

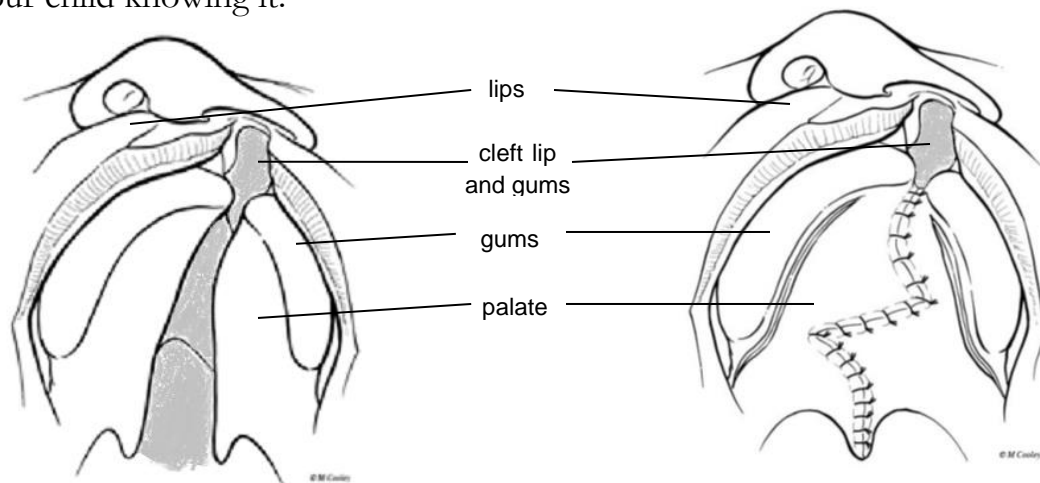


Cleft Palate Repair: Instructions after Surgery

Your child's cleft palate (Picture 1) has been repaired, and the opening in the roof of the mouth has been closed (Picture 2). There are a few things to know about your child's care at home. Other than these special instructions, your child should be cared for in the same way as any child his or her age.

Protecting the Repair

The roof of your child's mouth (the palate) is still healing and should be protected from injury for about 3 weeks after surgery. There may be no feeling in this area for a while after the surgery. This means that your child can injure the roof of the mouth without you or your child knowing it.



Picture 1 Cleft palate
(before surgery)

Picture 2 Cleft palate repair
(after surgery)

Listed below are objects that could hurt your child's mouth. **Hard objects should be put away or kept out of your child's reach while the palate is healing.**

- Small wooden, metal, or plastic toys
- Toys with small parts
- Toothbrushes
- Knives, forks and spoons
- Popsicles and their sticks
- Drinking straws
- Suckers and lollipops
- Thermometers

Please discuss with your surgeon the use of a pacifier after surgery.

Mouth Care

- To clean your child's teeth and gums, use a gauze pad dipped in plain water or a small amount of mouthwash mixed with water. Wipe the front of teeth only.
- Do not use a toothbrush in your child's mouth for 3 weeks.
- Have your child drink water after eating to keep the mouth clean.

Drinking and Eating

During this time, it is most important to make sure that your child is drinking enough liquids to stay hydrated. You will know if your child gets enough fluids if he or she has the same number of wet diapers after surgery as before. Your child should have a wet diaper at least every 8 hours. If there are fewer wet diapers, call the Cleft Lip and Palate Center helpline. This may be a sign of dehydration.

For a short while after surgery, your child may not eat as well as before surgery. See page 6, the last page of this Helping Hand, for a list of foods allowed after surgery.

- Give soft, pureed, or mashed foods that have the texture of pudding **for 3 weeks**. The food is like stage 1 or 2 baby foods.
- **Do not give foods that have chunks, lumps or pieces, such as seeds, grains, pulp, or skin**
- Do not give hard, crunchy foods such as cold cereal, cookies, crackers or chips.
- Use only a spoon for feeding.
- Do not let your child feed himself.
- Make sure that the food is not too hot.
- Your child may drink from a bottle or sippy cup with a soft spout, right after surgery.
- You may continue to feed your child with the same bottle system used before surgery. For more information on the types of bottles to use, see Helping Hand HH-I-21, *Cleft Palate: Feeding Your Baby*.

