

Discharge Information: post Division of Tongue/Lip Tie





Dear Patient/Carer:

Please read this document carefully as it contains important information that complements the instructions given by your MEG ENT Specialist during your recent surgical admission.

Medications:

Pain Management:

- You should receive analgaesics and instructions (e.g. Paracetamol, oxycodone) prior to your discharge from hospital.
- Use as directed.
- Most patients experience some discomfort once the anaesthetic wears off.

Antibiotics:

- Oral Antibiotics may be prescribed and dispensed to you prior to your discharge from
- If prescribed, it is usually to prevent infection in the first 5-10 days after surgery
- You will be advised by your MEG ENT Specialist.

Resumption of "Blood Thinning" Medications:

- **Prescribed Blood Thinning Agents**
 - o e.g. Aspirin, Warfarin®, Clopidogrel (Plavix®), Rivaroxaban (Xarelto®)
 - o Your **MEG ENT Specialist**, in discussion with your **GP/Physician** will instruct you on when to recommence these medications.
- Over the counter blood thinning agents
 - o e.g. Krill Oil, Fish Oil, Ginseng, Gingko, Garlic, etc.
 - You can restart these medications 2 weeks after your surgery.

Regular Medications:

- If you have been instructed to withhold certain medications, prior to surgery, your **MEG** ENT Specialist will give you specific instructions for when to restart.
- Oftentimes you will be able to continue these medications peri-operatively.

Wound Care:

- No specific attention to the wound will be required.
- If any sutures have been placed, they will almost always be dissolvable, and will disappear over 1-2 weeks after surgery, without formal removal.
- Your MEG ENT Specialist may suggest a simple oral anti-septic mouthwash such as a Saline mouthwash, or Peter Mac Mouthwash® to promote oral hygiene for the first 1-2 weeks after surgery.



Information for patients, families and carers



Try to avoid any alcohol-based or iodine-based mouthwashes in the first 1-2 weeks, as these
will likely irritate and cause discomfort.

Bleeding:

- It is uncommon to have bleeding from the wound site after discharge from hospital.
- If you encounter any bleeding, swelling or redness, you should contact your doctor or the hospital emergency department.

Diet:

- Generally there are no post-operative dietary restrictions, Try also to avoid any significantly acidic, spicy, or salty foods in the first 1-2 weeks, as these will likely also irritate and cause discomfort
- Your MEG ENT specialist may suggest certain dietary modifications.

Return to Normal Activities:

- You will usually require only a few days away from work/study for full recovery.
- First 48 hours:
 - Avoid hot showers and saunas for 2 days
- Week I post op:
 - Refrain from vigorous activity for I week to reduce the small chance of bleeding.

Attend your nearest Emergency Department or Local GP Clinic if:

- You experience bleeding or sudden increase in bruising or pressure.
- You have increasing pain, and/or discharge.
- You have a fever or feel increasingly unwell.

On your Postoperative Appointment:

Your MEG ENT Specialist will review your wound area, at 2-3 weeks after surgery.

We will confirm the time and date of your post-operative appointment soon. Do not hesitate to contact us if you require any further information regarding these instructions.



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