Alveolar bone graft



Skull bone donor site (Bone graft to gum line)

What is an alveolar bone graft?

An alveolar bone graft is an operation for a child who was born with both a cleft lip and a cleft palate. The graft is done to place bone to the upper jaw bone (alveolus) in the area of the cleft. This will help let the permanent teeth to come through the alveolus (erupt). It also helps to close the hole between your child's mouth and nose.

How is it done?

A small amount of bone shavings are taken from your child's head. The shavings are placed in the area of the cleft near the teeth. This will help support teeth coming in near the cleft.

The surgery takes about 2 to 3 hours. There will be an incision on the head which will be closed with staples. There will be stitches in the gums where the bone has been placed. The stitches will go away on their own within a few weeks.

What happens after the surgery?

After surgery, your child:

- Will be in the hospital for 1-2 days. Your child will most likely be sore for at least 24 hours. Tylenol® can be given for the pain.
- Will have gauze-like material called nasal packing in the nose. A drain tube will be in the area of the head where the bone shavings were taken. The tube helps fluid drain from the area. This will help limit swelling. Both the nasal packing and the drain will be taken out the morning after surgery.
- Will have a head incision with staples but no bandage. The incision will need care and cleaning after surgery. Do the following 3 times a day after surgery:
 - Make a new mixture of $\frac{1}{2}$ hydrogen peroxide and $\frac{1}{2}$ water in a clean cup.
 - Use the mixture to gently clean the incision with a cotton swab.
 - Put a very thin layer of double antibiotic ointment on the incision.

The staples will be taken out in your surgeon's clinic 10 to 14 days after surgery.

- Should **brush only bottom teeth for the first 5 days**. After 5 days, your child can carefully brush all teeth with a soft toothbrush.
- Will need to use a mouth rinse after all meals, snacks, and before bed for 6 weeks. Use a mix of ½ hydrogen peroxide and ½ non prescription mouthwash for the first few weeks. After a few weeks, have your child switch to the mouthwash only.

Will be on oral antibiotics for 1 week.

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Diet:

- At first, your child will have an I.V. in the hospital. This will keep your child from getting dehydrated. It is also used to give medicines.
- Your child will be on a restricted, soft diet for 6 weeks.
- Do not let your child use a straw for at least 6 weeks after surgery.

Activity:

- Your child may take a short shower 2 to 3 days after the surgery.
- Your child must have limited activity for 6 weeks. This includes gym class, playground and sporting activities, and rough play.
- Your child will be able to resume speech therapy as long as the speech exercises do not involve puffing of the upper lip or cheeks.

Follow up:

Your child will need an appointment in the clinic 5 to 10 days after surgery.

ALERT: Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child:

- Has severe pain that does not go away.
- Has a lot of bleeding from the nose or mouth.
- Has vomiting that will not stop.
- Has a fever above 101° F (38.3° C).
- Is not drinking enough fluids.
- Has a foul mouth odor.
- Spits out small bone chips.
- Has bone chips you can see in the area where the surgery was done.
- Has special health care needs that were not covered by this information.

This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.