

Cleft Lip Repair Surgery

Before the surgery

- Your child's surgeon will talk with you about the best surgical plan for the repair.
- Please don't give your child any ibuprofen products (such as Motrin®, Advil®) for 1 week before surgery.
- A surgery scheduler will call you a few days before surgery to let you know what time your child should stop eating and drinking, what time to arrive at the hospital pre-op area and the time of surgery. They will also schedule your post operative appointments for 1-2 weeks after surgery and 4-6 weeks after surgery.
- If your child is sick at all during the week before surgery, call the nurses in the Cleft Lip and Palate Program or your surgeon's office, to make sure the surgery doesn't need to be rescheduled. The nurses are available Monday through Friday for any concerns or questions you might have before the surgery.

After the surgery

- Your child will be watched closely in the Post Anesthesia Care Unit (PACU) for 1-2 hours after surgery. As soon as your child is awake, the PACU nurse will call you to join them.
- Your child will usually stay in the hospital for 1-2 nights. Parents/guardians are allowed to stay in the room with the child.
- Each room is a private room with its own bathroom. Parents/guardians should remember to bring their own clothes to sleep in as well as toiletries.
- You should make sure you have childcare for siblings while your child is in the hospital.

Feeding your child after cleft lip surgery

- Your child will have an IV (tube in a vein) to give them fluids and medicine while they are recovering in the hospital.
- Within 1-3 days, your child should go back to drinking the same amount of liquids as they were drinking before the surgery.
- Usually, shortly after the surgery you can go back to feeding your child using the same bottle and nipple you were using before the surgery.
- If your baby is not interested in the bottle, the staff can give you a syringe feeder or other special feeder to help.
- Types of special feeders are:
 - The Brecht feeder
 - Tender care feeder
 - Dr. Brown's Specialty Feeding System bottle
 - Special Needs Feeder Bottle

What position should I use while feeding my baby?

- Hold your baby in an upright position and feed slowly to stop them from choking.
- Burp often, holding the baby in a sitting position on your lap rather than over your shoulder.
- To keep your baby from getting dehydrated, your baby should be drinking about _____ ounces a day. This is _____ 8-ounce bottles.

Incision (cut) care

It is very important to protect the incision (cut) while it is healing. The incision site has stitches on the inside and outside of the lip. The outside of the lip might have a skin glue called Dermabond instead of visible stitches. It will take about six weeks for everything to heal fully. Don't let your child use a pacifier for 3 weeks after surgery.

☐ If your child has stitches that need to be taken out:

Equipment you will need:

- Qtips
- bottled water or ½ strength peroxide as instructed
- Ointment/Vaseline
- ☐ Organize the equipment within reach
- ☐ Use one hand to do the cleaning and the other hand to hold your child's head firmly.
- ☐ Clean your child's upper lip incision with clean bottled water (instead of saline) and a moistened Q-tip. Please use one or more Q-tip applicators dipped in water
- ☐ Clean your child's lip with ½ strength peroxide (if instructed by your surgeon)
- ☐ Gently Roll the Q-tip over the upper lip incision line to wipe away dried blood and the extra antibiotic ointment being careful not to rub the sutures. Clean the incision as often as needed to stop build-up of dried blood and/drainage from the nose.
- ☐ Put the bacitracin ointment on incision once in the morning and once at bedtime and after each time the upper lip is cleaned.
- ☐ After 3 days, stop using the bacitracin (antibiotic ointment) and put on Vaseline two times a day to keep the site moisturized.
- ☐ These types of stitches are taken out 4-7 days after surgery at the post-op appointment

☐ If your child has steri-strips

- ☐ Keep the steri-strips dry and whole on the lip. Do not apply ointment..
- ☐ If the steri-strips come off before 5 days you may put them back on if the site is dry and clean. If unsure about putting them back on, please call the cleft office.
- ☐ Steristrips can be trimmed if loose.

