

Dove Charity Woman's Health  
419 West Main St  
Waynesboro, PA 17268

Parents Name: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date \_\_\_\_\_

Today's Date: \_\_\_\_\_  Male  Female Birth weight \_\_\_\_\_ Present weight \_\_\_\_\_

Home Birth  Hospital Birth  Vaginal birth  C-Section Birth

Medical problems:  heart disease  bleeding disorders  other \_\_\_\_\_

1. Are you presently breast feeding \_\_\_ Yes \_\_\_ No If no, how long since you stopped breast feeding \_\_\_\_\_

2. Are you presently using a nipple shield? \_\_\_ Yes \_\_\_ No

3. Are you choosing not to breast feed? \_\_\_ Yes \_\_\_ No

4. Do you or any immediate family members have any bleeding disorders? \_\_\_ Yes \_\_\_ No

Medical History has your child experienced any of the following problems or treatment?

1. Infants are usually given vitamin K at birth to prevent bleeding in the first 8 weeks of life. Did you sign any wavier to refuse the administration of vitamin K? \_\_\_ Yes \_\_\_ No By (injection) or (Drops)

2. Was your infant premature? \_\_\_ Yes \_\_\_ No

3. Does your infant have any heart disease \_\_\_ Yes \_\_\_ No

4. Has your infant had any surgery? \_\_\_ Yes \_\_\_ No

5. Is Your child taking any medications \_\_\_ Yes \_\_\_ No  Reflux  Thrush other \_\_\_\_\_

**Mother's symptoms**

\_\_\_\_\_ Creased, Cracked or blanching of nipples

\_\_\_\_\_ Painful latching of infant onto the breast

\_\_\_\_\_ Gumming or chewing of the nipples

\_\_\_\_\_ Bleeding, cracked or cut nipples

\_\_\_\_\_ Infant unable to achieve a successful, tight latch

\_\_\_\_\_ Poor or incomplete breast drainage

\_\_\_\_\_ Infected nipples or breasts

\_\_\_\_\_ Abraded nipples

\_\_\_\_\_ Plugged Ducts

\_\_\_\_\_ Mastitis

\_\_\_\_\_ Nipple Thrush

\_\_\_\_\_ Feelings of depression

\_\_\_\_\_ Over supply of breast milk

**Infant's Symptoms**

\_\_\_\_\_ Waking up congested

\_\_\_\_\_ Difficulty in achieving a good latch

\_\_\_\_\_ Falls to sleep while attempting to nurse

\_\_\_\_\_ Slides off the breast when attempting to latch

\_\_\_\_\_ Reflux (Aerophagia clicking, swallowing air during nursing)

\_\_\_\_\_ Poor weight gain

\_\_\_\_\_ Short sleep episodes (feeding every 1-2 hours)

\_\_\_\_\_ Apnea- snoring, heavy noisy breathing

\_\_\_\_\_ Unable to keep a pacifier in the infant's mouth

\_\_\_\_\_ Waking up congested in the morning

\_\_\_\_\_ Only sleeping when held upright position, in car

\_\_\_\_\_ Gagging when attempting to introduce solid foods

\_\_\_\_\_ Milk leaking out sides of mouth during feedings

**Pediatrician:** \_\_\_\_\_ Phone number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Has your physician evaluated your infant's lip and tongue ties? \_\_\_ yes \_\_\_ no

**Lactation Consultant:** \_\_\_\_\_ Phone number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Referred to our office by:**

Did use the internet to find my office \_\_\_ Yes \_\_\_ No Have you visited my web site? \_\_\_ Yes \_\_\_ No

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Permission to Assess and Release Tongue, Lip and/or Cheek Ties

### Risks Of tie release:

1. Bleeding- Edith Kernerman, IBCLC, RLC says that in 7000 babies that she assisted with ties there were two that bleed more than 20 min. ans in her office two babies were sent to the hospital one the bleeding quit before arrival to the hospital and the second the ER MD put in a suture that was later determined to cause more problems with breast feeding.
2. Cutting more tissue than necessary i.e. gland, tongue, or lip. This is why you should be sure that your attendant has gone through training., and yet it still can happen. The good news is the mucosa heals very quickly.
3. Infection- theoretically this could be a risk Edith Kernerman, IBCLC, RLC after compiling a several studies stated in a seminar that tens of thousands of babies and reported mouth infections.
4. Baby not wanting to latch. This happens in like 3% of babies. What can help baby want to latch is sleeping, not using topical or injectable anesthesia, expressing a little milk first, compressing the breast, using a lactation aid for a day or two.
5. May Reattach depending- this can be avoided by parents actively doing the suggested exercise.

I \_\_\_\_\_ do give Permission to Valerie R Monterrey CPM, LE to assess and release if necessary any and all Lingual (tongue), Labia l(lip) and/or Buccal(cheek) ties.

I understand that Valerie Monterrey is not a pediatric dentist, not a doctor, and not a surgeon. I know she can not treat or diagnose any illness. I also understand she has had limited training in assessing lip, tongue and cheek ties and in the procedure of gently releasing the attached membrane that impedes the ability of my child's nursing. I understand that this may not be enough and I may still have to seek further professional advise and further medical treatment.

Print Parent Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Child's Name: \_\_\_\_\_ and Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_