

Postoperative Instructions after Oral Surgery

AFTER SURGERY

- Gauze: Keep the gauze in place for **60 minutes** following surgery. Then remove the gauze and throw away. Dampen a new folded gauze, **replace every 60 minutes** as needed until there's minimal bleeding.
- Ice: Apply ice to the outside cheeks where surgery was performed and keep it there – **ON 20 minutes then OFF 20 minutes intervals** the first day or 24 hours while awake.
- Food: Food and hydration is very important at this time. When you don't have any nausea/vomiting, then please start with clear liquids, then soft diet. (see ACTIVITIES below)
- Rest: Be prepared to rest for the remainder of the day following surgery – it is a very important part of your recovery. (see ACTIVITIES below)
- Blood Clot: It is critically important that the extraction site forms a good clot. **DO NOT rinse the mouth vigorously** (swishing, spitting, sucking, etc) and **avoid using straws and smoking** for several days. This can dislodge the blood clot and cause a very painful condition called "dry socket". Also avoid touching the wound for several days following the surgery. (see DRY SOCKET below)
- Pain: Before the anesthesia starts to wear off, take your pain medication as directed. (see PAIN CONTROL below)
- Antibiotics: If we prescribed antibiotics, follow their instructions for use carefully and finish the entire prescription. This can help prevent or treat infection. (see INFECTON below)

WHAT IS NORMAL?

1. Bleeding: You may see some blood or oozing from the surgery site and in your saliva – this is normal. If bleeding is excessive, place gauze (or a moistened tea bag) over the area and bite firmly for an hour. Then check and repeat if necessary. If bleeding doesn't stop after several gauze cycles, please call us for further instructions.
2. Swelling: Swelling is normal and expected, and may affect the mouth, cheeks, eyes and sides of the face. Typically, after wisdom teeth removal, swelling starts the day after surgery but does not reach maximum levels until 2-3 days after. Ice the outer cheeks the first day continuously, then 20 minutes on and 20 minutes off for days 2-3 post-op. On days 3-4, you may use moist heat packs to further assist in minimizing swelling.
3. Discoloration: Sometimes, discoloration of the skin occurs (black, blue, green or yellow) due to blood spreading underneath the tissue. Often this occurs on days 2-3.
4. Nausea: Some patients have nausea or vomiting after surgery. If this happens, do not eat or drink or take medicine for one hour. Then begin sipping on water or ginger ale (NO straw) and see how you feel. As you are able to hold down liquids and begin to feel better, you may introduce soft foods and medicines as needed.
5. Loose Stitches: Sometimes sutures become dislodged. Simply remove them and discard them if this happens. If they remain intact, we will remove them in our office a week after surgery if necessary.
6. Numbness: You may feel numb in the lip, chin or tongue. This is normal and will go away as you recover. Be careful when eating however, as you are at risk for biting soft tissues (tongue/lips) when they are numb.
7. Fever: You may experience a slight rise in temperature following surgery. If it persists, please let us know.
8. Dizziness when Standing: As the anesthesia wears off, you may have dizziness when standing up. Move slowly from lying down to sitting up, and then from sitting to standing, pausing in between for a minute.
9. Bony Walls at Extraction Site: You may feel hard projections at the extraction site with your tongue – these are normal and will smooth out on their own over time.
10. Sore Throat: Your muscles are tired and swollen, so it may be uncomfortable to swallow for a few days.
11. Stiff Jaw: It is normal for the jaw to feel stiff and difficult to open for a few days. It will resolve on its own.

Postoperative Instructions after Oral Surgery (Cont.)

PAIN CONTROL

We will discuss pain management at your consultation, which may include over the counter and prescription medications. Be sure to have them ready at home and stay on top of medications to avoid a pain buildup. If there are no contraindication for Ibuprofen and Tylenol®, then you can alternate these two medication every 3 hours, but each medication is taken 6 hours apart (e.g. Hour 0 - Ibuprofen, Hour 3 - Tylenol®, Hour 6 - Ibuprofen, Hour 9 - Tylenol®, etc). **Start the pain medication before the numbing wears off.**

