

POST-OPERATIVE INSTRUCTIONS

PLEASE READ BOTH SIDES OF THESE INSTRUCTIONS CAREFULLY. Sometimes the after-effects of oral surgery are quite minimal, so not all of these instructions may apply. Common sense will often dictate what you should do. However, when in doubt, follow these guidelines or call our office any time for clarification.

DAY OF SURGERY

FIRST HOUR - Bite down gently but firmly on the gauze packs that have been placed over the surgical areas, making sure they remain in place. Do not change them for the first hour unless the bleeding is not being controlled. If active bleeding persists after one hour, place enough new gauze to obtain pressure over the surgical site for another 30-60 minutes. The gauze may be changed as necessary and may be dampened and/or fluffed for more comfortable positioning.

EXERCISE CARE - Do not disturb the surgical area today. Do NOT rinse vigorously or probe the area with any objects or your fingers. You may brush your teeth gently. DO NOT SMOKE for at least 5 days, since it is very detrimental to healing.

OOZING - Intermittent bleeding or oozing is normal. It may be controlled by placing fresh gauze over the surgical areas and biting down firmly for 30-60 minutes.

STEADY BLEEDING - Bleeding should never be severe. If it is, it usually means that the packs are being clenched between your teeth rather than exerting pressure on the surgical areas. Try repositioning fresh packs. If bleeding persists or becomes heavy you may substitute a tea bag (dunk first in a glass of water) for 20 or 30 minutes. If bleeding remains uncontrolled, please call our office.

SWELLING - Often there is some swelling associated with oral surgery. You can minimize this by using a cold pack or ice bag wrapped in a towel and applied firmly to face or cheek adjacent to the surgical area. This should be applied twenty minutes on and twenty minutes off during the first 6 to 8 hours after surgery. After 24 hours, it is usually best to switch from ice to moist heat to the same areas.

PAIN - Unfortunately most oral surgery is accompanied by some degree of discomfort. We recommend that you take a dose of Ibuprofen (Motrin = Advil = Ibuprofen) as soon as you arrive home. You will usually also have a prescription for an additional pain medication. Ibuprofen can be taken along with this prescription pain medicine. Effects of pain medicines vary widely among individuals. If you do not achieve adequate relief with Ibuprofen, you may supplement each dose of Ibuprofen with a dose of the prescription pain medicine. Some people may even require two of the pain pills at one time during early stages (but that may add to the risk of upset stomach). Remember that the most severe discomfort is usually within the first six hours after the anesthetic wears off; after that your need for medicine should lessen.

NAUSEA - Nausea is not an uncommon event after surgery, and it is sometimes caused by strong pain medicines. Nausea may be reduced by preceding each pill with a small amount of soft food, then taking the pill with a large volume of water. Try to keep taking clear fluids and minimize the pain medication, but call us if you do not feel better or if repeated vomiting is a problem. Cola drinks that have less carbonation may help with nausea.

PRESCRIPTION MOUTH RINSE -You may have been given a prescription for a special mouth rinse. This will help you from getting an infection and decrease the chances of getting a dry socket. Use the rinse one time

on the evening of the surgery. From then on, use it three times a day. Take half a mouth full; rinse for two minutes and spit.

DIET - Eat any nourishing food that can be taken with comfort. Temperature of the food doesn't matter, but avoid extremely hot foods. It is sometimes advisable, but not required; to confine the first day's intake to bland liquids or pureed foods (creamed soups, puddings, yogurt, milk shakes, etc.). Avoid foods like nuts, sunflower seeds, popcorn, etc. that may get lodged in the socket areas. Over the next several days you can progress to solid foods at your own pace. It is important not to skip meals! If you take nourishment regularly, you will feel better, gain strength, have less discomfort and heal faster. If you are diabetic, maintain your normal eating habits as much as possible and follow instructions from us or your physician regarding your insulin schedule.

SHARP EDGES - If you feel sharp edges in the surgical areas with your tongue, it is probably the bony walls that originally supported the teeth. Occasionally small slivers of bone may work themselves out during the first week or two after surgery. They are not pieces of tooth and, if necessary, we will remove them. Please call the office if you are concerned.

INSTRUCTIONS FOR THE SECOND AND THIRD DAYS

MOUTH RINSES - Keeping your mouth clean after surgery is essential. Use one-quarter teaspoon of salt dissolved in an 8 ounce glass of warm water and gently rinse with portions of the solution, taking five minutes to use the entire glassful. Repeat as often as you like, but at least two or three times daily for the next five days. You do not need to use salt rinses if you are using a prescription mouth rinse.

BRUSHING - Begin your normal oral hygiene routine as soon as possible after surgery. Soreness and swelling may not permit vigorous brushing of all areas, but please make every effort to clean your teeth within the bounds of comfort.

HOT APPLICATIONS - Apply warm compresses to the skin overlying areas of swelling (hot water bottle, moist hot towels, heating pad) for 20 minutes on and 20 minutes off to help soothe those tender areas. This will also help decrease swelling and stiffness.

DRY SOCKETS - Normal healing after tooth extraction should be as follows: The first day of surgery is usually the most uncomfortable and there is some degree of swelling and stiffness. The second day you will usually be far more comfortable and, although still swollen, you can usually begin a more substantial diet. From the third day on **GRADUAL, STEADY IMPROVEMENT** should mark the remainder of your post-operative course. If a **DRY SOCKET** occurs (loss of blood clot from socket, usually on the 3rd to 5th day), there is a noticeable, distinct, persistent throbbing pain in the jaw, often radiating toward the ear and forward along the jaw to cause other teeth to ache. If you do not see steady improvement during the first few days after surgery, don't suffer needlessly. Call the office and report symptoms so you can be seen as soon as possible.