



General information Tongue Tie Clinic Groningen:

- The address of the Tongue Tie Clinic (Tongriem Kliniek) is Heresingel 12a, 9711 ES Groningen.
- Tongue Tie Clinic shares the same location as Buijts Tandartsen.
- In the centre of Groningen, there is paid parking from Monday to Wednesday from 09:00 to 22:00 and from Thursday to Saturday 09.00-24.00 hours.
- Parking time is limited up to 1 hour, but refilling the meter is possible. When you stand with your back to the entrance of the dentist's office, you find the car park located to the left.

For children, the following applies:

- If a child is sick or has fever the appointment can't take place. Vaccinations around the same date as the appointment are not recommended.
- The clinic is located in a historic building, where there is no room for buggies or strollers.
- The appointment will take approximately about half an hour. First your child will be examined by the practitioner. If treatment is advised, an explanation follows and there is time for questions. The treatment itself will be very short. Afterwards, there is approximately 10 minutes to calm your child in the same room with help and advice from a Lactation Consultant IBCLC.
- Please bring some food the child likes or water, expressed breast milk or formula in a bottle (in case the child does not drink from the breast straight after the treatment or is bottle fed).
- Short nails are recommended to practice and feel the mouth while practicing aftercare.
- If required, children may be given painkillers orally or a suppository in advance for pain relief. Paracetamol is preferred. Consult a doctor or pharmacy for the correct dose.
- After treatment, questions and answers can be found on the FAQ or <https://www.tonguetieclinic.com/frequently-asked-questions/> or you can contact the Lactation Consultant IBCLC who was present at the treatment (an aftercare information card will be given to you). The wound will always be checked before you leave the office.
- For other questions or problems with wound healing, you can send a photo to info@tongriem.com, or send a message or photo via messenger or whatsapp to the Lactation Consultant IBCLC who was present at the treatment.
- To take a photo for private use is permitted but filming of the treatment is not allowed.
- The invoice for the consultation or treatment will be sent straight to the Dutch insurance company (for children treated up to 18 years old). If you have a non-Dutch health insurance, you can pay with card or cash after the treatment. The practitioner will give an official copy of the invoice and a letter of explanation to your health care provider.





Aftercare form for young children 1-6 years after removal of a tongue tie and/or upper lip tie.

Pain and discomfort after treatment

- Young children can feel uncomfortable for between 24 to 48 hours or up until a few days after treatment.
- You can give pain something for relief such as Paracetamol orally or as a suppository. Ask your doctor or pharmacist for the correct dose.

Feeding:

- You can offer the breast, a bottle of formula or water directly after the treatment.
- Start with offering liquids and give solids later on. If solids cause pain in the early stage after the treatment, then keep offering liquids for a bit longer.
- Preferably offer cold or warm foods, not foods that are very hot or spicy; this way, you can prevent irritation of the wound.

Healing:

- Healing will go quickly and can take a few days up a few weeks. The wound will look “diamond-shaped” and like a hole at first. This wound will change after a few days and will then have a white/yellow colour. The wound can appear infected (see photo’s), but this is the normal healing process.
- The wound can bleed a little and there can be a little bit of blood mixing with saliva. The wound can bleed slightly when touched. This will do no harm. If necessary, give some pressure on the wound for a few minutes with a swab or clean cloth.
- Haemorrhage or prolonged bleeding occurs rarely. If this does happen, always contact the Tongue Tie Clinic. If necessary, the wound will be stitched. In the Tongue Tie Clinic this only happened in 0,0001% of the cases. Before any treatment takes place, it is vital to inform the provider of any family issues such as bleeding disorders or clotting problems.

Aftercare and Tongue exercises young child:

- Wash your hands and make sure you have short nails before doing the aftercare.
- Carry out the exercises preferably when you and your child are calm. It doesn’t matter if that’s before or after a feed or meal.
- Remain relaxed when carrying out the exercises, so that your child will stay relaxed too.
- Sing a song or play a favourite piece of music or watch a movie.
- The aftercare exercises should last around a minute.
- Do not expect immediate results; sometimes it can take a few weeks or even longer before there is a noticeable improvement, especially when the treatment was done on an older child.



Aftercare

After its release, the tongue has more possibilities to move around in your child's mouth, but this does not always happen automatically. In its resting position, the tongue may still lie low in the oral cavity. The upper lip may also not flange out yet. The quick wound healing in the mouth can result in the ties growing back. If this occurs, the treatment can be done again, but of course it is better to prevent this by regularly doing the exercises.

- Aftercare should be carried out for at least three to four weeks every six hours.
- Do the exercises at least 4 times a day, maybe also at night, if your child is awake and relaxed.
- Begin with the exercises (depending on the hour of treatment) 6 hours later around the first next feeding.
- Your child will probably find it more comfortable if you use cold fingers with some coconut oil on it during the exercises.
- Horizontal movements:
If the lip tie is treated: massage the wound on the upper jaw 5 or 6 times with the top of your index finger from left towards right or vice versa for two weeks. Third week phase out the frequency.
If the tongue tie is treated: Repeat the procedure for the wound under the tongue. Fourth week phase out the frequency.
- Vertical movements:
This usually works best when you stand behind your child, so that you can pull up the tongue and lip with your two index fingers.
If the lip tie is treated: stretch the upper lip towards the nose like a "duck face" for two weeks. Third week phase out the frequency.
If the tongue tie is treated:
 - Lift the tongue or lip three times with both index fingers in a V-shape form. It is important to separate the upper half of the diamond on the tongue from the bottom of the mouth so that an actual stretch occurs.
 - Make a rolling-pin with your index finger to roll the tongue up towards the palate starting at the front behind the gum. Like the letter 'J'. It's important the tongue base should move up.Fourth week phase out the frequency.

