

Maternity

Information for parents after a tongue tie division

This information will provide you with advice on the care of your baby following a frenulotomy. A frenulotomy is a procedure that separates a baby's tongue tie.

What happens after a frenulotomy?

The normal healing process may result in a white diamond shape under your baby's tongue. This heals by itself and may be pink in colour to begin with. It may be yellow if your baby is jaundiced. It gradually shrinks and will usually disappear 2 to 3 weeks after the procedure.

We advise you to take extra care when sterilising your baby's feeding equipment. It is important to do this to reduce the chance of infection. All formula feeds should be made up by following closely the instructions on the packaging.

If your baby vomits after the procedure, you may notice some pink in the vomit. You may also notice a small streak of blackness in your baby's poo later on. This is due to a small amount of blood that has been swallowed by your baby after the tongue tie release.



Patient Information

What should I do once I get home?

You should care for your baby as normal. For the first 48 hours, feed your baby at the first signs of your baby wanting a feed. Babies react differently after the procedure.

After the first feed, many babies sleep for a long time as they are tired after the procedure. Your baby may be unsettled and fussy with feeding for a couple of days.

If your baby is crying, it is possible that you may have caught the wound area under the baby's tongue with a teat or nipple. This could make the wound start to ooze some blood.

What if there is bleeding from the wound?

Step 1: Offer the baby the breast or bottle and feed. This will usually stop the bleeding within a few minutes, just as it did after the procedure. If the baby refuses to feed, then sucking on a dummy or your clean finger will have a similar effect.

Step 2: If the bleeding is very heavy, or it does not reduce with feeding and stop within 15 minutes, apply pressure to the wound under the tongue for 10 minutes using one finger and a clean piece of gauze or muslin. Do not apply pressure under your baby's chin as this can affect their breathing.

Step 3: If bleeding continues after this time and you are concerned, continue to apply pressure to the wound and call 999 as your baby should be checked in hospital.

What if my baby is unsettled?

Evidence suggests that babies do not feel much pain or soreness after the procedure. If your baby does cry more than normal, this will usually settle within 24 hours. Continue to feed and cuddle your baby during this time.

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Pain relief

It is rare for a baby to require pain relief. However, pain relief options are available.

Babies under 8 weeks of age:

Paracetamol can be prescribed by a GP.

Babies over 8 weeks of age:

Paracetamol can be given without a prescription as guided on the packaging.

Calming an unsettled baby

- Cuddles, skin to skin
- Frequent feeds will be comforting. It helps your baby get practice at moving their tongue and breast milk assists with healing.
- Singing and rocking
- Sling use
- Co-bathing
- Baby massage
- Sucking on your clean finger to calm before latching.

What if my baby is reluctant to feed or if there are changes in the way they feed?

Some babies may feed differently after the procedure. Feeding may be slightly disrupted for a few days. This is because your baby's tongue can move more freely.

If you are breastfeeding, try giving your expressed breast milk to your baby to calm them. You can then try to breastfeed your baby again.

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How can I help to prevent the tongue tie reforming?

The chance of tongue tie reforming is low. Feed your baby responsively or every 3 hours. This helps reduce the chance of the tongue tie reforming and also gives your baby feeding practice.

Do not use dummies and do not use bottles (unless bottle feeding) for 48 hours after the procedure.

Currently there is no evidence that a wound massage, or stretching the wound, is effective.

If your baby's feeding improves but then becomes difficult again, please contact the frenulotomy service at tonguetieassessmentclinic@uhcw.nhs.uk

Please put in the email your baby's name, date of birth, your contact number, and a brief description of the problem.

When should I be concerned?

Please make an urgent appointment with your GP or speak to an out of hours service on 111 if:

- your baby's wound looks swollen, red, and inflamed
- your baby develops a high temperature
- your baby does not want to feed
- your baby is sleepy or irritable

It may be that your baby requires antibiotics, although this is unlikely. If you have any questions about wound healing, please contact the UHCW infant feeding specialists.

Breastfeeding support

It is essential that you work with your local breastfeeding support team to help your baby properly latch. This may take a few weeks as your baby continues to learn to feed.

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You may notice that your baby's feeding technique improves immediately. However, it may take time for your baby to adjust to the more mobile tongue. Remember, you have been managing with a tongue tie, so your baby will need to relearn. If your nipples were sore before the procedure, it may take time for them to heal.

Bodywork

This is provided by a trained professional and can support the effect of the tongue tie release. It can help with jaw or neck tightness and related issues. This includes the treatment of osteopathy, cranio-sacral therapy, or chiropractic.

Further information

NHS Choices: www.nhs.uk/conditions/tongue-tie/

UNICEF The Baby Friendly Initiative:
www.unicef.org.uk/babyfriendly/baby-friendly-resources/support-for-parents/tongue-tie/

Association of Tongue-tie Practitioners: www.tongue-tie.org.uk

The Breastfeeding Network: www.breastfeedingnetwork.org.uk

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