



MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

Cleft Lip Repair

Post-Operative Instructions

What is Cleft Lip Repair?

The cleft of the lip can affect the right or left side (unilateral) or both sides (bilateral). In the cleft lip operation, incisions are made and the separate portions of the lip are brought together to form a single full lip. The repair of the child's lip generally takes place at age 3-5 months, although optimum timing of repairs may differ from child to child. There are several methods of repairing a cleft lip (also called a cheiloplasty), and the surgeon will choose the type of repair that is appropriate depending on the type of cleft lip your baby has. As your child grows older, they may require an additional operation called a lip revision in order to correct any distortions that may occur in the lip over time.

What changes to appearance can I expect after the surgery?

After cleft lip surgery there will be sutures (stitches) in your child's lip. The amount of stitches in the incision line will depend on the extent of the initial deformity and the technique used by the surgeon for closure. The area will be pink around the stitches and slightly swollen. To protect the lip from the child rubbing or pulling on the area, the surgeon may order restraints (no-no's) for the child's arms.

How will I take care of the wounds?

The suture line should be cleaned frequently to prevent crust formation and infection. The steri-strips over the incision should be left in place. You may use a cotton-tipped applicator and half strength hydrogen peroxide and water to gently clean around the nostrils and steri-strips. Crusts and scabbing should gently be removed to ensure adequate healing. Be sure to keep the arm restraints on, especially if your child wants to rub the area. If the steri-strips

Pediatric Plastic Surgery
(734) 763-8063

come off, **gently** cleanse the area. Petroleum jelly (Vaseline) may be applied to the site to prevent hard scabs and keep it well hydrated.

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

By the time your child is ready to go home from the hospital they should not have much discomfort. The doctor may suggest 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. Offer frequent small feedings if necessary.

What will my child be able to eat?

Follow your physician's recommendation for the best type of feeding method for your child. The Mead Johnson Nurser with a large cross cut opening (such that there is a steady flow of liquid through the opening when the bottle is held upside down) should be acceptable. A syringe with a small tube attached can be used to feed your child also. Sucking should be avoided, extra squeezing of the bottle is necessary at this time. **No pacifiers should be used.** Take care to make sure that the child receives enough liquids. Your child's feedings may be smaller than the normal amount. Make sure they are still having wet diapers. Hold your child in a semi-sitting position and feed him slowly. Small frequent feedings may be necessary for the first week.

It is important that the child receives enough nourishment. If they won't eat, try the TLC approach. If you still can't get him to take food or liquids, please give us a call.

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. 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:

- Signs of infection including bright redness or pus-like drainage
- Any sutures coming out or the incision appears to be spreading apart
- Oral temperature over 100.5°F
- Signs of dehydration including a rise in body temperature. Check to make sure the child is getting enough liquids.
- Signs of illness or a cold? Is anyone else in the home ill?

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 8/2018