



POST-OPERATIVE INSTRUCTIONS: WISDOM TEETH REMOVAL

The following will cover important information regarding proper post-surgical care for wisdom teeth extraction. If you have been scheduled to have your wisdom teeth removed, it will be important to follow these instructions exactly as we present them.

PAIN MANAGEMENT

Discomfort is normal after the extraction of teeth and typically peaks on days 2-4. The local anesthetic administered during your surgery normally has a duration of about 2-8 hours. Many patients are able to manage pain after surgery with over-the-counter (OTC) medications, such as Tylenol® and Motrin®. If you have a condition that does not allow you to take Tylenol or Motrin, notify your surgical team.

Please reference the sheet titled "Managing Your Pain After Surgery Without Opioids." If taking an opioid pain medication is necessary, be certain to take it with food; this will help prevent nausea. Remember, narcotic pain medicine will impair your judgment and reflexes.

Swelling is normal after surgery and is a major cause of post-extraction discomfort. Swelling typically peaks by the third day and then starts to resolve; it can be reduced by the use of an ice pack. Apply the ice pack to the side of your face for 10 minutes; transfer it to the opposite side for another 10 minutes. Continue icing the face for the first 24 hours. Do not freeze the skin. Ice packs are useful for the first 24 hours only. Also, keep your head elevated on two pillows for 3-4 days. These measures will not eliminate swelling, but they will help to reduce its severity.

WOUND CARE

Gauze pad(s) should be placed directly over the extraction site(s) and held in place with firm biting pressure; proper placement will help you not swallow blood, which can make you nauseated. Replace the gauze pad(s) every 20-40 minutes. When the gauze pads have little or no blood on them, they are no longer necessary. The amount of bleeding will vary from person to person. Most of your bleeding will slow within 3-4 hours, but a small amount of bleeding is common for up to 24 hours.

Do not rinse on the day of surgery; it may prolong your bleeding. Begin salt water rinses the day after surgery and continue for 1 week. Rinse with warm salt water 3 times each day. To make the salt water solution, dissolve ½ teaspoon of salt in a small glass of warm tap water.

If you have been given an irrigating syringe, start irrigation one week following surgery. Fill the syringe with warm salt water, place the tip of the syringe one-quarter of the way into each extraction site, and begin flushing. Allow the solution to fall out of your mouth into the sink; do not spit. You will likely see a lot of food debris, so continue to irrigate each site until the solution runs clear. Do this 3-4 times a day (after each meal) for 1-2 weeks and lessen as the surgical site heals.

Begin brushing your teeth the day after surgery. It is important to brush all of your teeth, even if the teeth and gums are sensitive. Bacterial plaque and food accumulation near the extraction sites will delay healing. Please refrain from using an electric toothbrush on the surgical sites.

DIET

To allow blood clots to form undisturbed, do not eat for 2 hours after surgery. Start with clear liquids, such as apple juice, tea, or broth. Gradually ramp up your diet as tolerated. Always cool down any hot foods or liquids during the first 24 hours. If you were sedated for surgery, do not eat fatty, creamy, or oily foods; these foods may cause nausea. You should eat only soft foods for the first week: for example, soups, eggs, mashed potatoes, and meatloaf are fine. For 2 weeks, do not eat hard, crunchy, or very chewy foods, such as European breads, pizza crust, steak or jerky, nuts, or popcorn. To help prevent dry socket, do not use a straw for the first 3 days after surgery.



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ACTIVITY

Do not smoke for at least 1 week. Smoking will increase your bleeding; the nicotine and tar in tobacco impair healing and may cause a dry socket.

Unless told otherwise, do not engage in any vigorous physical activity for 3 days following your surgery. Physical activity increases your blood pressure, which will cause an increase in your swelling, pain, and bleeding. You may gradually increase your activity 5-7 days after your surgery.

Your surgical team will advise you if you need to follow sinus precautions. If so, please refrain from blowing your nose. This will cause pressure and can force the clot out of the socket. Avoid anything that will cause you to sneeze or cough. If you need to sneeze or cough, do so with your mouth open. This will allow the pressure to go out of your mouth instead of the sinus. Do not be alarmed if you find a small amount of blood in your nose. This may happen occasionally since the nose is connected directly to the sinus.

COMPLICATIONS

A small percentage of patients lose the protective clot or scab and develop inflammation, a condition known as dry socket. This usually occurs on post-op day 3-5. There will be a distinct and persistent pain in the jaw area, sometimes accompanied by a bad taste in the mouth. If you notice any of these symptoms, please contact the office or the doctor on call.

A small percentage of patients may develop an infection following surgery. This is unlikely to occur, but it is important to contact the office or the doctor on call if you experience fever, night sweats, or a significant increase in swelling or pain.

The nerve that supplies feeling to the lower lip, chin, and tongue sometimes runs very close to the roots of the lower wisdom teeth. Occasionally, when the teeth are removed, and especially in older patients, the nerve can become injured. You may experience a tingling or numbing sensation in the lower lip, chin, or tongue. This is usually temporary and will disappear within a few weeks or months. On rare occasions, it can result in a permanent alteration of sensation similar to local anesthesia. Please report these symptoms to the office.