



## Infant Tongue/Lip Tie Evaluation

Patient Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Lactation Consultant \_\_\_\_\_ Date of last visit: \_\_\_\_\_  
Birth weight (lb/oz): \_\_\_\_\_ Present weight: \_\_\_\_\_ Pediatrician: \_\_\_\_\_

Baby received Vitamin K injections? Yes No      Type of birth? Home / Hospital  
Does your baby have any heart disease? Yes No      Vaginal / C-section  
Has your infant had any surgery? Yes No      Full term? Y / N      How many weeks? \_\_\_\_  
Is baby on medications? \_\_\_\_\_      Pictocin? Yes No  
Has patient had prior surgery to correct the tongue or lip tie?      Forceps/vacuum used? Yes No  
If yes, when/by whom? \_\_\_\_\_      Torticollis / head position favoritism? Y / N  
Jaundice? Yes No      Was mom on anticoagulants during pregnancy? Y / N

### Baby's Symptoms

- Poor latch
- Falls asleep while attempting to nurse
- Slides off the nipple when attempting to latch
- Colic / reflux symptoms (aerophagia)
- Clicking sounds: occasional / frequent (circle)
- Poor weight gain
- Gumming or chewing of your nipple when nursing
- Unable to hold a pacifier in his or her mouth
- Prolonged / incomplete feedings
- Chronic Burping / flatulence / hiccups
- Distended / bloated belly
- Breast milk leakage from: mouth / nose / both (circle)
- Tongue feels like sandpaper against breast
- Lip blister
- Crease mark on baby's upper lip
- Supplementing with bottle to assist feeding:  
breastmilk / formula (circle)
- Pant/breathe rapidly while nursing?

### Mother's Symptoms

- Creased, flattened or blanched nipples after nursing
- Cracked, bruised or blistered nipples
- Bleeding nipples
- Severe pain when your infant attempts to latch  
more on one side: \_\_\_\_\_
- How many times a day do you nurse? \_\_\_\_\_ How long per side: L \_\_\_\_ min R \_\_\_\_ min
- Poor or incomplete breast drainage (engorgement)
- Plugged ducts
- Mastitis or nipple thrush
- Milk supply: strong let down / adequate / losing supply
- Have you altered your diet? \_\_\_\_\_
- Nipple shield use? L / R both sides

**Family history:** Tongue Tie  Lip Tie

Any other nursing concerns? \_\_\_\_\_

Anything additional we should know about baby or mother's health history? \_\_\_\_\_

Parent's signature: x \_\_\_\_\_

**Structural evaluation**

**Lip tie evaluation**

- Attachment location: class IV (palatal) / class III (interdental) / class II (btw free/AG) / class I (mucosa)
- Notching on alveolar gum ridge
- Presentation: thick / thin / fibrous / fleshy / mixed corded / triangular
- Callus or blister on upper lip
- "Cobblestone lips" - dehydration
- Defined philtrum? Y / N
- Full / thin upper lip (circle)
- Upper lip curls up/ out (flanges)
- Upper lip stretches out to occlude nares
- Blanching gums with lift
- Muscle tone: tight / flexible
- Buccal ties

Report from lactation consultant

Consent Signed

Reviewed lifts with mom

**Tongue tie evaluation**

- Attachment location:  
class IV (tip of tongue) / class III (anterior salivary ducts) / class II (just behind ducts) / class I (base of tongue)
- Deep / hidden (seen with retraction: *submucosal*)
- Barrier to finger sweep: fence / speed bump
- Sore / blister on tip of tongue
- Coated white "milk tongue"
- Pancake gums
- Shape of tongue: notched / forked / heart / cupped / square / folds down / rounded / blunted
- Posterior tie: speed bump / tenting (eiffel tower) / fence / cord
- Short (0-5mm) / Medium (5-10) / long (>10mm)
- Lingual fiber: thin / wide corded / fleshy / mixed shallow / deep
- Finger suction: none / weak / strong / clamping down
- Tongue cycle: continuous progressive wave / short bursts with prolonged rest / humping push / pistons in and out
- Extension past vermillion border Y / N
- Elevation  $\frac{2}{3}$  Y / N
- Lateralization Y / N
- Lower jaw: tension / tremors
- High palate / cleft? \_\_\_\_\_
- Epstein pearls
- Asymmetry in head (plagiocephaly) / face (jaw or eyes or mouth asymmetry)
- Head tilts (torticollis)
- Scratches / bruises / petechiae / port-wine stain

Dental provider's Signature \_\_\_\_\_