## TONGUE FLAP for CLOSURE of PALATE FISTULA and DIVISION of TONGUE FLAP (2-3 weeks later)

This is a two stage operation. A flap of tongue tissue is created and attached to cover the palate fistula. 2 weeks later, the flap is divided from the tongue and inset into the palate. The table is not turned. Setup is the same for creation and division of flap. Usually requires naso-tracheal intubation. Usual age is older child or adolescent. PET are not done.

**OPERATIVE TIME:** 1½ hours  
**LOCATION:** Pres Main only

### ANESTHESIA NOTES
- HI RISK AIRWAY ANESTHESIA  
- NASO-TRACHEAL INTUBATION with FIBEROPTIC SETUP and GLIDESCOPE  
- Straight anesthesia connector with extension  
- Kefzol IV 25mg/kg  
- Anesthesia to tape eyes, Anesthesia to suction at end of surgery  
- Tranexamic Acid, 10mg/kg up to 1 gram  
- Give at beginning of case and repeat dose at 2 hours

### PATIENT POSITION | SETUP
- TABLE IS **NOT** TURNED  
- Rolled towels under shoulders  
- Large round gel doughnut under head  
- Lower body Baer hugger, blanket

### TABLE POSITION
- Lower foot, close head gap, **DO NOT REMOVE HEAD PIECE**  
- Large round gel donut head rest.

### ROOM SETUP
- Warm room 72°F, warm bed and head rest w/ Baer
- Separate mayo stand for video equip

### EQUIPMENT and SPECIALS
- Light source w/headlight on patient’s right side  
- Baer hugger  
- IV pump plugged in  
- VIDEO SETUP - ask

### PREP
- PCMX with minimal water, cotton tip applicators to clean nose, wipe gently inside mouth, lightly over eyelids

### DRAPPING and PACKS
- Cleft Palate Custom Pack, Towel Pack  
- White towels for Mayo stand  
- Square off with blue towels, towel clips and split sheet  
- 2" Kling - **NOT NEEDED**

### CAUTERY
- Bovie 10/10 pure,  
  - [1] #0118A Megadyne needle tip w/ holster

### SUCTION

### SOLUTIONS | IRRIGATION
- Kefzol/TXA/NS irrigation: MIX  
  - 500mg Kefzol + 500mg tranexamic acid in 500cc NS plain saline

### LOCAL ANESTHETIC
- **peds mixture:** 50/50 -  
  - 1% lidocaine w/ epi 1:100,000 +  
  - 0.5% Ropivacaine plain

### NEEDLES | SYRINGES
- [1] 10cc syringe w/ [2] 27g 1 1/4" needle for infiltration  
- [1] 20cc syringe w/ [1] 14g angiocath for irrigation

### MEDICATIONS
- Tranexamic Acid IV, 10mg/kg up to 1 gram, repeat at 2 hours  
  - TXA/Kefzol irrigation: 200cc NS / 4gm TXA / 200 mg cefazolin  
  - 2-5 ml phenylephrine from anesthesia in medicine cup  
  - Bactroban (mupirocin) ointment
**SETS TO OPEN**
Cleft Palate Set & Plastic/Breast Set

**INSTRUMENTS USED (ON 3 MAYO STANDS)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forceps</td>
<td>Packing, [3] Cushings, Debakey</td>
</tr>
<tr>
<td>Scissors</td>
<td>Reynolds, Joseph, str Metz, str Mayos</td>
</tr>
<tr>
<td>Suction</td>
<td>7fr Frazier tip, fluted peds suction</td>
</tr>
<tr>
<td>Retractors</td>
<td>Weitlaner, Army Navy, Weider tongue retractor</td>
</tr>
<tr>
<td>Knife</td>
<td>blades</td>
</tr>
<tr>
<td>Elevation Holders</td>
<td>McCullough, Tebbetts, hockey stick</td>
</tr>
<tr>
<td>Other</td>
<td><strong>NO DRILL, NO OSTEOTOME</strong></td>
</tr>
</tbody>
</table>

**STERILE SUPPLIES**
[2] marking pens with ruler
bacitracin ointment
non-disposable light handles
7½ Protegrity latex gloves

**Sponges**
Raytec

**Sutures**

<table>
<thead>
<tr>
<th>Type</th>
<th>SN</th>
<th>Status</th>
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<tbody>
<tr>
<td>2-0 Silk SH</td>
<td>K 833</td>
<td>open</td>
</tr>
<tr>
<td>2-0 PDS CT2</td>
<td>2333</td>
<td>open</td>
</tr>
<tr>
<td>3-0 Monocryl SH</td>
<td></td>
<td>hold</td>
</tr>
<tr>
<td>3-0 PDS SH</td>
<td>2316</td>
<td>open</td>
</tr>
<tr>
<td>3-0 Chromic RB-1</td>
<td>U204</td>
<td>hold</td>
</tr>
<tr>
<td>4-0 Monocryl RB-1</td>
<td>Y214</td>
<td>open</td>
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</tbody>
</table>

**Drains**
None

**Dressings**
Bacitracin to lips

**Postoperative**
call for pediatric bed (6th floor)
oxygen for transport

**Notes**
See next page for diagram and photos of tongue flap

**Dates Modified**
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