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.GENERAL DENTISTRY WITH SEDATION**

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POST-OPERATIVE INSTRUCTION

Surgery of the mouth is similar to surgery in other parts of the body and requires careful attention to post-operative instructions. Only by doing so will there be a minimal amount of after effect.

1. **DO NOT DISTURB THE WOUND WITH FINGERS OR BY SUCKING ON IT.** Remove the gauze sponges that have been placed in your mouth one hour after surgery. Place fresh ones as needed. No rinsing, spitting or sipping thru a straw the day of surgery as this will cause more bleeding. Rinsing with plain warm water is permissible starting the day after surgery. No mouthwash should be used the first week.
2. **SWELLING.** In an attempt to minimize the swelling which may occur later, use an ice bag ½ hour on and ½ hour off for the first 24-48 hours following surgery. Nibble on crushed ice or hold ice water in your mouth over the area of surgery. After the 48-hour period hot packs can be applied to keep the swelling down. The maximum amount of swelling normally occurs on the third day after surgery. Thereafter, swelling will slowly subside.
3. **PAIN.** We have found the most effective pain medication for dental pain to be Nuprin, Advil, or Motrin taken 2-3 tablets every 3-4 hours. The first tablets should be taken before the anesthetic disappears. When taking the medication be sure to drink at least ½ to a full 8 oz. glass of either water or milk. This will assure rapid assimilation by the body and minimize irritation to the stomach. This irritation may cause nausea and sometimes even vomiting, so be sure to take plenty of fluids with your medication. Do not use any product containing aspirin the first 24-48 hours as this may prolong bleeding. You may use an aspirin substitute such as Tylenol. Alcoholic beverages should not be taken with prescription medications.
4. **BLEEDING.** Some oozing of blood is normal following all procedures for 24-48 hours: however, excessive bleeding should be controlled. Place a sterile gauze, piece of clean white cloth, or dry tea bag directly over the wound. If you have orthodontic appliances (braces), a 2x2-inch piece of cut-up kitchen sponge works quite nicely and will not catch in your braces. Hold firmly for one hour by closing the teeth. Sit upright and remain quiet. Apply an ice bag to cheek on that side. Do not become alarmed or excited. If heavy bleeding does not subside, call us for further instructions.

5. **DIET.** Follow your own inclinations as to diet, but for your own comfort, stick to a soft-liquid diet. Keep taking nourishment. A diet high in protein and complex carbohydrates is best. Try not to skip a meal. Begin by eating soft foods such as heavy soup, milk shakes, soft-boiled eggs, cereals, etc. As soon as possible change to solid food. If you are a diabetic, maintain your normal diet and take your medications as usual. Vitamin supplements will help during the healing period. Drink plenty of liquids: dehydration must be guarded against when having oral surgery. If bowel habits are irregular, it is suggested to take a mild laxative such as milk of magnesia.
6. **ORAL HYGIENE.** Starting the day after surgery you should keep your mouth as clean as possible. You may brush your teeth and gums and may even brush over the stitches. Stitches often trap food and bacteria. The cleaner you keep your mouth the less chance of post-operative infections. You may use toothpaste, but not mouthwash. Rinsing the mouth vigorously with very warm water after brushing will help also. Clean your mouth thoroughly after each meal and before going to sleep. There may be an opening where the tooth was removed. As well as possible, this area should be rinsed following meals. If catching food in this opening is a problem, we can show you how to clean it with an irrigating syringe. This opening will gradually fill in with new bone tissue.
7. **ACTIVITIES.** Do not drive the day of surgery if you had intravenous sedation. Keep physical activity down to a minimum for a day or two and resume your normal activities as soon as possible after that.
8. **MEDICATIONS.** Take your prescriptions faithfully as directed. If you have been placed on an antibiotic, it is important that you take ALL of the tablets as directed.
9. **MISCELLANEOUS.** Pain in the ear, difficulty swallowing, difficulty opening and closing the jaws, sore throat, bruising of the skin, and slight temperature elevations for 24-48 hours are additional symptoms which occur with varying frequency. These findings are normal. If the corners of the mouth and lips are stretched, they may dry out and become cracked. The lips should be kept moist with cream or ointment. Other teeth will possibly ache temporarily. This is sympathetic (or referred) pain and a temporary condition. During the healing process, small sharp fragments of bone may work up through the gums. This process of “shedding” slivers and splinters of bone is Nature’s way of reshaping the ridge and may last anywhere from two weeks to several months. If there is difficulty with these, please call the office and let Dr. Sanders see you.
10. **PROLONGED NUMBNESS OF THE LOWER LIP.** After certain procedures, such as removal of the lower wisdom teeth, removal of cysts of the jaws, etc., the nerve in the lower jaw becomes unavoidably bruised. It may take several weeks to many months for feeling to return to the lip or tongue. It is rarely permanent.
11. **POST-OPERATIVE INFECTION (DRY SOCKET).** After removal of a tooth, the socket of the former tooth will fill in with a blood clot and usually heal normally in time as bone. If the socket becomes infected, irritated by noxious chemical irritants (smoke), or overly agitated the blood clot could become dislodged. Healing will occur but will be slower and more painful. You will experience moderate pain 2-3 days after the extraction that wasn’t there before. This condition is preventable and treatable. Do not smoke for three days following the extraction, and do not rinse or spit out for 24 hours. Rinsing or spitting out vigorously can dislodge this blood clot, and smoking can cause a localized infection of the area and also dislodge the blood clot. Please contact us if you feel that you have developed a dry socket.
12. **RETURN TO THE OFFICE FOR POST-OPERATIVE VISITS, AND FEEL FREE TO CONTACT US IF DOUBT ARISES AS TO YOUR PROGRESS AND RECOVERY.**