

## **General Care After Surgery**

### **General Care of your Mouth Following Extractions and other Oral surgery**

It is our desire that your recovery be as smooth and pleasant as possible. The after-effects of oral surgery are quite variable, so not all of these instructions may apply. Following these instructions will assist you, but if you have questions about your progress, please call the office. Please try to call during office hours; however a 24-hour answering service is available for after hours contact with a doctor. **The after hours telephone number is (540) 710-8880.**

Please read these instructions carefully

At a minimum, you must control bleeding, provide for good nutrition, maintain adequate pain control, and provide proper oral hygiene and wound care. Common sense will often dictate what you do.

### **THE DAY OF SURGERY**

The day of your procedure should be committed to actions that will promote complication-free healing.

#### **Control of Bleeding**

Bleeding after surgery may continue for several hours. Bite down 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.

Intermittent bleeding or oozing is normal. It is typical for bleeding to continue for a few hours after simple extractions and for several (6-10) hours after more complex surgery such as removal of impacted teeth. Placing fresh gauze over the surgical areas and biting down firmly for 30-60 minutes may control it.

Maintaining the head in an elevated position (use of a recliner or several pillows) will also help to reduce bleeding and swelling. *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 (soaked in hot water, squeezed damp-dry and wrapped in a moist gauze pad) for 20 or 30 minutes. *If bleeding still remains uncontrolled, please call our office.*

#### **Exercise Care**

Do not disturb the surgical area on the day of surgery. *Do not rinse vigorously or spit* for at least 48 hours following surgery. Do not probe the area with any objects or your fingers. You may

brush your teeth gently. *Do not smoke* for at least 48 hours, since it is very detrimental to healing, as well as to your overall health.

### **Swelling**

Often there is some swelling associated with oral surgery that will reach its peak in around 48 hours and can take 7-10 days to resolve. 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 24-36 hours after surgery when you are awake. Bags of frozen peas and corn work well if you do not have an ice bag. If you have been prescribed medicine for the control of swelling, be sure to take it as directed.

### **Fever**

A slight fever is not uncommon the first few days after surgery (temperature to 100.5F). *If you have a high fever or fever persists, please call our office.*

### **Operating a motor vehicle**

Please do not operate any machinery or a motor vehicle for 24 hours after sedation or general anesthesia, or if you are taking any prescribed narcotic pain medicine (Percocet, Endocet, Roxicet, Oxycodone, Vicodin, Hydrocodone, Tylenol with Codeine).

### **Smoking and Drinking Alcohol**

You should not smoke following surgery for at least 48 hours. This may disrupt the healing process. Do not consume any alcohol for 24 hours after intravenous sedation, general anesthesia or while taking any prescription pain medications.

### **Pain**

Unfortunately, most oral surgery is accompanied by some degree of discomfort. If you have no history of allergy to non-steroidal anti-inflammatory medications like Ibuprofen (Motrin, Advil) or ketorolac (Toradol), we recommend taking this prior to the local anesthetic wearing off. Follow the instructions on the medication bottle if you are taking over the counter pain medication or as Dr. Bailey prescribed.

If pain is more severe, a narcotic pain medicine may be needed. Please take any narcotic medication as prescribed.

In general, we suggest Ibuprofen four times a day as needed with Extra Strength Tylenol or equivalent in between Ibuprofen doses if needed. Try to take the narcotics primarily at night and never when driving or operating potentially dangerous machinery or equipment. The prescribed pain medicine will make you groggy and will slow down your reflexes. Avoid alcoholic beverages. Pain or discomfort following surgery should subside more and more every day. If pain persists, it may require attention and you should call the office.

There is no interaction between the prescribed narcotic pain medicine and Ibuprofen or ketorolac (Toradol). Be aware that narcotic pain medicine may cause upset stomach, which may include nausea, vomiting or constipation. Also, these should not be taken if you must operate any machinery or a motor vehicle. Effects of pain medicines vary widely among individuals. 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, sometimes caused by stronger pain medicines or certain anesthetic agents. Preceding each pill with a small amount of soft food, then taking the pill with a large volume of water may reduce nausea caused by pain medications. 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.

