

POST-OPERATIVE INSTRUCTIONS FOLLOWING ORAL SURGERY

SWELLING

Swelling of the face following oral surgery is quite normal. Apply ice packs during the first 24 hours. Swelling will usually reach its peak during the first 48-72 hours. After 38 hours, if swelling or jaw stiffness has occurred, apply heat on the outside of the face, using a warm, moist dressing. If you use a hot water bottle or heating pad, protect the skin with a moisturizing lotion and place a thin towel between the heat source and the skin. Do not use this heat continually. Rather, apply it for about 20 minutes, then remove for an equal interval. If swelling appears to be increasing rather than decreasing on your 4th day from surgery, you should call the office. This may be an indication of a wound infection.

PAIN

Do not take pain medication on an empty stomach. At least swallow some milk prior to taking pain pills to reduce the potential of nausea. Take your pain medication as prescribed. Usually, take one of the prescribed pain pills within an hour following surgery. This will allow the pain pill to dissolve and get into the bloodstream by the time the local anesthetic is wearing off. Prescribed pain medications are generally needed during the first day. After that, acetaminophen (Tylenol) is generally sufficient. If pain persists or causes you undue concern on your 4th day from surgery, please notify the office. Again, prolonged pain may be a warning of a wound infection. If you have been placed on any antibiotics (you will be told of this), take all of the tablets or liquid as directed. The drugs you may be given will minimize swelling, reduce discomfort, prevent infection, and promote healing. Although most patients benefit from the prescribed drugs, occasional side effects (such as dizziness, rash, nausea, excitement, constipation, or diarrhea) can occur. Should you experience any of these side effects, stop the drug immediately and notify the office.

DIET

You must guard against dehydration after oral surgery. Follow a liquid diet on the first day. Drink at least the equivalent of eight glasses of water, orange juice, tomato juice, soups, milkshakes, ginger ale, or milk the first day. Sucking on ice chips or crushed ice, and ginger ale or 7-Up usually aids in masking some of the local discomfort. Avoid using a straw since the pressures involved may dislodge the blood clot. Also, avoid smoking, as the hot smoke will easily irritate the fresh oral wound. Return to a normal diet within two or three days. This is not the time to initiate a new diet trend. You will feel better, have more strength, have less discomfort and heal faster if you continue to eat. NOTE: If you are diabetic, maintain your normal caloric requirements and take your medication as usual.

HYGIENE

DO NOT RINSE your mouth until the morning after surgery. On the day following the surgery, brush as many teeth as best you can, as soon as you can. Good hygiene is imperative to good wound healing. Food left in the wound retards healing and invites infection. A mouth rinse composed of 1/4 teaspoon salt in a glass of warm water will soothe the wound. Commercial mouth rinses will also improve your breath and be somewhat refreshing.

OTHER PRECAUTIONS

DO NOT do things such as blowing up balloons or playing a wind instrument (trumpet, flute, etc.) in the immediate postoperative period, and refrain from excessive pressures within the mouth for two weeks.

- If an opening into your maxillary sinus was noted at the time of this surgery (you will be told of this), do not blow your nose, and if you sneeze, open your mouth. The object is to avoid forcing pressure back through the sinus and out into the wound -this will cause the soft tissue closure over the socket to open up.
- If, prior to your oral surgery, you had been taking medication prescribed by another physician or dentist, continue to take that medication unless you are advised otherwise.

PRESENCE OR ABSENCE OF SIDE EFFECTS VARIES FROM PATIENT TO PATIENT AND CERTAINLY VARIES WITH THE DIFFICULTY OF THE SURGICAL PROCEDURE. THE FOLLOWING CONDITIONS MAY OCCUR, ALL OF WHICH ARE CONSIDERED NORMAL.

POSSIBLE SIDE EFFECTS

1. The face and jaw will probably swell. Swelling is most marked within the first 48-72 hours. Swelling may take a week to disappear.
2. Stiffness (trismus) of the jaws is nature's way of splinting and resting the part that needs to be repaired. You should work vigorously at opening your jaw the first day after the surgery. This would include "prying" the teeth apart with your fingers. Prolonged or recurrent stiffness may be a warning of underlying infection. Please notify the office of stiffness if it seems prolonged or recurrent.
3. Numbness of the lower lip and chin and on the side of the tongue may occur on the day of the surgery. This is called "paresthesia," and though it may be permanent, it is generally a temporary condition which will correct itself. It may remain anywhere from a few days to several months.
4. Black and blue marks (ecchymosis) on the face are caused by seepage of blood beneath the cheeks, chin or under the eye (blackeye). This may appear initially as a swelling, but often by the second or third day it may discolor the face. The color may progress from black-and blue to yellow-and-green, and the color may progress down your face onto your neck. It will gradually disappear over a week or two. Moist external heat will assist in resolving the surgically created bruise.
5. You may have a slight earache.
6. You may have a sore throat.
7. Other teeth will possibly ache temporarily. This is called sympathetic or referred pain, and is only temporary.
8. Your "bite" may seem to have shifted. This also passes quickly, but that often happens when you alter your chewing pattern such as was the case during your immediate post-surgery diet of yogurt and ice-chips.
9. If the corners of the mouth are stretched, they may dry out and become cracked. The lips should be kept moist with a cream or ointment.

10. During the healing process, small sharp fragments of bone may work up through the gum tissue. This is especially true after multiple extractions and is Nature's way of reshaping the ridge. This process of "shedding" slivers of bone may last anywhere from 2-4 weeks. If there is difficulty with some of these slivers, please call the office and arrange for an appointment. Impressions for bridges, partial dentures or full dentures should be postponed until the ridge is well healed - usually six weeks.

11. There may be a tenderness and ropy feeling to the vein used to administer the sedative at the time of the surgery. This is a local phlebitis (irritation of the vein) and is usually self-limiting. Local heat and elevation of the arm will help. In time (2-4 months), the vein will soften and blood will flow through it again, or it will shrink and become threadlike and unnoticeable. If the area becomes swollen, red, warm, and very tender, concern then turns to an active phlebitis in the vein. Please notify the office if you have any concern.

12. You may have a slight temperature elevation for 24-48 hours. If fever persists, it can be a warning of infection or dehydration. Drink fluids and, if fever persists, notify the office.

13. Rarely, a localized abscess occurs in the surgery site 2, 3, or even 4 weeks after the surgery. If you have a sensation of pain, swelling, stiffening of the jaw or fever, please contact the office.

14. You will want to return to the office for post-operative treatment and suture removal. Also, feel free to contact us if any doubt arises concerning your progress and recovery.