

# The Smile Foundation

“Make a smile...change a life”

890 Highway 221 South • Berryville, Arkansas 72616




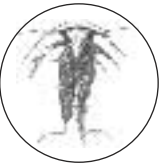
417-849-2460

Dear Medical Professional/Aid Worker,

The Smile Foundation is a nonprofit international medical project based in the United States. The foundation's mission is to provide multi-disciplinary medical care free of cost to all children with congenital facial deformities. We also provide information, training and equipment to medical professionals worldwide who treat these children.

Our volunteer team provides patient care including surgery, dentistry, orthodontistry, speech therapy, and psychology. Our medical professionals travel to patients worldwide or facilitate their transport to the U. S. for treatment. We provide support prior to, during, and after surgery. This includes transportation for the patient and family members, lodging, referrals for secondary care, support for additional plastic surgery and rehabilitation, a teaching environment for sharing professional skills, and teaching tools for speech and social reentry into the community.

If you encounter a child suffering a cleft lip, cleft palate or other facial deformity, please gather the following data and contact the foundation at the address or phone number above. Please print or type with black ink, if possible.

|   |              |              |                      |   |   |   |   |   |  |
|---|--------------|--------------|----------------------|---|---|---|---|---|--|
|   |              |              |                      |   | Unilateral<br>Cleft Lip   | Bilateral<br>Cleft Lip  | Unilateral<br>Cleft Palate  | Bilateral<br>Cleft Palate   | Other<br>Facial Deformities<br>(please list) |
|   |              |              |                      |   |  |  |  |  | _____  |
|   |              |              |                      |   | Circle all of the illustrations that apply to this child                          |   |   |   | _____  |
| Child's Full Name _____   |              |              |                      |   |   |   |   |   | _____  |
| Name of Parent(s) or Guardian _____   |              |              |                      |   |   |   |   |   | _____  |
| Street Address _____  |              | City _____   | State/Province _____ | Zip _____                               | Country _____   |   |   |   |  |
| Phone Number(s) {This/these number(s) reach the home relative other contact (circle one)} |              |              |                      |   | if other, indicate relationship _____   |   |   |   |  |
| Child's Date of Birth _____   | Gender _____ | Height _____ | Weight _____         |   |   |   |   |   |  |
| Other medical conditions/allergies _____  |              |              |                      |   |   |   |   |   |  |
| _____   |              |              |                      |   |   |   |   |   |  |
| Medical Professional/Aid Contact _____  |              |              |                      | Medical/Aid Facility/Organization _____ |   |   |   |   |  |
| Street Address _____  |              | City _____   | State/Province _____ | Zip _____                               | Country _____   |   |   |   |  |
| Phone Number(s)/e-mail address(es) _____  |              |              |                      |   |   |   |   |   |  |

## Caring For an Infant/Family Suffering a Facial Deformity:

Infants with congenital facial deformities are usually otherwise normal and require the same care as any other child. Concerned parents may need extra support and to be informed that the deformities can generally be repaired. Clefting occurs very early in pregnancy and is likely caused by a variety of factors out of the mother's control. Cleft lips can be repaired when the infant has demonstrated steady weight gain, is screened for other health concerns and can withstand anesthesia. Cleft palates are usually closed between eight and eighteen months of age. Surgical or therapeutic follow-up care is common.

## Feeding:

Infants with a cleft lip sometimes have difficulty nursing, and those with cleft palates often do. Mothers may require some support in learning how to position the child for nursing/feeding. The infant will often benefit from feeding in a more upright position with the nipple pointed away from the cleft, if possible. If the child nurses for more than 45 minutes, they may be working too hard and not receive adequate milk for proper weight gain. In this event, another technique is required. A nursing mother may pump breast milk or use a well-balanced formula to bottle-feed the infant. A squeezable bottle with a soft premature infant-sized nipple and an enlarged opening usually works well. Angle the bottle away from the cleft and position the infant in a semi-upright position. Infants with a cleft lip or palate will swallow more air as they feed, so they should be burped often. As the time for reconstructive surgery approaches, it is helpful to teach the child to drink from a cup as sucking will be impossible for a time after surgery.

## Other Medical Considerations:

Children with cleft palates are at increased risk of *otitis media* (ear infection). Their ears need to be carefully monitored; the parent may not always be aware of the condition before permanent damage is done to the ear drum, hearing and ultimately speech. Feeding the child in a semi-upright position, burping them often and keeping them semi-upright for a period after feeding is helpful in keeping fluids flowing away from the eustachian tubes. Ear infections or fluid in the ear require immediate treatment.

For more information contact The Smile Foundation or visit [www.thesmilefoundation.org](http://www.thesmilefoundation.org).