ACTIVITIES

- Hygiene: Do not rinse the day of surgery. Starting on the day after surgery, begin gently rinsing 5-6 times a day with a teaspoon of salt mixed into one cup of warm water. If prescription mouth rinse is given, use this 2 times a day gently. AVOID vigorous swishing, sucking, or spitting motions. You may use a toothbrush as well, just be gentle and avoid the extraction/surgical site for a few days.
- Diet: Start with clear liquids (water, juice, sports drink, or soda) WITHOUT Straws. then slowly advance to soft diet (scrambled eggs, applesauce, yogurt, mashed potatoes, and soups) in the next few days. It's important to resume a healthy diet with plenty of protein and fluids as soon as possible to aid in healing.
- Activities: Rest the first day, and then resume activities slowly on the days following surgery as you feel comfortable.
- Alcohol/Smoking: Absolutely **no alcoholic beverages** and/or **smoking** for 24 hours following anesthesia.
- Wind instruments: Do not play any wind instruments for **3-4 weeks** following the surgery.

DRY SOCKET

This is a painful condition that occurs when the blood clot becomes dislodged. Call us if you have severe pain in the extraction area or radiating near the ear – it often occurs 3-5 days after surgery. Mild cases can be treated by increasing the pain mediation regimen, but severe pain may need more attention.

INFECTION

Signs of infection are persistent or worsening symptoms of normal recovery as mentioned above, in addition to redness and drainage in the surgical sites. Usually this can occur 3-5 days after surgery. We want to make sure you have a complete recovery from oral surgery, so call us if you are concerned.

CONTACT THE OFFICE IMMEDIATELY IF THE FOLLOWING OCCURS:

1. Bleeding is excessive and cannot be controlled.
2. Discomfort is poorly controlled despite pain medications.
3. Swelling is excessive, spreading, or continuing to enlarge after 60 hours.
4. Allergic reactions to medications occur, which are causing a generalized rash or excessive itching or difficulty swallowing or breathing.

CONTACT EMERGENCY MEDICAL SERVICES (“EMS”) OR CALL 911 IF:

Patient loses or has lost consciousness or has severe allergic reaction. Again, it's imperative that you have a responsible Adult Escort to monitor you rest of the day!

Special Instructions After Oral Surgery

IMPLANT SURGERY INSTRUCTIONS:

- If a metal abutment is placed and protruding through the gum, brush gently around the area, and AVOID any type of pressure. Once the wound is completely healed, we encourage you to brush the abutment.
- Avoid any DIRECT pressure on the surgical site wound from prosthesis such as denture, flipper, or retainer.
- Do not use electric (vibrating or spinning) toothbrushes around the surgical site until instructed.

BONE GRAFT SURGERY INSTRUCTIONS:

Your bone graft is made up of many particles. You may find some small granules in your mouth for the first several days. Do not be alarmed; it's normal to have some of them come out of the graft site and into your mouth. There are some things you could do to minimize the amount of particles that become dislodged:

- Do not disturb or touch the wound.
- Avoid rinsing or spitting to allow blood clot and graft material stabilization.
- Do not apply pressure with your tongue or fingers to the grafted area, as the material is movable during the initial healing.
- Do not lift or pull on the lip to look at the sutures. This can actually cause damage to the wound site and tear the sutures.
- Do not use electric (vibrating or spinning) tooth brushes around the surgical site until instructed.

SINUS LIFT SURGERY INSTRUCTIONS:

Do not under any circumstances blow your nose or sneeze holding your nose for the next 4 weeks. This may be longer if indicated. You may sniff all you like but **no blowing**. Anything that causes pressure in your nasal cavity must be avoided.

- Do not blow your nose or sneeze holding your nose.
- Sneeze with your mouth open.
- Do not drink with straws and do not spit.
- Scuba diving and flying in pressurized aircraft may also increase sinus pressure and should be avoided.
- Avoid *bearing down*—as when lifting heavy objects, blowing up balloons, playing musical instruments that require a blowing action, or any other activity that increases nasal or oral pressure.
- Smoking must be stopped. If necessary, nicotine patches can be prescribed.

Decongestants such as Drixoral[®], Dimetapp[®], or Sudafed[®] will help reduce pressure in the sinuses. You will also be given a prescription for antibiotics. Please take these as directed.

EXPOSE & BOND SURGERY INSTRUCTIONS:

- If surgical packing was placed, leave it alone. The pack helps to keep the tooth exposed. If it gets dislodged or falls out do not get alarmed.
- Do not pull on the chain and allow your orthodontist to use this to start the tooth movement.