

What you can expect on the day of Tongue- and Lip- Tie Laser Releases

Every family has a different story & unique goals.
—Dr. Joel

About the Consultation

After listening to your story and concerns, Dr. Joel conducts a comprehensive functional examination to analyze any physical limitations that may be hindering your successful breast feeding. Functional issues are key. Your list of symptoms and questions are reviewed.

Photographs are taken for documentation while we classify the potential restrictions. Tongue- and/or lip-ties are on a spectrum, and varying degrees of restrictions can present with several issues.

***Dr. Joel highly recommends working with an International Board Certified Lactation Consultant (IBCLC) and bodyworker for optimal success. A frenectomy is only one part of the puzzle, and it takes a team of specialists to properly take care of the mother and child dyad relationship.

Same day treatment may be performed, especially if you are working with an IBCLC and bodyworker.

About the Laser Frenectomy

A state-of-the-art Light Scalpel CO2 laser quickly releases the restrictive frenum in 10-20 seconds with minimal to no bleeding and no stitches.

We have found notable improvements with the CO2 laser including: quicker procedures, very precise, better healing, less scar tissue formation, and less fussy babies compared to other lasers.

No sedation or general anesthesia needed.

FAQs

When do I feed my baby?

You may feed before, after or both. Many babies find comfort in nursing right away, and others require some settling after the procedure and topical anesthetic wears off.

Are parents allowed back during the procedure?

We do not recommend parents stay in the room during the procedure. Parents are encouraged to wait in the lobby during the procedure due to laser use, and parental anxiety which can temporarily decrease milk let down.

May I stay and feed my baby after the procedure?

Absolutely, the suite is reserved for your family for the next hour.



During the Laser Frenectomy

Parents are encouraged to wait in the waiting room, and may leave their items in the suite as the procedure is performed.

Your baby may be swaddled, baby-safe topical anesthetic is applied to provide some comfort which lasts for about 20-30 minutes, and the laser releases are performed in seconds.

Parents come back, comfort their baby, and stretches are reviewed. Parents may place on gloves to practice the stretches.

After stretches, and all questions are answered, parents may stay in the room to feed the baby.

What to Bring

- Your favorite swaddle can provide comforting pressure during and after the procedure.
- Infant Tylenol may be given before or after the procedure. Dosing is on the *Home Care Instructions Form*.
- Nasal aspirator/Nose Sucker such as a *BoogieBulb* may be used if the infant becomes congested after the procedure. Some babies may cough if the gagging reflex is stimulated which subsides within 20 minutes.

After the Laser Frenectomy

Please see the *Home Care Instructions Form*. Stretches are indicated to minimize re-attachment and contractional healing. Check our website to watch an instructional video for providing stretches.

Most mothers and babies achieve some immediate improvement in the breast-feeding relationship, but it is normal for further improvement to take time.

When tight tissues are released, new muscle memory needs to develop to improve tongue mobility and nursing. Sometimes, the baby and mom may have a regression in feeding for a couple days as the child's brain and muscle memory are sorted out while using a newly untethered tongue.

It is critical to follow-up with your lactation team within a few days. Your lactation consultant will identify targeted functional exercises and may provide or refer for bodywork. Most babies benefit from chiropractic or craniosacral therapy to address other issues like neck tension, which affects nursing.

A post-release follow-up is scheduled the next week. Healing and stretches are reviewed. Sometimes, a deeper stretch is performed to improve proper healing. A report can be sent your lactation consultant and bodyworker.



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