



4. Bottle-feeding may be resumed after two weeks, unless the doctor tells you otherwise. Some parents find it easier not to reintroduce the bottle after surgery since most will discontinue its use at one year of age. Of course, this is your choice.
5. Your child may only feed from a cup and only have smooth liquids. He/she may not use a sippy cup or a straw. Under no circumstances is any object to be put into his/her mouth. Your child will begin taking fluids by starting with sugar water or juice and the progress to formula. Initially, clear liquids will be given including water, sugar water, 7UP and apple Juice. If he/she takes this well and does not become nauseated, you may resume his/her formula.
6. After day one, your child can have strained baby food as long as it will pour from a cup and it does not contain any lumps or food bits. This means food like cottage cheese, ice chips, scrambled eggs, and junior foods may not be given unless they are blended.
7. To prevent infection of the palate, your child will be given antibiotics for approximately ten days. Take the medicine as prescribed for all of the ten days.
8. It is very important to keep your child's mouth clean. You can accomplish this by following every feeding with water. This will decrease the bacterial growth in his/her mouth.
9. Expectations
 - Expect your baby to be fussy. Tears usually result from the frustration of dealing with:
 - ❖ Unfamiliar surroundings
 - ❖ The loss of their bottle and pacifier
 - ❖ Wearing the No No's
 - ❖ Mouth care
 - ❖ Unfamiliar soreness experienced with drinking or crying.
 - Remember to hold your baby and speak to him/her with a soothing voice. You can provide the best consolation for your baby.



- Soft cloth diapers to wipe his/her face
- Socks for his/her feet
- Absorbent bibs for drool
- And, any other items you think may help with your baby's hospital stay

11. When you arrive at the hospital, the following will occur:

- Your baby's clothes will be changed and he/she will be prepared for surgery.
- The anesthesiologist may order a preoperative sedative, which will be given at this time.
- When the operating room is ready, you will be taken to the holding area.
- Before you are taken into the operating room you will meet the O.R. nurses and speak with the anesthesiologist.
- You will be instructed to stay in the waiting room. Check in with the volunteer and do not leave without notifying them. The surgeon will look for you there when the surgery is completed.
- Usually your baby will go to the recovery room. The nurses will come for you when you can see your child.
- After spending one hour in recovery, your child will be transferred to his/her room.

POST-OP

1. Your child will return from recovery with an Intravenous Line (I.V.). The I.V. will remain in place for approximately one to three days, depending on how your child tolerates liquids. This line is used to administer antibiotics and fluids, and will be discontinued when your child is drinking without an elevated temperature.
2. Your child will return from surgery with blood colored saliva. Gradually the color will clear, but the amount of saliva will be more abundant than before surgery. This will normalize in the next month. If you notice reddened, chapped areas around his/her mouth, do not be alarmed. The reddened and chapped areas occurred from the appliance used to visualize the palate during surgery. These are temporary and will resolve within a few weeks.
3. Do not allow your child to drink from bottles, suck on pacifiers, or put anything in his/her mouth for two weeks. The arm restraints (no no's) your child will be wearing after surgery are to be left on for two weeks. They may only be removed for short periods of time (five minutes) while the child is being held or closely supervised to allow for arm exercises. Do not allow him/her to put anything into his/her mouth including fingers.



The following is a general list of answers to questions most frequently asked. These comments are not intended to cover every aspect of your postoperative care, since each patient may differ in the course of healing and is individualized for each patient. If you have any questions regarding your post-op care, please call our office during weekdays, 8:30 a.m. to 5:30 p.m. Urgent or emergency calls will be answered at any time by phoning (972) 566-6555 or (800) 344-4068.

Palatoplasty (Cleft Palate Repair)

PRE-OP

1. Your child will need to see the surgeon 2 - 2 1/2 weeks after the day of surgery. This is to ensure that the palate is healing properly and to answer any questions you may have. Please make an appointment at your pre-op visit.
2. Do not give your child aspirin, ibuprofen, or any aspirin containing products at least three weeks before and after surgery. Check the labels of any medications you are giving and refer to the aspirin list you were given by our office before administering medications. Aspirin is a blood thinner and may cause bleeding.
3. The anesthesiologist will call you the night before surgery.
4. Do not give your baby anything to eat or drink after midnight unless otherwise indicated.
5. Remove your baby's palatal appliance 24 hours prior to surgery.
6. Bathe your baby well. Do not use lotions or oils on his/her body.
7. On the morning of surgery, follow these instructions:
 - Wash your baby's face well. Do not use creams or lotions
 - Take normal medications as previously discussed with the surgeon.
 - Clean your baby's mouth. Try to remove any adhesive that may be in his/her mouth.
8. If you find it necessary to postpone surgery, please notify the office at least 48 hours prior to surgery; otherwise, there may be a fee for failure to notify.
9. If your child develops any symptoms of a cold, cough or infection. Call the office at once.
10. The expected hospital stay is usually two nights. Occasionally it may be necessary to extend the stay in the hospital for another day. The hospital will provide formula, diapers, and a limited supply of baby food for your child. You may want to bring the following items:
 - A favorite toy or security blanket
 - Bumper pads from his/her crib at home