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Advanced Oral & Facial Surgery of the Main Line
POST-OPERATIVE INSTRUCTIONS

Sometimes the after-effects of oral surgery are quite minimal, so not all of these instructions may apply to your recovery period. Common sense will often dictate what you should do. However, when in doubt follow these guidelines or call our office for clarification. Our number is (610) 688-6682

Your case is individual, no two people are alike. Do not take seriously well-intended advice from friends, or make random searches on the internet. Follow the instructions below and, if required, discuss problems with the people who are familiar with your surgery and thus are best able to effectively help you: The doctor and staff at the surgeons office.

DAY OF SURGERY

DO NOT spit or drink from a straw for the first 3 days as this can dislodge the blood clot leading to bleeding and pain. **DO NOT SMOKE** for the first 5 days, as this will delay healing and cause extreme pain.

FIRST HOURS: A small amount bleeding after surgery is normal. Bleeding should never be severe and our doctor and staff will make sure that all active bleeding is controlled before you are discharged. Pressure helps reduce bleeding and permits formation of a clot in the tooth socket. Place gauze over the surgical site and maintain firm pressure for 1 hour. It is most effective to use small squares that are moistened with a couple of drops of tap water and squeezed dry for more comfortable positioning. After one hour remove and discard the gauze, it will always have blood on it even if there is no active bleeding. Wait several minutes then inspect the mouth for further bleeding (taking a small sip of water to clear the mouth will help in this determination). If persistent bleeding continues after several hours, do the following:

- a) Rinse mouth with warm water and gently wipe away old blood clots that appear outside the tooth socket.
- b) Cover the bleeding site with a gauze pad and bite with constant firm pressure for 60 minutes.
- c) If unsuccessful in controlling the bleeding after a few more hours, place a small moist tea bag over the area of surgery and bite with pressure for 60 minutes. The tannic acid in the tea bag helps to form a clot by contracting bleeding vessels. Repeat as necessary.
- d) Keep head elevated and apply ice to each cheek.
- e) If, after following the above instructions, bleeding persists, notify the office.

The presence of gauze in the mouth will create large amounts of saliva because the body is fooled into thinking you are eating. **Do not confuse this blood-tinged saliva with persistent bleeding. It is important to swallow the saliva normally and not spit it out as this will cause continued bleeding.**

Should excessive bleeding develop after leaving the office, or if bleeding remains persistent, it may be due to improper placement of the gauze pack or improper formation of the blood clot. If the packs are being clenched only between the teeth and pressure is not being properly exerted on the surgical areas bleeding will continue. Make sure the gauze pack is not too big and try repositioning the pack so that it is squarely over the extraction site and sitting between the adjacent teeth. If you look at the site and see what looks like a piece of "liver" coming out you need to wipe any clotted blood that is not directly in the extraction site, drink a small glass of warm water, and then place a gauze pack over the site applying firm pressure for 60 minutes. To minimize further bleeding, do not become excited, sit upright, and avoid exercise. If bleeding remains uncontrolled, please call our office.

OOZING: Intermittent bleeding or oozing overnight and into the next day is normal. You may also experience the taste of blood for a day or two. Be careful not to disturb the surgery sites by constantly changing the gauze as this will prolong the bleeding and disrupt the clots. Make sure to swallow saliva normally after removing the gauze. You may want to place a towel on your pillow at night to prevent soiling the pillow.

EXERCISE CARE: Do not disturb the surgical area today. Do **NOT** spit, drink from a straw, rinse vigorously or probe the area with any objects since this may disrupt blood clots, which is very detrimental to healing and may cause a dry socket. You may brush your teeth and rinse with salt water gently the day after surgery. **DO NOT SMOKE** for at least 72 hours.

SWELLING: Swelling is to be expected after surgery because it is part of the healing process. To minimize swelling, apply ice, cold compresses, or bags of frozen peas /corn (wrapped in a thin towel to protect the skin) to the outside of the face over the operated areas. Use an Ace wrap to hold the ice in place. Ice should be used continuously for the **first 48 hours** (it is not necessary to use the ice while sleeping at night). Swelling will reach its peak after 2 days and some bruising and tenderness may accompany it. The swelling will resolve in approximately 7 days and does not require special treatment. Swelling may cause an increase in temperature during the first 48 hours and does not usually represent an infectious process. Axillary (arm) or aural (ear) temperatures are more accurate than an oral reading.

PAIN: Unfortunately most oral surgery is accompanied by some degree of discomfort. Non-steroidal anti-inflammatory drugs, such as Ibuprofen, are designed to reduce inflammation and swelling and thus prevent pain from occurring. Take Ibuprofen 600mg (Advil or Motrin) every six hours for the first three days after surgery. Ibuprofen should be taken before the local anesthetic has worn off and always be taken with food. For severe pain take the prescribed narcotic medication in addition to the Ibuprofen. **If you find you are taking large amounts of pain medicine at frequent intervals, please call our office. The surgeon may need to examine the surgical site to determine if a change in prescription or other treatment is indicated.** Do not use alcohol, drive a vehicle, operate machinery, or make legal decisions while using narcotic pain medications. *(It is office policy to refill narcotic prescriptions only during working hours so please anticipate your needs in advance. The doctor will usually require that the patient be examined in the office prior to refilling the Rx to ensure that all underlying reasons for the pain have been addressed).* For those people who cannot take this Ibuprofen due to allergies, stomach problems, or because they are taking blood thinners, Acetaminophen 1000mg (Tylenol Extra Strength) should be taken every six hours. Tylenol must be stopped prior to taking any Acetaminophen containing narcotic.

