

Post-Operative Instructions: Full-Arch Restoration

Immediately Following Surgery

- The gauze pad placed at the surgical area should be kept in place for 30 minutes. After this time, the gauze pad should be removed and discarded. Once you are home, please change the gauze and use firm biting pressure over the extraction site(s) until bleeding has stopped.
- Vigorous mouth rinsing and/or touching the wound area following surgery should be avoided on the day of surgery as it may cause bleeding.
- Take the recommended pain medication as soon as possible following the surgery, ideally before the numbness from local anesthesia has worn off.
- Restrict your activity the day of surgery and resume normal activity when you feel comfortable.

Bleeding

- Bleeding is normal following surgery. Slight bleeding, oozing, or redness in the saliva or gauze pad is not uncommon and is expected. When the gauze pads have little or no blood on them, they are no longer necessary. It can take a variable amount of time for bleeding to resolve but usually resolves within a few hours, although a small amount of bleeding is common for up to 24 hours.
- Excessive bleeding (i.e., rapidly fills up or pools in your mouth) may be first controlled by gently rinsing or wiping any old clots from your mouth, placing a fresh gauze pad over the surgical site, and applying firm biting pressure on the extraction site for 30 minutes. Repeat as necessary. If excessive bleeding continues, you may apply biting pressure on the extraction site with a moistened black tea bag for 30 minutes. Repeat as necessary. Repeatedly replacing or using gauze in the absence of excessive bleeding (i.e., rapidly fills up or pools in your mouth) will delay the clotting process and prolong bleeding. If bleeding continues excessively, please call for further instructions.

Swelling

- Swelling is normal following surgery. Swelling may not present immediately following surgery as it usually increases or peaks in the days following surgery. It can take a variable amount of time for swelling to resolve but usually improves within a week or two.
- To minimize swelling, apply an ice bag, or plastic bag or towel filled with ice, on the cheek or jaw outside the surgical area. Apply the ice continuously (20 minutes on, 20 minutes off) for the first 24 hours, as tolerated.
- Keeping the head elevated with a couple of pillows for the first few days following surgery can also help reduce swelling.
- Some patients, especially those on blood thinners, may experience cheek or jaw bruising following surgery. This is not unusual and typically improves over several days.

Diet

- It is mandatory to maintain a soft, non-chew diet during the entirety of the healing period (up to 4 months following the surgery), unless otherwise directed by your doctor. A "soft, non-chew diet" is described as "nothing harder than scrambled eggs." Anything other than strict adherence to a "soft, non-chew diet" may cause pain, delay healing, cause infection, and cause implant failure.
- Avoid hot liquids and hot food as these may cause discomfort.
- You should be encouraged to eat regularly and drink plenty of fluids as these will help with recovery.



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Pain

- Pain and/or discomfort is normal following surgery. Pain may not present immediately following surgery as it usually increases or peaks in the days following surgery. It can take a variable amount of time for pain to resolve but usually improves within a week or two.
- You should take non-steroidal anti-inflammatory drugs (NSAIDs, e.g., ibuprofen) as first-line pain therapy, unless otherwise stated by your doctor. The recommended maximum daily dose of ibuprofen is 3,200 mg and, typically, two to four 200 mg tablets may be taken every 6 hours.
- If you are unable to take NSAIDs, acetaminophen (e.g., Tylenol®) is recommended as first-line pain therapy. Typically, Extra Strength Tylenol may be taken every 4-6 hours.
- Ibuprofen and Tylenol, taken simultaneously, work as well or better than opioids in their pain management effect. Often, taking Tylenol between doses of ibuprofen provides better pain control than taking Tylenol at the same time as the ibuprofen.
- You may be prescribed an opioid pain medication (e.g., hydrocodone/acetaminophen). Typically, this is prescribed for “breakthrough pain” and can be taken with ibuprofen as a substitute for Tylenol. If your ibuprofen alone does not improve your pain, you may take ibuprofen and the opioid together. Often, taking the opioid between doses of ibuprofen provides better pain control than taking the opioid at the same time as the ibuprofen.
- It is recommended to take pain medication with food as this will help prevent nausea or stomach irritability.
- If you are taking an opioid pain medication, you should not drive or operate heavy machinery.
- Use pain medication as directed and taper your use as you feel more comfortable. If pain is not improved with the recommended pain regimen, please call for further instructions.

