Children with a craniofacial condition may have as many as 30 or more surgeries before they reach adulthood. These surgeries may change the appearance of the child and will often occur during the school year. Going back to school after surgery can be difficult for both the affected student, as well as his/her classmates. Taking steps to prepare students for these changes will alleviate much of the anxiety they may experience.

Returning to school following surgery can be an exciting and anxious time for children with craniofacial differences as well as their classmates.

As a parent, you are looking for all of the resources that will help you and your child adjust as he/she returns to the classroom. As a teacher, you want to make the student's return comfortable for both the affected student and his classmates. Preparation and communication on the part of teachers and families help children make a smooth back-to-school transition by:

- Teaching classmates respectful and appropriate ways to ask questions about the surgery
- Providing classmates with a better understanding of the medical condition and surgery, making them more accepting and less likely to tease or bully the child
- Sharing ideas on how classmates and friends can be supportive
- Preparing classmates for the physical and emotional changes that might be present after surgery

Sometimes a student who has a craniofacial condition undergoes [surgical] procedures that might cause him/her to come back to school looking different.

Kim Seifert, RN and Richard Redett, MD

General Craniofacial Surgery

Children with craniofacial differences often need surgeries that require them to be out of school for extended periods of time. After surgery, they may return to school looking different from when they left. Some changes may include:

- Sutures or staples on the face or in the hairline
- A shaved area of the hair
- Swelling around the eyes and face
- Following surgery on the ear, a cup, soft dressings, or headband may be used for a few weeks as protection
- Frequent visits to the nurse for post-surgical care
- Needing extra help with school work due extended absences

Tracheostomy

A tracheostomy is a small surgical opening in the neck which allows air to go in and out of the lungs. The opening in the neck may have a tube inserted through the opening. Some changes may include:

- A change in voice quality or volume
- The child may bring a nurse to school to help or may require frequent visits to the school nurse

Rigid External Distraction (RED)

Sometimes children need RED. This device is used to treat children with certain craniofacial conditions affecting the growth of the jaw. The RED device (which is actually purple, not red) pulls the face forward very slowly by a set of screws that are turned daily. It is usually on for 6 weeks.

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empowering and giving hope to individuals and families affected by facial differences

Common questions students may have about the RED are

- Can you breathe and talk with that on? The device should not affect the patient's ability to speak or breath.
- Does it hurt?

It should not hurt and the child should not require pain meds.

- Can you do regular things with the RED on? Children may go to school and participate in their regular activities: but may not swim or play contact sports.
- Can you eat normal food? No. Children need to be on a soft diet during this time.



A Young girl after placement of the RED device

Preparing students for the return of their classmate will help make the transition easier

Returning to school after craniofacial surgery is potentially challenging and overwhelming for both the student and his or her classmates. Open and honest communication can facilitate the transition back into classroom and give the child a sense of normalcy and routine.

Tips for Teachers and Students

How can teachers and classmates make the transition back to school easier for a child after craniofacial surgery?

- Prepare the class that the student might be out for an extended period of time.
- While the student is out, keep in touch with cards, phone calls, e-mails. Tell the student about class activities and try to keep him/ her connected with the class.
- Prepare a class discussion with a simple but accurate description of the surgery and what to expect when the child returns. (For example, a shaved scalp, swelling, bruising, the presence of a RED or trach). He/she will not be able to participate in gym class and certain school activities. Encourage classmates to ask questions and clarify misconceptions.
- As a class, brainstorm ideas on how you can support the returning child. Remind the class that their friend is the same person, but that they may notice some changes. Open discussion and communication is key.
- Ask the class questions such as:
 "Do you think that it will be difficult for _____ to return to school looking different?
 "Do you think that _____ should get teased for looking different?

"What will you do if you see other kids teasing _____?

"How can you help _____ when they return to school?

Allotting time for planning and preparation will make a student's return to school after surgery, a smooth, comfortable transition for both the student and his/her classmates.