



Post-Operative Instructions: General/Extractions

You have had a surgical operation in your mouth that must be cared for just like an operation on any other part of your body. Please follow instructions carefully, and if post-operative problems of an emergency nature occur, always consult with the person most familiar with your surgical problem and therefore best able to render assistance: your oral and maxillofacial surgeon.

BLEEDING

1. Leave the gauze pad over the area of surgery for about 60–90 minutes. Hold it in place over the surgery site by biting on the gauze with mild pressure. You may change and replace the gauze as needed every 20 minutes. The gauze may be rinsed out and reused if necessary. Avoid constant spitting or rinsing of your mouth in order to not interfere with clot formation. A clot should form within a few hours, after which you may gently remove the gauze pad and then use only as needed if bleeding recurs. Wisdom teeth tend to bleed longer. A small ooze or spotting on the gauze may even be present by bedtime.
2. Some oozing is normal for a few hours after surgery. Should the oozing be persistent or heavy, rinse your mouth out thoroughly with warm water and remove any visible clot sticking out of the socket with a gauze pad or Q-tip®. Place a gauze pad soaked in a strong tea solution over the bleeding area and apply pressure. To identify this area, you may need a helper to examine your mouth with a flashlight. It is essential that the pad and pressure are directly over the bleeding area. Apply continuous pressure for 30 minutes. Repeat this process 2 more times, or until the bleeding stops. Avoid frequent changing of the gauze pad unless it becomes soaked. Remember, direct pressure is necessary to stop the bleeding. If bleeding still persists, then contact us at our office or through the paging service.
3. Try not to smoke for a period of 5 days after your surgery; however, the first 24 hours is the critical period. Remain quiet the day of surgery, get plenty of rest, and do not engage in strenuous, dangerous, or physical activities for 3 days after your surgery.

PAIN

If you were given a prescription for pain, have it filled immediately and follow directions, which will be on the label of the container. The tablet or capsule is to be swallowed and not held in the mouth to dissolve. If prescribed anti-inflammatory medication (Advil®, Motrin®, ibuprofen, Lodine®, Cataflam®, etc.), it should be taken right away and utilized as your first-line pain medication. Narcotic medication (codeine, Darvocet®, Vicodin®, hydrocodone) should be taken as a second-line medication in addition to your anti-inflammatory medication only if the anti-inflammatory medication is not properly relieving your pain. By doing so, you are using the narcotic medication for breakthrough pain (only if needed). If you do require the narcotics, you can use them in addition to your anti-inflammatory medication if needed. DO NOT take medication with an empty stomach or you may become nauseated. Narcotics are at a high risk for this. If the pain medication seems to cause nausea or vomiting, then discontinue its use and try using a nonprescription pain medication such as Tylenol®, Advil®, or aspirin. If these do not provide adequate pain control or if nausea and vomiting persist, call us. By taking your first pain pill before the anesthetic has worn off, you will be able to manage any discomfort better. Remember that the most severe discomfort is usually within the first 8 hours of surgery; after that, your need for medicine should lessen. Do not operate dangerous items/machinery or engage in dangerous work while taking pain medication. Do not drink alcohol or drive while taking pain medication. Our goal is to keep you as comfortable as possible. After oral surgery, pain often will not reach its peak until 48 hours.

SWELLING

When surgery has been done about the face, swelling or discoloration is not unusual; in fact, it is very common. On the day of surgery, keep the face cold with periodic use of ice packs. 20 minutes on followed by 20 minutes off is a good schedule to follow. Vaseline® on the lips will help to avoid dryness. On the day after surgery, start using warm salt water (½ tsp salt in a glass of warm water) as a gentle mouth rinse after every meal and also between meals. Start brushing your teeth the day following surgery. The operative area must always be kept clean. Swelling should reach its peak in 48 hours.



Post-Operative Instructions: General/Extractions (Cont.)

A continued increase in swelling after the first 48 hours or elevated temperature following surgery should be assessed, so please call our office if this occurs. If you were prescribed an antibiotic rinse (chlorhexidine), start using it on the evening of surgery. Follow the instructions on the bottle and use for 8 days only unless specified otherwise by your doctor.

DIET

An adequate diet must be followed to ensure a speedy recovery. Immediately following surgery, liquids or soft foods are recommended initially. As soon as you can, start a solid diet. We realize that the consumption of foods may be difficult, but an adequate diet is essential for proper healing. Sustacal®, Carnation® Instant Breakfast, Meritene®, Nutrament®, or Ensure® are helpful when used as liquid snacks. Soups and plenty of fluids and daily vitamins are also valuable. Do not eat very hard foods, such as rock candy, for about 8 weeks. Jaw surgery may temporarily weaken the jaw and make it more susceptible to fracture.

SUTURES

If stitches were placed in your mouth, it was to prevent excess bleeding and help hasten the healing. These will be removed easily and painlessly by your oral surgeon. Do not be alarmed if they become loose and a nuisance. Some of the stitches may work loose before your return appointment, and usually, this is not a problem to be worried about. Sometimes, dissolvable stitches are used and do not require removal. However, they may take several weeks to completely dissolve.

INFECTION

If you were given a prescription for an antibiotic, the directions must be followed closely! Infection can be a serious problem, and your antibiotic should treat and prevent infections. Unusual headaches, chills, a prolonged elevated temperature above 100 degrees (orally), neck pains, swelling, drainage, or pain must be investigated. Please do not hesitate to call us. If you were prescribed an antibiotic rinse, please start it on the evening of surgery.

DRY SOCKET

A dry socket is a delayed healing of the socket. Symptoms include a dull aching pain in the ear, chin, adjacent teeth, or jaw, beginning on about the third or fourth day after surgery and lasting an average of about 10 days. It is usually accompanied by a foul taste. This is not an infection but a loss of the blood clot usually in a lower third molar (wisdom tooth) socket. The cause is not known. Factors felt to increase the risk are smoking, medications such as birth control pills, increased age, difficulty of surgery, and bad luck. Treatment is for the symptoms only. If pain medication does not satisfactorily control the symptoms, please notify us. Frequently, a medicated packing can be placed in the socket to alleviate the pain. This packing will need to be changed every 3 or 4 days until healing is complete.

MISCELLANEOUS

1. If a denture or another prosthesis was inserted following your surgery, do not remove it for 24 hours or until you have been seen by us or your family dentist.
2. In some types of surgery, particularly surgery of wisdom teeth, a numbness may be experienced for days or even weeks after surgery. Do not become alarmed; this most often is temporary and should gradually disappear.
3. If contact sports are planned, ask us for advice as to when they can be resumed.
4. If you have had sedation or a general anesthetic, you should not drive a car or operate dangerous equipment for the remainder of that day and night.
5. The friend or family who accompanied you should review your instructions with you and stay with you for 6 hours after your departure from the office.
6. If you have any questions, concerns or problems you may contact the doctor on call by phoning the office, or after office hours, call our paging service at (217) 241-8606. If you do not receive a response within 30 minutes, please call again