

POST-OPERATIVE INSTRUCTIONS

Sometimes the after-effects of oral surgery are quite minimal, so not all the instructions may apply. Use your best judgement on what you should do. However, if in doubt, follow these guidelines or call our office for clarification. Our number is: **801-277-3942**

DAY OF SURGERY

FIRST HOUR: After leaving the office the first thing you should do is remove gauze from your mouth and eat something cool and soft as well as take Ibuprofen that was provided. If you cannot take Ibuprofen do not take any, take Tylenol or your narcotic pain med instead. If the wound is still bleeding after you have eaten and taken pain medicine, place gauze over the wound and gently bite down to hold pressure on the area. Typically, gauze is needed for 30-45 minutes. This may be different for everyone. If the area is not bleeding, you do not need to bite on any gauze.

EXERCISE CARE: Do not disturb the surgical area today. Do not exercise or do heavy lifting over 10lbs for 1 week.

HOME CARE: After having Oral Surgery your mouth is sore and tender. However, you should still be brushing your teeth and keeping your mouth clean. You are okay to brush your teeth tonight, avoid or be gentle in the areas where teeth were extracted. It is normal for bleeding to happen during brushing if you go over the surgical site.

OOZING: Intermittent bleeding or oozing overnight is normal. Bleeding may be controlled by placing fresh gauze over the area and biting on the gauze for 30 to 45 minutes at a time. Oozing is normal for about 3 days after surgery.

PERSISTENT BLEEDING: Bleeding should never be severe. If so, it usually means that the packs are being clinched between teeth only and are not exerting pressure on the surgical areas. Try repositioning the packs. If bleeding persists or becomes heavy, you may substitute a black tea bag (get the tea bag damp and place in surgical site) for 20 to 30 minutes. If bleeding remains uncontrolled, please call our office.

SWELLING: Swelling is often associated with oral surgery. It can be minimized by using a cold pack, ice bag or a bag of frozen peas wrapped in a towel and applied firmly to the cheek adjacent to the surgical area. This should be applied thirty minutes on and thirty minutes off during the first 48 hours after surgery. If you have been prescribed medicine for the control of swelling, be sure to take it as directed.

PAIN: Unfortunately, most oral surgery is accompanied by some degree of discomfort. You will usually have a prescription for pain medication. **If you take the first pill before the anesthetic has worn off, you should be able to manage any discomfort better.** Some patients find that stronger pain medication causes nausea, but if you precede each pain pill with a small amount of food, chances are nausea will be reduced. The effects of pain medications vary widely among individuals. Typically, we recommend you start with Ibuprofen/Motrin before using your narcotic. If you cannot take ibuprofen for medical reasons, please avoid it. The narcotic you have received has acetaminophen/ Tylenol in it. Do not double up with any additional Tylenol if you plan to take the narcotic. Alternating Ibuprofen and the narcotic every 3 hours is the best combination for pain. **Example – take ibuprofen @ 9am, take the narcotic @ 12pm and then more ibuprofen @ 3pm** etc. Remember that the most severe pain is usually within six hours after the local anesthetic wears off; after that your need for medicine should lessen

NAUSEA: Nausea is not uncommon after surgery. Sometimes pain medications are the cause. Nausea can be reduced by preceding each pain pill with a small amount of soft food and taking the pill with a large volume of water. Try to keep clear fluids down and minimize dosing of pain medications but call us if you do not feel better. Classic Coca-Cola may help with nausea.

DIET: Eat any nourishing food that can be taken with comfort. Avoid extremely hot foods. **Do not use a straw for the first week after surgery.** For the first few hours while you are numb, stick with soft cool foods like ice cream, yogurt, smoothies, etc. Once the numbness has worn off whatever feels good to eat is okay to eat. Things like chips, crackers, or any crunchy foods you will want to avoid. It is important not to skip meals! If you take nourishment regularly you will feel better, gain strength, have less discomfort and heal faster. If you are a diabetic, maintain your normal eating habits or follow instructions given by your doctor.

SHARP EDGES: If you feel something hard or sharp edges in the surgical areas, it is likely you are feeling the bony walls which once supported the extracted teeth. Occasionally small slivers of bone may work themselves out during the following week or so. If they cause concern or discomfort, please call the office.

MOUTH RINSES: Keeping your mouth clean after surgery is essential. You have been prescribed a mouth rinse that should be at the pharmacy. You can begin to use the mouth rinse the night of your surgery. You will use the mouth rinse morning and night for about 1-2 weeks or until you feel the tissue is fully healed. You don't want to vigorously swish the mouth rinse, gently let it coat the surgical sites.

BRUSHING: Begin your normal oral hygiene routine as soon as possible after surgery. Soreness and swelling may not permit vigorous brushing, but please make every effort to clean your teeth within the bounds of comfort.

HOT APPLICATIONS: You may apply warm compresses to the skin over the areas of swelling (hot water bottle, hot moist towels, heating pad) for 20 minutes on and 20 minutes off to help soothe tender areas starting **48 hours after surgery.** This will also help decrease swelling and stiffness.

HEALING: Normal healing after tooth extraction should be as follows: The first two days after surgery are generally comfortable and there is usually some swelling. On the third to fifth day you should be more uncomfortable and, although still swollen (usually your third day is the worse day for swelling), you can get back to normal life. **The remainder of the post-operative course should be gradual, steady improvement.** If you don't see continued improvement, please call our office.

PLASTIC SYRINGE: If you are given a plastic-irrigating syringe, **DO NOT use it for the first three days.** Then use it daily, beginning on the **fourth day**, according to the instructions until you are certain the tooth socket has closed completely and that there is no chance of any food particles lodging in the socket.

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 where you had surgery. A 24-hour answering service is available to contact the doctor on call after hours. Calling during office hours will provide a faster response to your questions or concerns. **PLEASE NOTE: telephone calls for narcotic (painkiller) prescription renewals are ONLY accepted during office hours and we can only call after day 3.**

Prescriptions you may have:

- 1- A narcotic pain medicine. – different for each patient
- 2- A steroid for swelling – Dexamethasone
- 3- An antibiotic to avoid infection. – different for each patient
- 4- An antibacterial mouth rinse to help keep your mouth clean - Peridex