### **Diet**

On the day of surgery, we ask that you avoid hot foods that will prolong bleeding. Cold soft foods (such as ice cream, milk shakes, Instant Breakfast, puddings and yogurt) are ideal. 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. Avoid foods like nuts, sunflower seeds, popcorn, etc., which may get lodged in the socket areas. Drink plenty of fluids and do not use a straw as extraction site healing can be disturbed. If you are diabetic, maintain your normal eating habits as much as possible and follow our instructions or those from your physician regarding your insulin schedule.

Fainting Precaution: If you suddenly sit up or stand from a lying position you may become dizzy, especially if you have not eaten or kept up your fluid intake. Therefore, immediately following surgery, if you are lying down, make sure you sit for at least one minute before standing.

### **Sutures**

Sutures (“stitches”) may be placed to reapproximate tissue and help control bleeding. These sutures are usually dissolvable and do not need to be removed. If they fall out soon after surgery they do not need to be replaced. If they become loose and bothersome, we can remove them for you.

## **INSTRUCTIONS FOR THE SECOND AND THIRD DAYS AFTER SURGERY**

### **Mouth Rinses**

Keeping your mouth clean after surgery is essential to reduce the risk of infection. Use one-half 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 four to five times daily and always after eating for the next five days.

We may prescribe an antibiotic rinse (Chlorhexadine, Periogard, Peridex) for certain procedures. This rinse should be used in the morning and at bedtime after routine mouth care. Do not eat or drink or rinse your mouth after using the medicated rinse. Using this rinse more than two times a day will cause staining of your teeth.

### **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.

### **Muscle Soreness**

If the muscles of your jaw become stiff, applying warm, moist heat to the outside of your face over these muscles will help make you more comfortable. Usually 20 minutes on and 20 minutes off while awake will help the soreness resolve.

### **Normal Healing and 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. A medicated dressing is often placed to decrease pain if medications alone do not help.

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. This most often occurs when lower teeth have been removed. It can be made worse by smoking. 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.

### **Open Sockets**

Sockets from tooth extractions may remain open for several weeks after surgery. Rinsing after any food intake is very important. At your post-operative check-up, you may be given a small irrigating syringe to help keep food out. This can be used with plain warm water.

### **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.

### **Sinus Precautions**

Some procedures in the back part of the upper jaw may involve entry into the sinus cavity. *If you are advised of this following your surgery*, please follow these precautions for 10 days after the surgery. Do not blow your nose or sneeze holding your nose. Sneeze with your mouth open. Do not drink with straws and do not spit. Scuba diving and flying in pressurized aircraft may also increase sinus pressure and should be avoided. Decongestants such as Drixoral, Dimetapp, or Sudafed will help reduce pressure in the sinuses. You may also be given a prescription for antibiotics. Please take these as directed. Anything that causes pressure in your nasal cavity must be avoided. Avoid “bearing down”—as when lifting heavy objects, blowing up balloons, playing musical instruments that require a blowing action or any other activity that increases nasal or oral pressure. Smoking must be stopped. If necessary Dr. Bailey can prescribe Nicoderm patches.

### **Retainers**

If you wear retainers, they may be worn after surgery when it is comfortable for you. We recommend leaving them out at least the first few days after surgery.

### **Extremely Important!**

We will make every effort to help expedite your healing process and ensure that your healing is progressing normally. However, to do that we must be kept informed of your progress. If, after surgery, there is any question about how you are healing, please contact our office. **If, after 72 hours you do not feel better, with decreased swelling or pain, please contact our office.**

It is our desire that your recovery be as smooth and pleasant as possible. Following these instructions will assist you, but if you have questions about your progress, please call the office. Please try to call during office hours; however a 24-hour answering service is available for after hours contact with a doctor. The after hours telephone number is (540) 710-8880.