Post_operative care instructions for parents of children with cleft palate surgery

- *The child should rest in a semi-lateral or semi-prone position so that any secretions or saliva or blood can drain out of the mouth and not block the airway.
- *Keep the bed rails raised to prevent the child from falling.
- *Use a cool mist humidifier (use saline nasal drops if the child has nasal congestion)
- *For controlling pain, use the painkillers prescribed by the doctor at the recommended dosage.
- *To prevent Pneumonia (lung infection) perform respiratory physiotherapy. Secretions should be drained properly. You may gently tap the child's back and the area between shoulder blades using a cupped hand.
- *Hand splints(restraints) should be applied to both arms so that even during sleep the child can not put their hands into their mouth. Every hour, remove the restraints briefly, message the hands and then reapply them.
- *Until the child is fully awake (approximately 2_3 hours after returning from the operating room), no oral intake is allowed. Please consult the nurse regarding the appropriate time to start feeding.
- *Due to pain, the child may refuse to eat, which can lead to dehydration and fever. This type of fever is not a sign of infection.
- *Sucking with lips is prohibited for one month. During this time, feeding with a cup, silicone spoon or soft squeezable bottle is recommended. Feeding should be done in a semi-upright position. After one month, feeding with a regular bottle may be resumed.
- *Start feeding with water and sugar water then gradually progress to milk, porridge, jelly, yogurt, soup and soft foods. Drink boiled and cooled water after eating the food. For up to one month, avoid solid or hard foods such as bread, biscuits and chips. Avoid kiwi and acidic fruit juices such as orange juice.
- *The sutures are absorbable and will be absorbed after about 20 days.
- *Never insert your finger into the child's mouth in order to clean the surgical site inside the mouth. Also, do not wash there with a syringe.
- *Foul-smelling, purulent discharge and fever above 38.5 c indicate infection. White appearance at the surgical site alone and without the mentioned signs is just mild milk residue and it is not a sign of infection.
- *Use prescribed antibiotics exactly as ordered by the doctor.
- *It is normal for milk or other fluids to come out of the nose for several months after surgery and this condition will be gradually resolved.
- *One month after surgery, return for follow-up with the child's treating doctor.

Patient Educational Unit