



INSTRUCTIONS

ACTIVITY

- Limit your activity for 24 hours.
- No exercise or strenuous activity while bleeding.
- No driving for 24 hours.
- **DO NOT SMOKE** for 1 week following your surgery. Smoking increases the risk of dry socket, infection, and prolongs healing.

CARE OF OPERATIVE AREA

- Do not spit. Spitting can alter the clotting process and cause prolonged bleeding. A certain amount of bleeding is to be expected following surgery.
- Apply a light ice bag to the face over the operative area for 30 minutes each hour while awake for the first 48 hours after surgery. Applying ice packs may also help relieve discomfort.

If bleeding occurs...

- For MODERATE to HEAVY bleeding: Bite on two gauze pads folded in quarters placed over the bleeding socket for 30 minutes. Continue changing gauze every 30–45 minutes until bleeding subsides or gauze becomes saturated. Another option is to bite on a moistened tea bag placed over the bleeding socket. This will also help to slow the bleeding. The site may still ooze for a few days. Restrict activity to sitting or semi-reclining with head elevated.
- Unless bleeding is excessive, swallow the saliva that accumulates in your mouth.
- Do not brush or rinse the mouth the day of surgery. This may stimulate bleeding.
- Tomorrow, begin gentle warm salt water rinses (1/2 teaspoon of salt per 8 oz of water). Rinse four times a day for 1 week. Treat the surgical site gently, but keep it clean. Keeping your entire mouth clean lessens the chance of post-operative infection.
- You may gently clean teeth around the surgical area with a soft toothbrush.
- Sinus precautions: If you have been told that you have sinus exposure, the following precautions should be taken:
 - **DO NOT BLOW YOUR NOSE.** If you need to, use a decongestant or nasal spray.
 - **SNEEZE WITH YOUR MOUTH OPEN.**

DIET

- Cool foods may be eaten immediately following surgery.
- Light soft foods and plenty of liquids are advisable.
- No hot food or hot liquids today.
- Drink plenty of cool liquids.
- Avoid foods that are spicy or difficult to chew.
- Do not use a straw.
- No alcoholic beverages for 24 hours or while taking your post-operative narcotic prescription.



INSTRUCTIONS (CONT.)

MEDICINES

- See home medication reconciliation form.
- If you have not been given a prescription, take an analgesic, such as aspirin, Tylenol®, Motrin®, Anacin®, Empirin®, Bufferin®, etc., ensuring you stay in the manufacturer's recommendations for total amount of acetaminophen consumption.
- If you have been given a prescription, have it filled immediately and use as directed, if necessary.
- If you have been prescribed medication, it has been sent electronically to your pharmacy. Please reference the Medication Reconciliation Sheet.

No prescriptions will be refilled after office hours. Refill requests must be made during office hours Monday-Friday 9:00 AM-4:00 PM. This process has been instituted due to the increasing incidence of drug abuse.

FOLLOW-UP INSTRUCTIONS

- Return to our office for suture removal and follow-up care as instructed. Most of the sutures that we use will dissolve on their own.
- Call to schedule a follow-up appointment with your doctor on: _____

POSSIBLE OCCURRENCES FOLLOWING SURGERY

- **Vein Pain/Discoloration:** Occasionally the vein used to administer intravenous drugs becomes irritated or swollen. The affected vein may become hard and discolored and be tender for several weeks or months. Please contact the Surgicenter if this occurs.
- **Pain:** This is the most common post-operative problem and the causes can be numerous. If your pain persists after the wound has healed, call your oral surgeon.
- **Bleeding:** Bleeding is a normal occurrence after any surgery. If heavy bleeding persists, contact your oral surgeon.
- **Swelling/Bruising:** Swelling and bruising occurs after most surgical procedures. It is usually more pronounced when more complicated procedures have been performed (e.g., removal of impacted teeth).
- **Numbness (Paresthesia or Anesthesia):** Often operations are performed very close to the nerves. The post-operative swelling may cause numbness or tingling of the chin or lip. This condition is most often temporary and usually corrects itself. If numbness persists beyond a few days, contact your oral surgeon.
- **Fever:** A slight fever for 24-48 hours after surgery is common. If it persists or is over 101 degrees, consult our office.
- **Bone Fragments:** Small, sharp pieces of bone occasionally form in the surgical areas, loosen, and work through the gum. These fragments, which are not roots, usually work out on their own accord. However, if you need our assistance, please call your oral surgeon and make an appointment to have them removed.
- **Stiffness (Trismus):** The inability to move the jaw easily after surgery is a common occurrence. It is usually a result of swelling. Exercise and chewing gum are aids to limbering up the muscles involved. If stiffness is severe and associated with a fever, consult your oral surgeon.
- **Nausea:** Nausea and vomiting are common side effects following anesthesia. Drink small sips of clear liquids (Sprite® and ginger ale) every 30 minutes if the problem occurs. Eating food before taking your pain medication may help to prevent nausea. If nausea persists, please call your oral surgeon.



INSTRUCTIONS (CONT.)

CALL 911 IF YOU EXPERIENCE:

- Chest pain
- Shortness of breath

POSSIBLE OCCURRENCE AFTER ORAL SURGERY:

- Some bleeding and/or swelling
- Sore throat (most common after third molar surgery)
- Occasional bruising or discoloration of the face
- Temporary stiffness of the jaw

CALL THE SURGEON IMMEDIATELY FOR ANY OF THE FOLLOWING:

- Heavy and/or persistent bleeding that does not respond to the instructions listed above
- A fever greater than 101 degrees Fahrenheit
- A fever associated with severe jaw stiffness
- Excessive swelling
- Persistent nausea/vomiting

Follow all instructions given to you by your physician and nurse. If you have any questions about these instructions, please call your physician's office.

NOTE TO PATIENT'S ESCORT: If the patient has received outpatient general anesthesia, it is MOST important that you, the escort, watch the patient carefully for a minimum of 24 hours after leaving the facility. He or she should not be allowed to drive or even walk around unescorted because reaction times can be slowed after general anesthesia.

The above discharge instructions have been verbally reviewed with the patient and escort. I have complete understanding of all home care instructions and medications.

Patient's or Legal Representative's Signature

Date: _____

Witness' Signature (Nurse's Signature)

Date: _____