BLEEDING

• Some ooze 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. It is sometimes helpful to bite on damp gauze, gauze dampened in a strongly steeped but cool black tea, or place a dampened tea bag (Lipton®, Salada®) against the site for an additional hour. Black tea contains tannic acid which helps with clotting. You may also bite on a dampened tea bag wrapped in gauze.
• You should change the gauze every 60 minutes until the bleeding has stopped. Changing the gauze too frequently will pull the clot off and stimulate more bleeding.
• If you wear any dentures, partial dentures or flippers, remove these prostheses so that you can apply direct gauze pressure to the surgical area.
• You no longer need to bite on gauze when there is only a light red or pink stain on the gauze.
• Some mild ooze may discolor your saliva or be seen on your pillow the following day.
• 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.
• Keep your head slightly elevated the first day while lying down (head above the heart).

DISCOMFORT

• Some discomfort may be experienced normally for a few days, but should lessen each day.
• BEFORE the Novocaine (local anesthetic) is expected to wear off, take a non-aspirin pain reliever such as Tylenol®, Motrin®, Advil®, or Aleve®.
• If your doctor has given you a prescription for a stronger pain reliever, it is only necessary to fill and take it if the over-the-counter (OTC) pain medication is not helping.
• 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 you are still uncomfortable, you may require more of the prescription pain medication and it is ok to alternate this with over-the-counter pain relievers.
• All types of pain medication are to be taken with water and a small amount of food to prevent nausea.
• 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

• Be careful eating and drinking until the Novocaine (local anesthetic) has worn off as you may spill or accidentally bite your lip or tongue.
• Begin with clear liquids and then progress to a softer diet as you feel comfortable.
• 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 surgery area.
• Do NOT use straws for 48 hours and avoid sharp, crunchy foods for a few days that may poke the surgical sites.

ORAL HYGIENE

• A toothbrush with regular toothpaste may be used carefully, avoiding the surgical area on the first day. Let the toothpaste drip out of your mouth the first day rather than forcefully spitting or rinsing.
• DO NOT rinse your mouth for 24 hours! Rinsing can cause bleeding.
• After 24 hours once the bleeding has stopped, begin gently rinsing with warm salt water (1/2 teaspoon of table salt in 8 ounces of water) after all meals and at bedtime for the next two weeks to keep food out of the area. Warm water is a great substitute for salt water if you are away from home.
• Avoid commercial mouthwashes and peroxide rinses as they may break down the clot or slow the healing.
• A hole where a tooth was may persist for up to 8 weeks. It is important to keep food debris out of the healing socket.
• 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 1 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.
SWELLING
• Swelling is normal after dental surgery. Commonly, the swelling may be peak 2 to 3 days after surgery and then begin to resolve but may last up to 5-7 days.
• Keep your head elevated for the first 2 days.
• Apply ice packs to your cheeks (30 minutes on and then 30 minutes off) for 48 hours. Use ice early and often.
• Frozen vegetables such as peas or corn, crushed ice in sandwich bags or ice bags are helpful. Wrap the ice in a light towel so that it is not directly on the skin and is adjacent to the surgical site(s).
• 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.
• Most children with simple extractions can return to school and normal activity the next day.

BRUISING
• Bruising along the jaw or on the face may be more apparent a few days after surgery and usually disappears within 1 to 2 weeks. With gravity, occasionally bruises may move down from the jaw or chin onto the neck or chest.
• Icing for the first 48 hours along with good clot formation will minimize your bleeding which may last 2 weeks.
• Bruising may be more profound if you take aspirin or other blood thinners.

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

STITCHES
• Most stitches are dissolvable (“melting” in 5 to 7 days) and won’t require removal with a few exceptions.
• If they persist longer than 2 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.

STRETCHING OF THE CORNERS OF THE MOUTH
• Keep these areas moist with antibiotic ointment or Vaseline® until healed.

NAUSEA
• If you have had sedation, the best prevention for post-surgery nausea is to have a glass of a clear liquid with sugar when you arrive home (flat ginger ale, sports drinks, etc.) and then slowly advance to soft foods (soup, pasta, etc.).
• 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 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).