

FOR TETHERED ORAL TISSUES (TOTs) ADULT FRENOTOMY/FRENECTOMY AFTERCARE

Scott A. Siegel, M.D., D.D.S., FACS, FICS, FAAP
www.drscottsiegel.com

Introduction: As with any cut, your body wants to heal the released tissue back together and make it as it was before the procedure. Even though the frenotomy released abnormal attachments that were causing problems, your body doesn't realize this yet and it wants to put everything back together exactly as it was. This is NOT what we want. We want the frenotomy sites to heal in a new way to allow for increased mobility and function. A multidisciplinary team of tongue-tie experts from around the world has developed a protocol for post frenotomy therapy to assist this. This has been developed through the clinical experience of many providers and has demonstrated improved outcomes. Important to wash hands thoroughly beforehand or use gloves.

IMPORTANT: the **wounds** will appear **yellow/gray/white** for the first two weeks. This is **NORMAL** and **not** a sign of infection!

1. FOR UPPER LIP TIE RELEASE-Bring the tips both pointer and index fingers together and slide them **under the upper lip** on either side of the central frenotomy site. (Lip can appear to be puffier but will resume to normal size shortly after).
-Lift lip up to nostrils to fully expose the entire wound.
-Hold the lip up for a total of 5 seconds. Do this once, **5 times daily for 2 weeks.**
2. Bring tips of index fingers **under the tongue** with the pads of your fingers firmly pressing towards the base of the tongue. Your fingers should now be directly on either side the frenotomy site. Now **stretch** tongue **upward and backwards** toward roof of mouth (palate) to open up the "**DIAMOND**" shaped frenotomy site. Hold this position for a solid **5 seconds**
5 times daily for 2 weeks.

Repeat these stretching exercises 5 times per day for the first two weeks unless otherwise specified. Begin stretches 5 hours after appointment.

The goal of this therapy is to keep the tissue healing in an open or separated manor, without the released tissue healing back together. Being diligent with the therapy will help reduce the risk of this happening. It is not necessary to take a long time to do them. It is best to get in and out quickly, but to be sure you are effectively separating the tissues when you stretch. Particularly in the first few days following the procedures, it is normal to see a bit of bleeding, especially if there has been some reattachment that releases with the therapy. If it is more than a little bleeding, please call your provider for guidance.

3. If you are using pharmaceutical or homeopathic medications for pain, you can time them so they will be at peak effect for the therapy sessions. For most patients, the first two to three days are most intense and then the discomfort subsides considerably. Continue the therapy for 2-3 weeks and the area becomes completely pink, like the rest of your mouth. Seek the guidance of your care providers for exactly how long you need this therapy.

4. Take note of what the incisions look like immediately after the procedure (taking a photo during the first session is a great way to do this) watch for any changes to the shape. The edges of the diamond should stay sharp. If they begin to look muddled or “tucked in”, or you see tissue protruding from the rest, there may be some reattachment starting. Be sure to pay extra attention to this area, using a slightly firmer pressure during the therapy session. You will likely be able to release it yourself with your fingers. (It may bleed a little, that’s ok) Addressing it early is key.

**** Any questions or concerns TEXT messages and pictures to Dr. Siegel at 516-217-8898**

*****TEXT Post- op pictures at 1 week and 2 week mark to Dr. Siegel’s cell phone-body of text should include name, date of procedure and photos.**

PAIN MANAGEMENT

Teenagers and Adults: Ibuprofen (Advil/Motrin) or naproxen sodium (Aleve) are typically best for pain relief. This includes homeopathic remedies like Arnica