

Cleft Palate Repair (Palatoplasty) Post-Operative Instructions

What is Cleft Palate Repair (Palatoplasty)?

The repair of the cleft palate (also known as a palatoplasty) is usually done at 9 to 18 months of age. Although the child may look normal from the outside, the cleft palate can be seen by looking for a separation in the roof of the child's mouth. A cleft palate should be repaired for several reasons, namely to improve speech and to reestablish the barrier between the mouth and the nasal cavity. Rarely, more than one operation may be needed to close the cleft palate. The operation to repair the cleft palate involves making several incisions at the margins of the palate and sewing the separated portions of the palate back together in several layers; one layer making up the nasal lining, another middle layer containing the muscles of the palate, and still another layer that makes up the lining of the roof of the mouth.

What changes to appearance can I expect after the surgery?

After cleft palate surgery, there will be sutures (stitches) on the roof of your child's mouth. You will not be able to see these from the outside. The stitches are white in appearance. Your child may have some red drainage from his nose and mouth.

How will I take care of the wounds?

Care must be taken to avoid letting the child place hard objects or his hands in his mouth. Elbow restraints (no-no's) may be necessary to prevent the child from putting fingers or objects his mouth. An antibiotic may be prescribed for your child to take when you go home.

How will I manage my child's pain at home?

We expect that by the time your child is ready to go home from the hospital they will not have much discomfort. The doctor may suggest a mild pain relief medication if needed. Try Tylenol® alone first. Periods of irritability may be due to the arm restraints or hunger. Tender loving care is recommended. Cuddle and talk to your child often.

What will my child be able to eat?

Follow your doctor's instructions for the best type of feeding method for your child. Your child will need to be on a pureed, very soft diet. A no spout sippy cup is best. Spoons should go just past the lips. They should not be placed deep into the mouth. **No pacifiers or sippy cups should be used.** Sucking should be avoided. Take care to make sure that the child receives enough liquids. Your child's feedings may be smaller than the normal amount. Make sure your child is still having wet diapers. Hold your child in a semi-sitting position and feed them slowly. Small frequent feedings may be necessary for the first week. Follow each meal with water to help clean the inside of the mouth.

When will my child return for a follow-up appointment?

If you did not receive an appointment when your child is discharged, please call the office at the number listed below to schedule. We typically see children about one or two weeks after surgery. Bring any questions you may have with you to this appointment. If you are unable to keep the appointment, please be sure to call and reschedule.

When should I call the doctor? Call us if your child has any of the following signs or symptoms:

- Symptoms of infection are bright redness, pus-like drainage, or swelling.

- If your child has an oral temperature over 100.5°F check to make sure that he is getting enough liquids.
- Dehydration can cause the body temperature to rise. If you can't get them to take food or liquids, please give us a call.

What is the contact information?

If you have any question, problems or concerns call the Pediatric Plastic Surgery clinic from 8-5:00pm Monday thru Friday, (734) 763-8063. After 5:00pm or on the weekends if you have urgent issues call hospital paging at (734) 936-4000 and ask the operator to page the Plastic Surgery Resident “on call”.

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Author: Erin, Larowe
Reviewers: Carolyn, Walborn, RN, MS, CPNP

Patient Education by [Michigan Medicine](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 3.0 Unported License](#). Last Revised 08/2018