

Advanced Dental Specialists
360.253.9792

Excel Dental
360.666.5700
1401 NW 1st Street, Ste 120
Battle Ground, WA 98604

Implant, Wisdom Teeth, & Extraction Surgery Post-Op Instructions

Post-operative care is most important to hasten healing and recovery. Expect some swelling, stiffness and discomfort. Remember no two mouths are exactly alike. Be careful with well-intended advice. Feel free to call the office with any questions or concerns and discuss your questions with the person best able to effectively help you.

Dr. E. Burke Jardine
Cell: 503.479.8692
Email: dr.burke.jardine@gmail.com

During business hours please call one of the offices. If you call my cell during business hours I often am in the middle of a surgery and cannot answer. After-hours feel free to call, text, or email. If I don't answer, please leave a message.

- **Gauze** – The gauze should be placed over the surgical area and kept in place for 30 minutes.
- **Avoid the Wounded Area** – Vigorous Mouth Rinsing or touching the wound area following surgery should be avoided. This may cause bleeding by dislodging the blood clot that was formed.
- **Medications** – Take the prescribed pain medications as indicated as soon as possible. Take all medications with food. It should have at least as much substance as apple sauce. We deliver anesthetic and/or pain medicines for the patient to give them up to a few hours of coverage.
 - **Common Prescriptions**
 - **Amoxicillin** 500 mg tablets – These may have been prescribed to help with infection or eliminate an active infection. Often, I recommend taking an antibiotic pill with each meal (three per day) as opposed to one every eight hours.
 - **Clindamycin** 300 mg tablets – Similar to Amoxicillin in purpose, and frequency.
 - **Ibuprofen** 600 mg tablets – taken every six hours for about a week or so as needed.
 - **Hydrocodone** 7.5 / 325 mg (a.k.a. Vicodin / Norco) – Take when you feel pain, which will generally occur every 3-4 hours for the first few days or so. After-which you should notice the time gradually increase until you don't need the stronger pain medicine at all.
 - **Percocet** 7.5/325 mg – Take similarly as Hydrocodone.
 - **Promethazine** 25 mg – This is for nausea or vomiting. Occasionally people will experience after surgery and may need to take this medication.
- **Rinsing** – Rinse the mouth with saltwater rinses about eight to twelve times per day.
- **Restrict Activities** – Restrict your activities the day of surgery and resume normal activity when you feel comfortable.
- **Ice Packs / Moist Heat** – Place ice packs on the sides of your face where the surgery was performed. After 2-3 days have passed, you may want to try to alternate the cold ice

packs with moist, hot towels to help swelling resolve. Some people report cold helps, or moist heat helps, or sometimes neither.

- **Avoid Opening** – Avoid opening the mouth more than about an inch until the swelling and pain has subsided. This will possibly be up to a week or so. Opening wide can tear the sutures out and disrupt healing.

Bleeding

A certain amount of bleeding is to be expected following surgery. Slight bleeding, oozing, or redness in the saliva is not uncommon. A little amount of blood mixed with saliva can appear like a lot more blood. Excessive bleeding may be controlled by first rinsing old clots from your mouth, then apply pressure by placing a slightly dampened gauze pad over the area. Repeat if necessary. If bleeding persists, bite on a moistened tea bag for 30 minutes. The tannic acid in the tea bag helps to form a clot by contracting bleeding vessels. To minimize further bleeding, do not become excited, sit upright, open wide, laugh, and avoid exercise. If bleeding does not subside, call for further instructions.

Swelling

Swelling is expected. In fact, this is your body's normal reaction. Your mouth and cheeks need to swell some in order to allow the white blood cells to travel to the surgical area. The swelling may take a day or so to become apparent and will usually reach its maximum by day three or four after surgery. Swelling may be minimized by the immediate use of ice packs. Apply the packs to the sides of the face while awake and left continuously for 36 hours. After 36 hours ice has minimal benefits. After 36 hours apply moist warm heat (wet hand towels, wring out and microwave until very warm, but not burning to the touch). The moist heat will help allow your body to clean up and remove the healing debris. If swelling or jaw stiffness has persisted for several days, there is no cause for alarm. This can be a normal reaction to surgery.

Pain

For moderate pain, take 600 mg of Ibuprofen (Motrin / Advil / Ibuprofen). This may be taken every six hours. For severe pain supplement the Ibuprofen with Norco or Percocet. This medication may be taken with Ibuprofen. It may be taken every 3-4 hours, so in a sense if the Ibuprofen six-hour schedule and Norco 3-4-hour schedule are followed, it is almost like alternating the medications. The prescribed pain medication will likely make you groggy and slow down your reflexes. Do not drive an automobile, or work around machinery while taking medication. Avoid alcoholic beverages. Pain or discomfort following surgery should subside more and more every day. Often you will see a significant improvement on the fourth and especially fifth day following surgery. If pain persists, it may require attention and you should call the office. If you feel you have progressively improved for several days and about the third day suddenly the pain severely worsens, you may have developed a dry socket. If you suspect a dry socket around the third day, call the office for more information.

