



# Family Education Sheet



## Home Care Instructions after Closure of Oro-nasal Fistula/Alveolar Cleft

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This sheet gives you information about caring for your child after closure of the opening in the gum or palate.

### ***Nutrition***

- Your child should not bite into anything for 6 weeks.
- Your child may not use a straw for 6 weeks.
- Use spoons carefully, putting all food gently into the side of the mouth.
- All meals should be followed by a water rinse to clean the suture line (stitches) and palate.
- Give your child liquids every 1 to 2 hours to keep the mouth and palate moist. The more your child drinks, the better he or she will feel.

### ***Day of Surgery until 4<sup>th</sup> Day after Surgery***

- Give your child clear liquids for the first 5 days after the operation. Examples of clear liquids are: water, apple juice, grape juice, Jell-O<sup>®</sup>, Italian ice, popsicles (off the stick), cranberry juice, clear broth, bouillon, gingerale, cola, lemonade and tea without cream or milk.
- Avoid drinks that are too hot or too cold. Give drinks only a little bit warmer or a little bit colder than room temperature. Very hot or cold drinks may cause discomfort. Do not use ice cubes.

### ***Days 5 to 10***

- Give your full liquids or blenderized foods from the 6th to the 10th day after the operation. If you do not have a blender, mash the food very well by hand. Blenderized or mashed foods must be of a soft enough consistency so that the food can be fed with a spoon. Most foods can be included in this diet as long as they are blenderized or mashed.
- Liquids such as milk, juice and gravy may be used to make foods softer.
- Some examples of full liquids and blenderized foods are: milkshakes, yogurt scrambled eggs, finely chopped meats, fish or poultry, pureed fruits, pureed vegetables, strained oatmeal, farina, cream of wheat, mashed potatoes (thinned with milk, gravy, or margarine), pureed or strained soups, melted sherbet and ice cream, thinned pudding, and custard.
- Your child should eat six small meals each day.
- If your child is not eating well, you may want to give your child a multi-vitamin once a day (in liquid form), or a can/packet of nutritional supplement (such as Carnation Instant Breakfast<sup>®</sup>).

### **Days 11 to 6 weeks**

- Give your child soft, cut-up foods from the 11th day to 6 weeks after the operation.
- Examples are cooked cereals, softened ready-to-eat cereals, French toast, crackers softened with milk or water, bread, dinner rolls, waffles, pancakes, muffins, cookies softened with milk or water, cakes, doughnuts, pies, canned fruits, bananas, tender meats, fish, eggs, cheese, tuna, mashed potatoes, rice, macaroni, spaghetti, soups, jams, jellies, honey, cooked vegetables, smooth peanut butter, and plain yogurt.
- Do not give any hard foods such as: chips, pretzels, bread sticks, hard candy, bagels, nuts, seeds, fresh fruits and dried fruits. They may damage the suture line.
- Your child should not bite into anything for 6 weeks after the operation.

### **Hygiene**

- If your child has a special gum/palate pack, your physician will give you information on the care of this pack.
- Your child's doctor or nurse practitioner will give you a prescription for Peridex<sup>®</sup> oral solution. Your child should rinse his or her mouth twice a day with 1 tablespoon of Peridex<sup>®</sup> for 10 days. Have your child rinse with Peridex<sup>®</sup> once when he or she wakes up and then once before going to bed. Avoid eating and drinking 1 hour after rinsing. This solution may temporarily stain teeth. If necessary, the staining can be removed when your child sees his or her dentist for a routine cleaning.
- Your child should rinse his or her mouth after meals for 10 days. He or she can rinse with 1/4-strength hydrogen peroxide, water, salt water (1/2 teaspoon of salt in a glass of water), or mouthwash diluted with water. If you use hydrogen peroxide, the 1/4-strength solution should be made every 24 hours.
- Once approved by your child's doctor, begin brushing your child's back teeth daily for 6 weeks. Be careful to avoid the operative site. Use a soft toothbrush or foam swabs. You can purchase foam swabs at a pharmacy.
- The sutures in the mouth will dissolve in about 12 days. They do not need to be removed.
- Your child may shower by the time of discharge. He or she may not take a bath until the 7th day after the operation.
- After showering, dry the donor site on the hip by patting with a soft towel. The plastic tape dressing can be removed in a week or if wet. If the steri-strips are loose or falling off, replace the Steri-strips<sup>®</sup>. After one month, you can leave the Steri-strips<sup>®</sup> off.

### **Activity**

- Once at home, your child does not need to stay in bed. He or she may walk or play quietly.
- Avoid touching the site in the mouth or the donor site on the hip for at least 6 weeks.
- Your child should avoid rough play for 6 weeks. This includes gym and contact sports.
- He or she should not lift anything heavier than 10 pounds for 6 weeks.

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- Your child's doctor or nurse will tell you when he or she can return to school or day care.
- Your child's doctor will tell you when it is best for your child to return to gym and sports.
- Your child should not blow his or her nose for 6 weeks.
- Have your child sneeze with an open mouth for 6 weeks.

### **Pain**

- Your child may have some mild discomfort at home.
- If your child is not drinking well, he or she may be in pain.
- You can give your child acetaminophen (also known as Tylenol® or FEVERALL®). Acetaminophen comes as a tablet, caplet, and liquid. It is used to relieve mild to moderate pain and to reduce fever. It is very important to take acetaminophen exactly as directed by your doctor. Follow the directions on the package and ask your doctor or pharmacist to explain any part you do not understand. Do not take more or less of it than prescribed by your doctor. Do not take it any more often than prescribed by your doctor.
- If the pain does not go away with acetaminophen, give the pain medicine that was prescribed and instructed by your child's doctor or nurse practitioner.
- To help your child sleep better, try to give a dose of pain medicine around bedtime, especially for the first few days at home.

### **Constipation**

- Keep track of your child's bowel habits. If he or she does not return to usual bowel habits, he or she may be constipated.
- Call your child's doctor or nurse if your child seems constipated.

### **Follow-up**

- You will need to return for a follow-up visit in one week.
- Call the doctor's office to arrange this.

### **When to Call Your Child's Doctor or Nurse**

Call if your child:

- has a fever greater than 100.5° F taken under the arm;
- has any bleeding or drainage from the mouth;
- has bad breath;
- has pain that doesn't go away after giving pain medicine;
- is not drinking liquids, or is vomiting; or
- is irritable and cannot be comforted.

Call with any questions or concerns.

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A **Spanish** version of this is available from your provider  
Send comments or questions to: **Familied**@childrens.harvard.edu

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