Give them clear liquids, including water, apple juice, an electrolyte drink such as Pedialyte® or Gatorade®, ice pops, and plain gelatin for the first 24 hours. Most babies can take a bottle or resume breastfeeding.

• After 24 hours, if they can keep liquids down, you can feed your child soft foods like cooked cereal, applesauce, and pasta. Don’t give your child fatty foods like hamburgers and pizza for a few days after surgery.

• Avoid sticky or thick foods that may stick to the stitches or be hard to swallow and sharp foods like crackers and chips for a few weeks.

If your child’s surgeon gives you different diet instructions, follow them instead.
What can I do if my child vomits or feels like vomiting?

After surgery, many children feel nauseated and may vomit in the first 24 hours. This can be caused by medicines during surgery, car movement, or pain medicine after surgery. Help control nausea by:

• Encouraging your child to lie still
• Offering children younger than 2 years old water, apple juice, or an electrolyte drink
• Offering older children ice pops, an electrolyte drink, gelatin, clear soda such as decaffeinated Coke®, or Sprite®.

Help your child drink every 15–30 minutes, but don’t force them to drink. If your child vomits, let their stomach settle for 30 minutes. Then offer clear liquids or ice chips again. Once your child has stopped feeling sick, begin feeding them solid foods. If your child vomits for several hours, call their healthcare provider for instructions.

What are the signs of dehydration?

Your child may be low on body fluids (dehydrated) after surgery. Signs of dehydration include:

• Dark yellow urine
• Dry mouth (no spit)
• Chapped lips
• Sinking soft spot on a baby’s head

After surgery, encourage your child to urinate (pee) every 2–3 hours. Usually, normally urinating (peeing) resumes within 24 hours after surgery. A baby should have 6–8 wet diapers within a 24-hour period; an older child should pee every 3–4 hours.

How do I help my child manage pain after surgery?

To help your child manage pain, comfort them and listen to their concerns. Make your child as comfortable as possible to encourage healing. Talk to an older child about pain levels, and watch for signs of pain in a younger or developmentally delayed child. A child in pain may moan, whimper, make a face of pain, cry, be irritable, be inactive, not eat, or not sleep.

If it is not time for pain medicine, try other ways to control pain, like watching a favorite show, giving massages, changing position every few hours, or playing games.

What medicine does my child need?

Alternate doses of acetaminophen (such as Tylenol®) and ibuprofen every 3–4 hours for the first couple of days. If your child is sleeping, do not wake them to give them another dose. It is important to be aware that some pain medicines contain acetaminophen. This can be a problem if you are using a Tylenol® to help manage your child’s pain. Make sure that you are not giving your child too much of this medicine. Have your child eat when taking the pain medicine, or they may vomit or feel nauseated.

How should I care for my child’s mouth?

• Rinse your child’s mouth with water after each meal. This helps to prevent infection.
• Don’t let your child put eating utensils, toys, straws, or fingers in their mouth for at least 1 week.
• Use a soft washcloth to clean your child’s teeth and gums.
• Don’t touch the stitches. They will absorb naturally and don’t need to be removed.
How much drainage is normal?
It is normal for your child to have some mouth and nose drainage tinged with blood. This should stop 24 hours after surgery.

When can my child take a bath or shower?
Your child may bathe or shower the day after surgery.

How active can my child be?
Surgery may affect your child’s coordination. They may feel dizzy or drowsy for the next day or two. To keep your child safe:
• Don’t let a toddler or young child walk without help.
• Keep side rails up on cribs.
• Have your child avoid activities that require balance, including playing on a playground, riding a bike or scooter, snowboarding, or rollerblading.
• Discourage teens and young adults from driving a car or operating anything that requires quick decisions.
• Don’t send your child back to school right away. Ask your child’s doctor when your child should return to school.

What is normal behavior after surgery?
It is normal for your child’s behavior to change after surgery. They may act like a younger child (bed wetting or acting out), change sleep and eating patterns, or have nightmares. Be patient. Most behavior changes last a few days to 2 weeks. Remember that your child’s routine was upset by surgery and comfort them. If the behavior lasts longer than 4 weeks, call your child’s doctor.

When should I call my child’s doctor?
If you are worried about your child or have questions, call their surgeon’s office from 8:30 AM–4:30 PM, Monday through Friday. If the office is closed, call Primary Children’s Hospital at 801.662.1000, and ask for the resident on call for your child’s surgeon. You can reach the resident at any time.

Call your child’s doctor if you notice:
• A fever higher than 101 °F
• Drainage from the wound increases
• Increased swelling
• Excessive vomiting or nausea
• Fingers or toes are numb
• Signs of dehydration (dry mouth, less than 6–8 wet diapers per day)
• Excessive diarrhea or constipation
• Excessive pain

If you can’t wake your child or they have chest pain or shortness of breath, call 911 or immediately take them to the emergency room.

When should my child have a follow-up appointment?
Your child’s surgeon will tell you when to schedule a follow-up appointment for your child.

Notes

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