

FRENOTOMY: ASSISTING PROCEDURE - NICU

PURPOSE:

To outline the nursing responsibility in assisting with a frenotomy to release tongue-tie in infants.

SUPPORTIVE DATA:

Infants with tongue-tie or ankyloglossia have a thickened, tightened, or shortened lingual frenulum. Three to ten percent of infants with poor latch, poor weight gain, maternal sore nipple, breast pain, and decreased milk supply are associated with ankyloglossia. To alleviate infant's breastfeeding difficulties, a safe medical procedure known as frenotomy may be indicated to release tongue-tie. Numerous research studies show minimal or no complications. However, excessive bleeding, infection at the frenotomy site, and sublingual hematoma or ulceration are rare complications associated with frenotomy.

When infants with ankyloglossia are identified, the registered nurse (RN) consults with the provider for evaluation. Upon determination by the provider that frenotomy is necessary, the bedside RN assists by gathering necessary equipment and supplies and by providing comfort for infants during the procedure. Proper documentation is necessary.

EQUIPMENT LIST:

- Suture removal kit containing Iris Scissors



(Iris Scissors)

- Gloves
- 2x2 gauze (2)
- Cotton swabs (2 packages)
- Sweet-Ease®
- Pacifier

CONTENT:

PROCEDURE STEPS

KEY POINTS

1. Gather all equipment and supplies.
2. Verify patient identity using two identifiers.
3. Verify consent obtained.
4. Perform hand hygiene.
5. Don non-sterile gloves.

PROCEDURE STEPS

KEY POINTS

6. Perform timeout.
7. Swaddle infant.
8. Administer Sweet-Ease® 2 minutes prior to procedure.
 - Allow infant to suck on pacifier immediately.
9. Assist provider by slightly extending infant's neck and stabilizing chin.
10. Assess for bleeding below the infant's tongue post frenotomy.
11. Encourage mother to breastfeed/ skin to skin immediately after frenotomy.
12. Document procedures, vital signs, and infant tolerance.

Swaddling immobilizes the infant. Place infant in a supine position.

24% sucrose, when placed in the mouth, induces endogenous opioids providing analgesia for minor procedures.

Using a pacifier in conjunction with sucrose water enhances the analgesic effect.

When minimal bleeding is observed, blot the site with gauze until bleeding stops.

Initial date approved: 02/16	Reviewed and approved by: Professional Practice Committee Nurse Executive Council Attending Staff Association Executive Committee	Revision Date: 09/21
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