



## Pharyngeal Flap Post-Operative Instructions

### Diet:

- Once discharged from the hospital, please follow a soft pureed diet for the first 2 days after surgery. Then, you may advance to a soft solid diet through 4 weeks after surgery. Foods may be cooked, chopped, ground, mashed, or pureed. Examples may include: yogurt, pudding, Jell-O, ice cream, cooked vegetables, soft fruits, mashed potatoes, rice, pasta, soups, eggs, and very soft protein sources.
- Avoid foods that require more than minor chewing, including tough meats, hard candy, crunchy cereals and crackers, nuts and seeds, bread with thick crunchy crust, raw or dried fruits and vegetables. These hard and sharp foods can disrupt the oral sutures.
- Please avoid soft breads, soft cheeses, and peanut butter, as these may stick to the roof of the mouth.
- Nutrition and hydration are important aspects to healing. Frequent, smaller feedings may also be necessary. Make sure your child is staying hydrated, even if not eating solids (e.g., urinating frequently). Take your time, and be patient.

### Pain Control:

- Mild to moderate 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 and the swelling should be starting to decrease each day
- 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.
- If prescribed stronger pain medications, these should only be used for pain that is unresponsive to Tylenol/Motrin. Stronger pain medications can cause stomach upset, and should be taken with food to prevent nausea.

### Activity & Restrictions:

- You may start with quiet play activities, and gradually advance to normal activity, including school, as you are able to tolerate.
- **NO rough play or contact sports for 4 weeks.**
- **NO straws or sharp utensils for 2 weeks.**
- No swimming until cleared by your surgeon.
- Your child may snore after this surgery, which is normal and generally improves as the swelling decreases.
- Your child's speech may take up to a year to improve following surgery. Speech therapy can begin 4-6 weeks after surgery.

### Wound Care:

- All sutures in the mouth are dissolvable, and will fall out in 3-4 weeks. You may notice the ends or "tails" of the stitches visible in the mouth.
- There may be a small amount of bleeding from the mouth for the first 24-36 hours after surgery. Do not worry, as this is very normal after oral surgery.

### 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 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.