

Orthodontic Airway Plate (OAP) for Robin Sequence

This pamphlet provides information about the Orthodontic Airway Plate (OAP) treatment option for infants with Robin Sequence (RS) at _____. We understand that this can be a lot to take in, and our team is here to support you every step of the way.

What is Robin Sequence?

Robin Sequence (or Pierre Robin Sequence) is a condition present at birth that affects the development of the jaw, tongue, and mouth. This can lead to breathing difficulties, especially in newborns and young infants. It is often accompanied by a cleft palate.

What is the OAP?

The OAP is a non-surgical treatment option for infants with Robin Sequence who have upper airway obstruction. It helps to improve breathing by gently repositioning the tongue forward and opening the airway. Think of it like a retainer that helps support the airway. This therapy was initially described in Tübingen, Germany (Tübingen Palatal Plate or TPP).

Who is on the OAP Team?

We have a dedicated team of specialists at _____ who work together to provide the best possible care for your child. This team includes experts in:

- Craniofacial Pediatrics
- Craniofacial Orthodontics
- Otolaryngology (Ear, Nose, and Throat)
- Neonatology (NICU)
- Nursing
- Feeding Therapy
- Developmental Therapy
- Nutrition
- Sleep Medicine
- Social Work
- Craniofacial Surgery/Oral and Maxillofacial Surgery (OMFS)
- Imaging/Radiology

Is the OAP Right for My Baby?

The OAP is typically considered for young infants with RS and a cleft palate who have difficulty breathing due to their tongue position. It works best when the blockage of the airway is isolated to the tongue level. The OAP may *not* be the right choice if your baby has swallowing problems, weak muscle tone, limited mouth opening, or other causes of breathing problems. Our team will thoroughly evaluate your baby to determine if the OAP is a good option.

What to Expect Before, During, and After OAP Placement:

- **Before:** Your baby will undergo several assessments, including physical exams, a video camera test of the upper airway, imaging (a CT scan), an overnight sleep test, and consults with various specialists. These tests help the team understand your baby's specific needs and create a personalized care plan.
- **During:** The OAP is created by an orthodontist using a mold or scan of your baby's mouth. The placement procedure (OAP delivery) involves a team of specialists and is carefully monitored in the NICU to start. Your baby's comfort is a priority.
- **After:** Your baby will stay in the hospital for a few weeks after OAP placement. During this time, the team will monitor their breathing and sleep, support feeding and growth. The OAP may need to be adjusted during the hospital stay. You will also receive training on how to care for your baby with the OAP.

Going Home:

Before your baby goes home, you'll receive detailed instructions on OAP care, feeding, and emergency procedures. You will also be trained on necessary medical equipment and supplies. We will make sure you feel confident and prepared.

Monitoring and Follow-Up Care:

After discharge, your baby will need regular follow-up appointments with the specialists on our craniofacial team. These visits will ensure the OAP is working effectively and that your baby is growing and developing as expected. We will also monitor for any potential issues. The OAP will need adjustments as your baby grows, and we plan for a brief hospital stay about 2 months into OAP therapy, and as needed during the course of OAP treatment (about 4-6 months of age for most infants).

We are here for you!

We understand that you may have many questions. Please don't hesitate to ask any member of the OAP team. We are committed to partnering with you to provide the best possible care for your child.

Contact Information:

_____'s Craniofacial Team

OAP Program

[Phone #s]

[Weblinks]

Examples:

<https://www.seattlechildrens.org/conditions/robin/>

<https://www.seattlechildrens.org/healthy-tides/unique-therapy-rare-craniofacial-condition/>