Arm Splints

Your child will need to wear arm splints for three weeks. These splints keep your child from putting his fingers in his mouth and accidentally damaging the repair. Before your child leaves the hospital, be sure a nurse shows you how to put the splints on properly. To find out more, refer to Helping Hand HH-II-16, *Arm Restraints*.

Activity or Play

- Your child may play as usual but needs to be watched more carefully during the first few weeks after surgery.
- Do not let other children give your child things to play with or to eat without your approval.
- Soft toys are best for the child to play with while the palate is healing.

Pain and Medicines

It is important for your child to take medicines as directed by his doctor. Your child will be sent home with an antibiotic. The antibiotic needs to be taken until all of it is gone.

Some pain is normal after palate repair. For pain, your child will start with a prescription medicine called Lortab[®]. As your child's pain improves, he may start taking over-the-counter pain medicines such as Tylenol[®] (acetaminophen), or Motrin[®] or Advil[®] (ibuprofen) instead of Lortab. After a few days, only over-the-counter pain medicine will be needed.

Pain Medicines

	Prescription Narcotic Medicine	Over-the-Counter Medicine	
Medicine	Lortab [®] (Hydrocodone/Acetaminophen)	Tylenol [®] (Acetaminophen)	Motrin [®] or Advil [®] (Ibuprofen)
How often to take	Tylenol [®] OR Lortab [®] - may give every 6 hours as needed		May give every 6 hours as needed

Things to know about Lortab and its side effects:

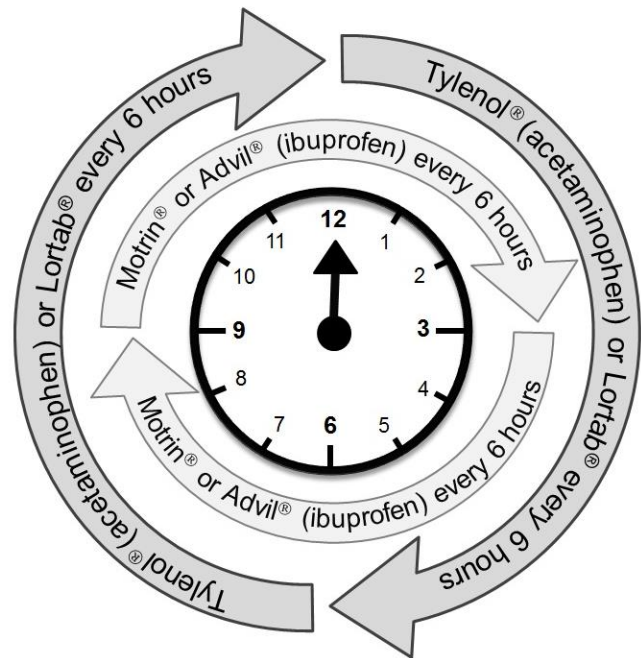
- Contains both the narcotic hydrocodone and Tylenol
- Can be taken every 6 hours
- Has a side effect of constipation. If your child becomes constipated this may add to your child's pain and make it difficult to tell why your child is uncomfortable.
- Should NOT be taken within 6 hours of any other medicine that contains Tylenol (Triaminic[®], certain cold and cough medicines)
- As soon as possible, switch from using Lortab to Tylenol alone.