MEDICATIONS: If you have been prescribed antibiotics, steroids, or other medications to aid the healing process, take the medications as prescribed. Discontinue any medication that causes a rash or other unfavorable reaction and contact the office immediately. **Women please note:** Some antibiotics may interfere with the effectiveness of your birth control medications. Please consult your pharmacist for the need to use alternative measures for birth control.

NAUSEA: Nausea is not uncommon after surgery as the small amount of blood in saliva mixes with the acid in the empty stomach. Some patients may find that stronger pain medicines or antibiotics may also cause nausea. Nausea can be minimized by eating a small amount of soft food as soon as reasonably possible after surgery and taking medications with a large volume of water. If nauseous, do not consume anything for an hour then try taking small amounts of room temperature clear fluids, bland foods such as crackers, and minimizing the amount of pain medications used. Classic Coca Cola or Ginger Ale, and sports drinks may help with nausea. Let the sodas sit open for a short while to let the carbonation release prior to drinking. Please contact us if these actions don't make you feel better.

DIET: A nourishing liquid, pureed or light soft diet is advisable during the first 24 hours after surgery. Avoid milk or ice cream products for the first 12 hours. Eat any nourishing food that can be taken with comfort. Examples: soups, puddings, jello, yogurt, milk shakes, pineapple, scrambled eggs, etc. Avoid foods that have small or sharp pieces (taco, nachos, potato chips), that are excessively hard, or anything that may create sharp edges or small particles, such as potato chips, small cereals, popcorn, nuts or seeds, as they may become lodged in the surgery sites. Avoid hot foods until the anesthesia has worn off. Avoid spicy and acidic foods. Drink plenty of fluids to compensate for the reduced food intake. Sports drinks (Gatorade / Powerade) and ginger ale are good fluids. Over the next several days you may gradually progress to solid foods. 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 and check your blood sugar frequently. Follow any instructions given by your doctor.

SHARP EDGES: If you feel something hard or sharp edges in the surgical area. These are not roots or pieces of tooth, but the bony walls that once supported the extracted teeth or normal anatomy inside the extraction socket. These projections smooth out as the healing progresses. Infrequently, small slivers of bone may work themselves out during the following week or so. They may cause some discomfort. Though not an emergency, please contact the office during business hours to schedule a follow-up appointment for their removal.

HYGIENE: The evening of surgery, you may *gently* brush your teeth and rinse with salt water prior to bed, being careful not to disturb the surgical areas. The ratio of salt should be 1/2 tsp. to 8 oz. of hot water. Continue the rinses for 2-3 weeks until the extraction site is closed.

INSTRUCTIONS FOR THE SECOND AND THIRD DAYS

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. Failure to keep the surgical site clean will result in pain and may lead to infection.

MOUTH RINSES: Keeping your mouth clean after surgery is essential. Poor hygiene is a primary cause of late post operative pain and infection. Use ½ 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. Make sure that you get the rinse to the areas of surgery. Repeat as often as you like, but at least every morning, after all meals and prior to bed. Continue the salt-water rinses for at least a week or until the extraction site heals over. Avoid commercial mouth rinses for the first week as they contain alcohol that can interrupt the healing process. The extraction socket will gradually fill with new tissue and bone over the course of 4 to 6 weeks so the area needs to be kept clean during this period.

HEAT APPLICATIONS: After 48 hours, the use of moist heat to the outside of your face along with stretching the mouth open will help get rid of swelling and the stiffness in your muscles. Swelling will take several days to resolve and may result in some bruising of the face and/or neck and limited mouth opening.

HEALING: Normal healing after tooth extraction should be as follows: The first two days after surgery are generally the most uncomfortable and there is usually some swelling. This may be accompanied by a sore throat. On the third day you should be more comfortable and, although still swollen, can usually begin a more substantial diet and begin returning to your normal routines. **The remainder of the post-operative course should be gradual, steady improvement.** If you don't see continued improvement, please call our office. If you are given a plastic irrigating syringe, **DO NOT** use it for the first five days. Then use it daily 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. Occasionally the teeth in the area of the surgery may ache. This is temporary and usually resolves in a short amount of time.

STITCHES: Stitches may have been placed to aid in healing, minimize bleeding and to aid in maintaining hygiene. They are usually the type that dissolves. They should start to fall out after one week. If one falls out early in the healing period it is not generally replaced. If a stitch becomes loose it is easily removed and discarded. You will be told if you need to return for suture removal or if the dissolving process will take longer than average.

CHAPPED LIPS: The lips and corners of the mouth may become dry and crack. Vaseline or Chapstick should be used.

IT IS OUR DESIRE THAT YOUR RECOVERY BE AS SMOOTH AND PLEASANT AS POSSIBLE. COMPLIANCE WITH THESE INSTRUCTIONS WILL ADD TO YOUR COMFORT AND HASTEN RECOVERY. THESE INSTRUCTIONS ARE DESIGNED TO GIVE YOU AN UNDERSTANDING OF WHAT TO EXPECT AND HOW TO ENSURE A TROUBLE FREE RECOVERY PERIOD. IF YOU HAVE QUESTIONS ABOUT YOUR PROGRESS PLEASE CALL THE OFFICE. CALLING DURING OFFICE HOURS WILL AFFORD A FASTER RESPONSE TO YOUR QUESTION OR CONCERN. A 24-HOUR ANSWERING SERVICE IS AVAILABLE TO CONTACT THE DOCTOR FOR EMERGENCIES AFTER HOURS.