



## General Post-Operative Instructions

### BLEEDING

- Some oozing may occur normally for the first 24 hours and occasionally into the next day.
- Bite gently but firmly and constantly on a folded piece of gauze directly over the surgical site. Pressure helps to control bleeding. Also, a dampened tea bag (Lipton®, Salada®) may be placed against the site for an additional hour. Black tea contains tannic acid which helps with clotting.
- **Do not** sleep or eat with gauze in your mouth.
- Avoid spitting, rinsing, smoking, or using drinking straws for the first 24 hours as this may loosen the clot and cause more bleeding.

### DISCOMFORT

- Some discomfort is normal and may be experienced for a few days but should lessen each day.
- BEFORE the Novocaine (local anesthetic) is expected to wear off, take a non-aspirin (OTC) pain reliever such as Tylenol®, Motrin®, Advil®, or Aleve®.
- If you have never taken a prescription pain reliever before, start with half a pill and use this along with the OTC pain reliever.
- If taking prescription pain relievers, **do not** drive, operate heavy machinery, drink alcohol, or combine with other sedative medications (cold medications, sleeping pills, muscle relaxants, etc.).

### DIET

- For the first 24 to 48 hours, your diet should consist of soft foods, such as room-temperature soup, yogurt, scrambled eggs, pasta, pudding, mashed potatoes, etc. Avoid foods that are very warm/hot.
- Over the next several days, you may progress to more solid foods avoiding the surgical area(s).
- **Do not** use straws for 48 hours and avoid sharp, crunchy foods for a few days that may poke the surgical sites.

### SWELLING

- Swelling is normal after surgery. Keep your head elevated for the first 2 days.
- Apply ice packs to your cheeks (30 minutes on, then 30 minutes off) for 48 hours. Use ice early and often.
- Swelling usually peaks on the third post-operative day and at this time you may use a warm compress or heating pad to relieve the swelling. Heat becomes more effective than ice after 48 hours.

### REST

- Avoid exercising or other strenuous activity which may promote bleeding or increase swelling for 3-4 days.
- For patients who have had sedation: **do not** drive, operate heavy machinery, or make important decisions for 24 hours.
- All children should be well supervised by an adult for 24 hours after sedation.



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### JAW STIFFNESS

- Jaw stiffness and limited opening of the mouth are common after oral surgery and resolves in 5 to 10 days.
- Stick to soft foods and warm compresses to help relax the jaw muscles. Do NOT chew gum.

### ORAL HYGIENE

- Avoid commercial mouthwashes and peroxide rinses as they may break down the clot or slow the healing.
- Gum tissue will heal over the area and if food is trapped, an infection may occur.
- If you have been given a curved, plastic syringe, you may begin using this to rinse the extraction site after one week.
- Irrigate gently with the syringe filled with warm salt or plain water after all meals until the sockets have completely closed which may take 4-6 weeks.

### STITCHES

- Most stitches are dissolvable and won't require removal. However, if the stitches persist longer than two weeks (unless otherwise specified), please return to our office for their removal.
- Stitches should be kept clean with rinsing as they trap food debris and plaque.

### ANTIBIOTICS

- Use them as directed until your prescription is finished. Stopping antibiotics prematurely may encourage infection or bacterial antibiotic resistance.
- If you are taking birth control pills, you should use a back-up method of birth control until your next menstrual cycle as some antibiotics decrease the effectiveness of oral contraceptives.

### NAUSEA

- Nausea is common after intravenous/general anesthesia. Nausea can be avoided by avoiding narcotic pain relievers although some antibiotics or high dose ibuprofen may also cause nausea.
- If nausea develops, try to remain well hydrated, eat bland foods and use only Tylenol® for pain relief.

### PLEASE CALL OUR OFFICE AT (478-353-3053) IF:

- You experience any adverse reactions to prescribed medications (severe nausea, rash, hives, diarrhea, etc.).
- You do not see steady improvement in your pain symptoms or if severe pain develops, persists, or is throbbing in nature and does not respond to pain medication. This may indicate a "dry socket".
- You have heavy bleeding that cannot be controlled by biting on gauze.
- You have new pain, facial redness or swelling, jaw stiffness or trouble swallowing that is worsening after the third day.
- You have any questions.
- You require a follow-up appointment (ideally in 7 to 10 days).