



## Cleft Lip Repair Post-Operative Instructions

### Diet:

- Infants may resume breast milk, formula, and/or spoon-fed purees as taking previously.
- It is okay after lip repair to resume feeding via a bottle.
- If your child is older and has been taking small finger foods, it is okay to resume this diet, however all foods should be very soft and cut into small pieces. Examples of soft solids include: scrambled eggs, overcooked pasta, oatmeal, etc. Avoid hard candy or crunchy foods like cookies and dry cereal as well as breads, soft cheese, and peanut butter, as these may disrupt the repair.
- Nutrition and hydration are important aspects to healing. Frequent, smaller feedings may also be necessary. Make sure your child is still having wet diapers. Take your time, and be patient.

### Pain Control:

- Mild pain is expected with this procedure. By the time your child is ready to leave the hospital, his/her pain should be fairly well controlled.
- You should use liquid Tylenol or ibuprofen (Motrin) for pain relief as needed. Each medication may be given every 6 hours as needed, however the times may be staggered. For example, Tylenol may be given at 12:00 and 6:00, and ibuprofen at 3:00 in between.

### Activity & Restrictions:

- For infants, you should use the velcro elbow restraints called "No-Nos" supplied to you by our staff AT ALL TIMES to protect the lip from your child rubbing or pulling. You will need to use these for 1-3 weeks after surgery, as specifically directed by your surgeon.
- If your child uses a pacifier, he/she should avoid use for the next 3 weeks.

### Wound Care:

- Your child's lip repair will feature an outside layer of sutures that are *not* dissolvable. Your surgeon will let you know if a separate visit is needed for suture removal, or if the sutures will exfoliate away on their own.
- You should generally try to keep the site clean, and free of crusting. It is okay to clean around the nostrils gently with a washcloth to remove crusts or dried blood, however no specific cleaning is needed.
- Nothing should be applied to the lip until scar care is discussed at the first post-operative visit.
- If silicone nasal stents were used for your child's lip repair, please do not tug or pull on these since they are temporarily stitched in place. The nasal stent will be removed at the 3 week post-operative visit.
- You may clean around the base of the stents with a wash cloth, Q-tip or use saline spray if they seem to get clogged.

### Scar Care:

- After surgery, full scar maturation can take up to 12+ months. Over time, you will notice changes in the color and texture of the scar to be more like the surrounding tissue.
- Once healed, your surgeon will talk to you about scar optimization. This may feature techniques like scar massage, deliberate sun protection, and even topical products like moisturizer or silicone scar gel.

### Call Your Doctor:

- If you have any of the following signs and symptoms, please call your doctor:
  - Temperature greater than 101 degrees Fahrenheit
  - Redness, warmth, swelling, or rapidly changing shape of the surgical area.
  - Pus and/or drainage from the incision.
  - Severe pain not relieved by pain medications.
  - Severe persistent nausea and vomiting.
  - Dehydration or poor oral intake.

If you have any questions or concerns during regular business hours between 8:00 am and 5:00 pm, please call **443-997-9466** to reach the Plastic & Reconstructive Surgery Office or contact Kim Seifert, RN, cleft clinic nurse coordinator at [kseifert@jhmi.edu](mailto:kseifert@jhmi.edu). If you have questions or concerns after regular business hours, please call **410-955-5000** and ask for the Plastic Surgery resident on call to be paged. The resident can always get in touch with your surgeon.

For any life-threatening symptoms such as shortness of breath, difficulty breathing, dizziness or fainting, or mental status changes, call 9-1-1 or go to your nearest Emergency Department immediately.