☐ If your child has Dermabond

- ☐ Dermabond has been put on your child's lip. Dermabond is liquid skin glue that holds the wound edges together. The film will usually stay on for 7-10 days, and then naturally peel off.
- ☐ **Don't wash the Dermabond or put any ointment on it or the Dermabond may peel off before the wound is healed. Pat the lip repair site with a moist wash cloth to clean off any drainage from the dermabond. Do not rub. Do not put on soap.**

Remember that you should NOT put anything inside your child's nose, including a bulb syringe.

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Author: Cleft Lip and Craniofacial | Approved by Patient Education Committee | Valid through 2023

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The nose conformers (retainer) may be cleaned in a similar fashion with a Q-tip. The Nostril retainer will stay in place for 2-3 months.

- ☐ If the retainer is causing skin irritation or there is more redness or skin breakdown at the tip of the nose or the base of the nose (where the lip joins to the nose) please call your surgeons office for further instructions.
- ☐ Do not put q-tips or bulb suction into the nostril conformer.
- ☐ You can place 1-2 drops of normal saline in each side of the conformer to keep the tube open and free of drainage.

Protecting your child's incisions while they are healing

When in bed, put your baby on their back or side. Don't place your baby on their tummy with their face down towards the mattress.

If your surgeon orders elbow restraints for your child after surgery

- These are Velcro restraints that fit over the arm and stop your child from bending their arms. The restraints should always be used to keep your child's hands from touching the surgical site or putting their hands in their mouth.
- The restraints will need to be worn for _____ weeks after the surgery.
- **Restraints should be taken off at least every four hours while your child is awake to exercise the joints and to check for skin irritation.**
- You can take off the restraints when you or an adult is holding your child or are watching them and can keep them from putting their hands or other things in their mouths.
 - Take only one splint off at a time so you can watch and keep your child from putting their hands in their mouth.
 - Check the skin under the restraints for reddened areas or skin irritation. If your child gets red areas, massage the spot gently. If you have any concerns, call your surgeon's office.
 - The restraints may be worn over a long-sleeve shirt to keep them from bothering the skin and make it harder for your child to take them off.
 - Restraints need to be worn all night and at nap time or any time there isn't direct supervision of your child by an adult.
 - Do not place your baby in the crib and prop the bottle to feed your baby at any time when using the elbow restraints because your baby may choke.

Medicines

- Your child will usually go home on acetaminophen (Tylenol®) as well as a narcotic pain medication such as oxycodone. Ask your surgeon if your child can take ibuprofen (Motrin®, Advil®).
- If antibiotics are ordered after surgery, please be sure to follow the directions carefully.
- If ear tubes are placed, use ear drops as ordered.

Call the ENT office at 720-777-8501 if your child has:

- An injury to the surgical site.
- A large amount of bleeding from the surgical site.

IN CARE OF KIDS

- Increased redness, swelling or drainage at the surgical site (lip or nose).
- Pain that is not controlled with the prescribed pain medicine.
- A temperature above 101.5 for more than 24 hours that is not relieved by Tylenol or Ibuprofen (if your doctor lets your child to take these medicines). Do not take the temperature in the mouth.
- Signs of dehydration:
 - Babies less than 3- 4 wet diapers in 24 hours
 - A lower alertness level
 - Your child is hard to wake up, can't make tears, or has a very dry mouth.
- Ear drainage that keeps up for more than 5 days

For Questions or Concerns:

The Cleft Nurse at Anschutz: 720-777-5364

Plastic Surgery Nurse at Anschutz 720-777-6409

Monday through Friday 8-4:30pm

The Cleft Nurse /office at Colorado Springs: 719-305-9558

Monday through Friday

ENT office after hours: 720-777-8501

Plastic surgery office after hours: 720-777-1234 and ask to speak with the plastic surgeon on call.

Follow-Up Appointment

Your child should be seen for a follow-up appointment 1-2 weeks after surgery. Then 4-6 weeks after surgery with your surgeon. These appointments will be set up by the surgical scheduler once the surgery date has been assigned. If you do not have a post-operative appointment, please call your surgeon's office.

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