



Infant Frenectomy Consent

Lip Tie: A tight upper lip frenum attachment may compromise lip flanging and may appear as a tight, tense upper lip during nursing or bottle feeding. This can result in a shallow latch during breastfeeding resulting in nipple pain for the mother and excessive air intake for the child. Additionally, the tight upper lip may trap milk, resulting in constant contact of the milk to the front teeth. This can result in decalcification and dental decay can develop when the milk is not cleaned off of these areas. This same issue can occur with bottle-feeding. If the frenum attaches close to the ridge or into the palate a future diastema (gap between the teeth) can also occur. A tight frenum is a risk for development of gum disease in the future. Sometimes a child's smile is impacted by a tight lip frenum.

Tongue Tie: A tight lower tongue frenum attachment may restrict the mobility of the tongue and may or may not appear as a cupping or heart shaped tongue when the tongue is elevated. This can result in an inability to get the tongue under the nipple to create a suction to draw out milk. Long term, a tongue tie can result in speech problems, airway and palatal development issues and/or dental issues.

SYMPTOMS: Some babies can have ties and not be symptomatic. To know if the ties are a problem we ask two major questions: "Is the baby getting enough to eat?" and "Is nursing comfortable for the mother?" Symptoms can be as follows:

- Poor latch(breast or bottle)
- Slides off nipple or falls asleep while attempting to latch
- Colic symptoms
- Reflux symptoms
- Poor weight gain
- Extended/continuous feedings
- Gumming or chewing of the nipple
- Unable to take a pacifier or bottle
- Thin smile/curled lip
- Creased, cracked, bruised or blistered nipples
- Bleeding nipples
- Incomplete breast drainage
- Infected nipples or breasts
- Plugged ducts
- Mastitis (inflammation of the breast)
- Nipple thrush
- Decay on baby teeth



PROCEDURE: The procedure itself takes a few minutes for each frenum. A laser that cuts and seals the tissues resulting in very little or no bleeding.

Potential Risks:

- Damage to sublingual gland, which sits below the tongue. This may require further surgery.
- Injury to the teeth, lip, gums, or tongue.
- Burns from the equipment.
- The frenum can heal back and require further surgery.
- Swelling and inflammation, especially of the upper lip.
- Scarring is rare but possible.
- Eye damage if baby or parent looks directly into the laser beam.

Complete eye protection is available and required for all.

PARENT CONSENT

I acknowledge that the doctor has explained my child's condition and the proposed procedure. I understand the risks of the procedure, including the risks that are specific to my child and the likely outcomes. I was able to ask questions and raise concerns with the doctor about my child's condition, the procedure and its risks, and treatment options. My questions and concerns have been discussed and answered to my satisfaction. I understand that photographs or video footage may be taken during my child's procedure and these may be used for teaching health professionals. (Your child will not be identified in any photo or video). I understand that **no guarantee** has been made that the procedure will improve the condition and that the procedure may make my child's condition worse. I understand and **agree to stretch and massage the areas**, retraining the proper latch, and referring to a lactation consultant, chiropractor, or Cranial Sacral Therapist to help with post-op sores. I understand **that other factors** affecting milk supply could be interfering, including but not limited to: medicines, stress, smoking, pituitary dysfunction, pain, irregular feeding routines, impaired let down.



On the basis of the above statements, I (name of parent/legal guardian)

_____ request that my child (name)

_____ undergo the procedure(s) described above.

Signature of Parent/Guardian: _____

Date: _____

Witness: _____

Date: _____

Doctor: _____

Dr Eleni Katsaromitsos BDent (USyd) · BBiomed · Mast Sci Management

Date: _____