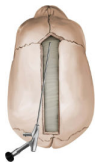
POST-OPERATIVE CARE

Cranial Vault Reshaping

Home care after skull reshaping — open vault remodeling or endoscopic surgery



Please note: These instructions are specific to patients of Northeast Facial and Oral Surgery Specialists, LLC. Every patient's post-operative care is unique. You may be given specific instructions by your surgeon that differ from what appears on this sheet. If so, follow your surgeon's instructions. This document should be used as a guide only and does not replace the medical advice of your treating provider.

SWELLING PEAKS	HELMET, IF USED	NO ROUGH PLAY	FIRST FOLLOW-UP
2–3 days	23 hours a day	6 weeks	2–3 weeks

01 What to expect after surgery

- **Most children stay in the hospital a few days.** After open surgery this is often three to five days, with the first night in intensive care. After endoscopic surgery it is usually just one night.
- **A drain and head dressing may be used after open surgery.** Both are typically removed before you go home.
- **Your child may be tired, fussy, and off their routine.** Sleep and mood can stay unsettled for several weeks. This is normal and improves with time.
- **Scalp stitches are usually dissolvable.** They do not need to be removed, but the incision does need to be kept clean.

02 Swelling of the head and face

- **Expect significant swelling after open surgery.** The head and face swell for the first two to three days, then slowly improve. Swelling is usually much milder after endoscopic surgery.
- **Swelling can travel down to the eyes.** Puffiness and bruising around the eyes are common even though the surgery is higher on the skull, and the eyes may swell partly or fully shut for a few days. This is expected.
- **Bruising generally clears over about two weeks.** Colors change from purple toward green and yellow as it fades.
- **Swelling is often worse in the morning.** Keeping the head raised above the heart while sleeping, and cool compresses if your team advises, help it settle.
- **Call us if swelling clearly returns after going home,** especially a week or more after surgery, or if it becomes red, hot, and tender.

03 Incision & wound care

- **Begin gentle cleaning as directed,** usually a couple of days after surgery. Use a damp washcloth with mild soap and water along the incision.
- **Do not let scabs build up.** Gently lift crusting away with the washcloth. A small amount of bleeding after a scab comes off is normal.
- **Keep the suture line clean and lightly greasy.** Apply antibiotic ointment for about the first week, then plain petroleum jelly, or follow what your surgeon recommends.
- **Bathe without submerging the head** until your surgeon says it is fine. No swimming or soaking while the incision is healing.

04 Helmet therapy (endoscopic surgery only)

- **This section applies only if your child had endoscopic surgery.** Children who had open cranial vault remodeling do not usually need a helmet — skip this section.
- **The helmet is what reshapes the skull.** Surgery opens the fused suture; the custom helmet then guides growth. It is fitted by an orthotist about one to two weeks after surgery, following a scan of your child's head.
- **Wear it 23 hours a day, every day.** The helmet comes off only for bathing and skin checks. Follow the break-in schedule your orthotist gives you at the start.
- **Do not stop early.** Helmet therapy usually continues until about 9 to 12 months of age. Stopping too soon can let the head shape regress, even if it already looks corrected.
- **Check the skin every time the helmet is off.** Look for redness that does not fade, sores, or rubbing, and keep the helmet clean as directed. Call the orthotist if the fit seems tight, loose, or is causing skin problems.

05 Feeding, fluids & bowels

- **Drinking matters more than eating at first.** It is common for children to eat less for a day or two, especially while the eyes are swollen. Appetite usually returns once the eyes reopen.
- **Keep track of intake and wet diapers.** A clear drop in either can mean dehydration — call us or your pediatrician if you are worried.
- **Watch for constipation.** Bowel habits should return to normal within about a week. Prune juice or an over-the-counter remedy may help — call us if it persists.

06 Comfort & medicines

- **Use acetaminophen (Tylenol) or ibuprofen** as directed by your surgeon. Most children need very little after the first day or two. Follow the dosing from your provider exactly — do not give more, or more often, than directed.
- **Fussiness or poor drinking may mean discomfort.** Try a scheduled dose and see whether your child settles.
- **Finish the full course of antibiotic** if one was prescribed, even once your child seems well.

07 Fever & signs of infection

- **A fever in the first days is normal.** Almost all children run a temperature after a big operation as the body heals. It should settle within about a week.
- **Infection is uncommon, and usually appears later.** When it happens it is typically about 10 to 14 days after surgery rather than right away.
- **Signs that need a call:** swelling that returns after going home, spreading redness around the incision, milky or foul-smelling drainage, or a fever that persists beyond the first week.

08 Activity, safety & follow-up

- **No rough play for about six weeks.** Keep older siblings from roughhousing, and avoid climbing, bouncing, and anything with a fall risk while the bone heals.
- **An occasional minor bump is not a disaster.** Everyday small knocks that happen with a child this age are not expected to harm the repair — but call us about any significant fall or blow to the head.
- **Keep up normal safety habits.** Car seats and high-chair straps should be used as usual.
- **Returning to daycare takes about four to six weeks** after open surgery, or sooner after endoscopic surgery — your surgeon will tell you when.
- **Your follow-up visit is usually 2–3 weeks after going home.** Ongoing visits track head shape and growth, and may include neurosurgery, ophthalmology, and developmental follow-up as your child grows.

Additional instructions

Notes from your surgeon

⚠ When to call our office

- Fever over 101.5°F (38.6°C), or any fever lasting beyond about a week
- Swelling that clearly returns after going home, or is red, hot, and tender
- Spreading redness or swelling, or milky or foul-smelling drainage at the incision
- Clear fluid leaking from the incision, or a soft swelling that keeps growing
- Taking much less by mouth, fewer wet diapers, or repeated vomiting
- A significant fall or blow to the head, or a helmet that no longer fits or is hurting the skin

Call our office at **973-360-1100**.

+ Call 911 for an emergency

Call 911 or go to the nearest emergency room immediately if your child has any of the following:

- Trouble breathing, gasping, or noisy or labored breathing
- Stops breathing, or lips or face turn blue or very pale
- Choking, or is unable to swallow
- Heavy bleeding that will not stop
- Unresponsive, difficult to wake, or unusually limp
- A seizure
- Swelling of the face, tongue, or throat, or hives after a medicine (allergic reaction)
- Severe dehydration — no wet diapers, no tears, or extreme drowsiness
- A high fever with a stiff neck, severe drowsiness, or a rash that does not fade when pressed

Do not wait to call the office in a life-threatening emergency.