Over-the-counter pain medicines:

- Motrin or Advil (ibuprofen) and Tylenol (acetaminophen) can be used.
- Can give one dose of one kind of medicine every 6 hours. Two kinds of pain medicine cannot be given at the same time. (Picture 3 on the next page)

Pain and Medicines, continued

- If using both Motrin and Tylenol, the dose of each type of medicine must be alternated. Give one kind of medicine first; then 3 hours later, give the second kind of medicine. For example, start with one dose of Motrin at 9:00 AM; 3 hours later at noon, give the dose of Tylenol. At 3:00 PM, give Motrin again. At 6:00 PM, give Tylenol. (Picture 3).
- Tylenol should NOT be taken within 6 hours of any other medicine that contains Tylenol (Lortab, Triaminic, cough and cold medicines).
- Use a pediatric measuring device (available at the pharmacy) to measure the exact dose. Do not measure liquid medicines in kitchen spoons.



Picture 3 Alternating Pain Medicine

What to Expect After Surgery

For the first few days after surgery, you may see the following things.

- There may be a small amount of blood in the mucous or saliva (spit) for several days. The mucous or saliva may appear pink.
- More clear drainage than usual may come from the nose (snot) for several weeks. This is because the opening between the nose and mouth is now closed. Before surgery, mucous drained directly into the mouth.
- Your child may snore and sound congested for several weeks. This will go away when the swelling goes down and there is less drainage.
- It may be harder for your child to sleep as well as before surgery. Sleep habits should return to normal after several weeks.

More Tips

- Dress your child in shirts that either button down or can be zipped. That way, you will not need to lift the shirt over the head and face.
- Long-sleeve shirts should be worn under the arm splints. The sleeves will help the splints to stay in place and prevent skin irritation.

When to Call the Doctor

Call your child's doctor or the Cleft Lip and Palate Center's helpline if your child has:

- Fever over 101° F when taken rectally, axillary (under the arm) or in the ear.
- Pain that does not go away when you give pain medicine
- Any injury to the incision or any bleeding in the mouth
- Trouble drinking or eating
- A dry diaper for 8 hours or more
- Taken too much medicine or the wrong medicine. First call the **Central Ohio Poison Center at (800) 222-1222, ITTY (866) 688-0088**. They will tell you what to do.

The Cleft Lip and Palate Center helpline:

During regular business hours 8am to 5pm, Monday to Friday, call **(614)722-6299**.

After hours, on weekends, or holidays, call **(614)722-2000**. Ask to speak with the plastic surgeon on call.

Follow-up Appointments

For follow-up appointments at the Cleft Lip and Palate Center, call **(614) 722-6537**.

- 2 weeks _____
- 3 weeks _____

Feeding Guidelines after Palate Surgery

All foods should be pureed or mashed and have the consistency of pudding

Food Groups	Foods Allowed (pureed or fork-mashed)	Foods to Avoid
Meats and Other Protein	Meats Lentils or beans Cottage cheese Soft cheeses Yogurt Eggs, very well scrambled Hummus	Hard cheeses of any kind Bacon
Breads	Soft bread, softened in milk or water	Hard or crunchy breads Breads with nuts or seeds
Cereals	Cream of wheat Farina Oatmeal Grits	Hard or crunchy cereals "Cold" cereals Nuts or seeds
Fruits	Canned or well-cooked fruit Fresh bananas Apple sauce Stage 1 or 2 baby fruits	Hard or crunchy fruit Fruits with seeds and skin (berries, kiwis, grapes)
Vegetables	Canned or well cooked vegetables Stage 1 or 2 baby vegetables	Hard or crunchy vegetables Vegetables with seeds or pulp (tomatoes, green beans, etc.)
Potatoes and Starches	Potatoes with no lumps or skins Well-cooked noodles (pasta, mac & cheese)	Hard or crunchy toppings on potatoes or noodles Sauce with chunks Rice, whole grains such as barley, quinoa, kasha
Desserts	Pudding Jell-O® Ice cream or frozen yogurt Milk shakes	Any of the listed desserts with pieces of fruit, nuts, seeds or hard toppings Popsicle sticks
Beverages	Formula or Milk Water Juice	Pulp Chunks Lumps
Utensils	Sippy cups with short, soft spouts Bottles with a soft nipple Spoons may only be put at the lips	Straws Sippy cups with long, hard, spouts Spoon or fork put in the mouth