Oral Hygiene

- Mouth rinsing should be avoided on the day of surgery. You will likely be provided a prescription for an antibacterial mouth rise (Peridex™) to begin using the day after surgery. You will gently rinse with 15mL of Peridex for approximately 30 seconds, twice a day, and continue for 2 weeks following surgery. Continuing Peridex longer than two weeks may cause alteration of taste perception or staining of teeth and other oral surfaces. Do not eat or drink anything for 30 minutes following the rinsing.
- Starting 2 weeks after surgery, you may lightly “polish” the surgical areas and prosthesis with an ultra-soft tooth brush and warm water. You should also use “Super Floss” or an electric water flosser (Waterpik®) to gently floss around the implants and under the prosthesis.
- Starting 6 weeks after surgery, you may brush and floss as normal.
- DO NOT USE an electric toothbrush (e.g. Sonicare®) around your implants until your doctor gives you permission. Usually this is 4-6 months following surgery.
- Smoking should be avoided. Smoking may increase bleeding, increase pain, delay healing, cause infection, and cause implant failure.

Activity

- Unless told otherwise, avoid vigorous physical activity, strenuous exercise, or heavy lifting (>20lbs) for 3 days following surgery. Early physical activity can increase your blood pressure, which can cause an increase in swelling, pain, and bleeding. You may gradually increase your physical activity level as tolerated as you start to feel better.



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Other Considerations

- In the event of nausea and vomiting following surgery, do not take anything by mouth for at least an hour. You should then sip on soda, tea, or ginger ale slowly over a 15-minute period. When the nausea subsides, you can begin taking solid foods and medication as prescribed. If nausea persists, please contact the office.
- Sutures are placed in the area of surgery to minimize post-operative bleeding and to help healing. Sutures placed will dissolve in approximately 5-7 days following surgery. Sometimes they become dislodged or fall out, this is no cause for alarm. Just remove the suture from your mouth and discard it.
- Osteitis (dry socket) is when the blood clot in the extraction socket dissolves or gets dislodged prematurely from the tooth socket. There are no certain ways to prevent dry socket, although measures like avoiding straws, spitting, and smoking are recommended. Symptoms are typically throbbing pain radiating throughout the jaw or ear without improvement with pain medication. Typically this occurs several days after surgery. While there is no necessary treatment for dry socket, if your pain is not improved with the recommended pain regimen, please call for further instructions.
- Slight elevation of temperature for the first 24-36 hours following surgery is not uncommon. Tylenol or ibuprofen may be taken to reduce the fever. If the temperature persists, please call for further instructions.
- Occasionally, following removal of a tooth, you may feel hard projections in the mouth with your tongue. These are the bony walls of the socket which supported the tooth. These projections usually smooth out spontaneously over time. On occasion, small bony spicules may loosen from the bony walls and project into your gum tissue. You may attempt to gently remove these by massaging them with a Q-tip®. If these persist or become bothersome, please call for further instructions.
- If the corners of your mouth are stretched, they may dry out and crack. Your lips should be kept moist with an ointment such as Vaseline®.
- Sore throats and pain when swallowing are not uncommon as muscles get swollen. The normal act of swallowing can then become painful. This will subside in 2-3 days.
- Stiffness (trismus) of the jaw muscles may cause difficulty in opening your mouth for a few days following surgery. This is a normal post-operative event which will resolve in time.
- If you had a "sinus graft" performed at the time of your implant placement, avoid blowing your nose, do not use a straw, and sneeze with your mouth open for 2 weeks following your surgery.
- Most implants heal uneventfully and take 2-4 months to heal. If you are concerned about the healing of your implants, please call for further instructions.