You can watch our exercise video on youtube: aftercare young children:

https://www.youtube.com/watch?v=t4Kh_dE0sT0

Exercises or games for the tongue

It is advisable to let the tongue perform different new movements at least once a day.

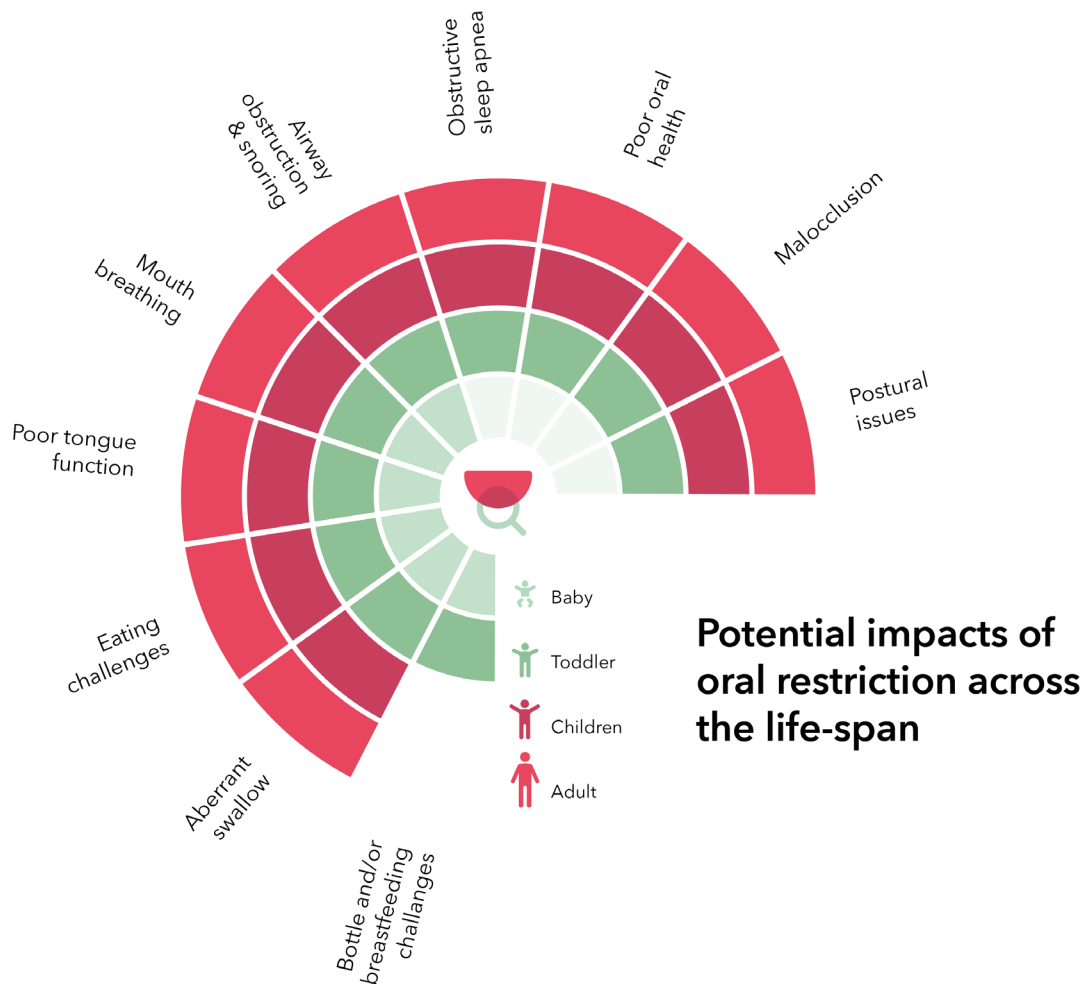
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Compensation mechanisms

As a consequence of a tight tongue tie, children may develop compensatory mechanisms in order to be able to drink and swallow correctly, such as muscles in the mouth, neck, throat and shoulder. Because of this compensatory behaviour, blockages can occur in these areas. If you notice no improvement after a while, your child may suffer from discomfort and tension in these areas. It's good to see a bodyworker as a physiotherapist, chiropractor, osteopath, etc for these tensions.

Oral ties can have a lifelong impact:





Exercises young child:

Clean the teeth as usual; it is important to keep the mouth clean.
You can ask your child to do the following:

- Stick out the tongue and to move it upwards and downwards.
- Stick out the tongue out then move it from left to right.
- Stick out the tongue 10 times.
- Move the tongue from left to right 10 times.
- Move the tip of the tongue from upper lip to lower lip 10 times.
- Lick an ice-cream, as it stimulates the tongue to move.
- Suck the tongue against the palate and hold it there for 10 seconds.
- Make a clicking sound with your tongue as often as possible.

Feeding:

- Try to put something sticky (jam, peanut butter, Nutella, etc.) on the upper lip or on the corners of the mouth to make the tongue to reach there and try to lick it off.
- Try to put something sticky (squashed fruits) on the palate so the tongue reaches to the palate and makes a lifting movement.
- Lick an ice-cream or lolly, as it stimulates the tongue to move.