Antibiotics

If you have been prescribed antibiotics, take the tablets or liquid as directed to prevent infection. It usually helps to take antibiotics with food. Discontinue antibiotic use in the event of a rash or other unfavorable reaction. Call the office if you have any questions.

Diet

After sedation, liquids should be initially taken. Often, we recommend avoiding drinking with a straw. If sutures were placed, you may drink with a straw. You may eat anything soft by chewing away from the surgical sites. High calorie, high protein intake is very important. Nourishment should be taken regularly. You should prevent dehydration by taking fluids regularly. Your food intake will be limited for the first few days. You should compensate for this by increasing your fluid intake. At least 5-6 glasses of liquid should be taken daily. Try not to miss a single meal. You will feel better, have more strength, less discomfort, and heal faster if you continue to eat.

Keep the Mouth Clean

Be very careful swishing and rinsing. Wait a day after surgery and begin rinsing the mouth about five to six times per day until mouth is healed. Saltwater rinses can help speed up the healing. Mix a teaspoon of salt with a cup of water and gently rinse the mouth. In some cases, discoloration of the skin follows swelling. The development of black, blue, green, or yellow discoloration is due to blood spreading beneath the tissues. This is a normal post-operative occurrence, which may occur 2-3 days post-operatively. Moist heat applied to the area may speed up the removal of discoloration.

Nausea and Vomiting

In the event of nausea and / vomiting following surgery it is often from either swallowing too much blood from the surgery, or the medication is too strong for the stomach. Vomiting from blood occurs most often within a day or so after surgery, while vomiting from the medication can take several days. First look to see if the vomit is mostly red blood cells (it kind of looks like dark brown granulated sugar). If so, go ahead and continue taking pain and antibiotic medications along with the anti-nausea medication (Zofran or Promethazine). If it is likely from strong pain medicine, consider cutting the tablet in half and make sure you eat with food. If you cut the tablet in half, you can take the tables twice as often. If nausea and vomiting persist, do not eat anything by mouth for at least an hour, including prescribed medicine. You should then sip on sprite, tea, or a ginger ale. You should sip slowly over a 15-minute period. When the nausea subsides, you can begin taking solid foods and the prescribed medicine. If nausea or vomiting persists, please call the office.

Sutures

Sutures are often placed to accelerate healing. Do not open your mouth more than one inch until the swelling and pain has subsided. The sutures will need to be removed about 10 – 14 days after the surgery. If one becomes loose, do not be alarmed. Carefully remove and discard. Generally, if pain does not significantly increase, you are fine to give the area time to heal.

Numbness / Paresthesia

If numbness of the lip, chin, or tongue occurs, there is no cause for alarm. This is usually temporary in nature. If numbness persists the next morning after surgery, please call the office. Often a special medication will be prescribed to help the numbness resolve as quickly as possible. While numb you should be careful to avoid accidentally biting your lip, cheek, or tongue.

Complete Healing

It generally takes a week or two for all pain symptoms to resolve. After the two-week mark, and the sutures have been removed, you may notice a shallow pit in the gums where it is healing. The tissue lays down a bottom layer and then increases thickness. Often it will take up to two weeks for all pain to resolve. Then it will take about three months for the tissue to full fill in, and up to a year for the bone to fully heal.

Bone Grafting

Grafting is often done in areas to prevent the bone from rapidly deteriorating. It is done to prepare an area for a future implant. Grafting may be done to protect the nerve and reduce the likelihood of long-term numbness (paresthesia) when the extracted teeth are very close to the nerve. Grafting may also be done when the extracted tooth is large and the desire to prevent a big hole in the jaw from occurring. In all these cases, it is very important to take the prescribed antibiotics. Expect additional swelling and redness as the body reacts to the hormones in the bone graft which stimulate the body to grow more blood vessels and start creating vital bone.

Bony Projections or Bone Splinters

Occasionally patients may feel hard projections in the mouth with their tongue. Usually they are fragments of the bony walls that supported the tooth. Many people mistakenly think they are fragments of the tooth. These can be surprisingly painful. Usually they will dissolve or fall out on their own. If not, they can be removed. Often people will wait several days and monitor them, once they've noticed them. If the pain and discomfort get too severe, please contact the office. We may decide to go ahead and remove the fragment to speed healing.

Other Complications

Slight elevation of temperature following surgery is not uncommon. If the temperature persists, notify the office. Tylenol or ibuprofen can be taken to reduce the fever.

You should be careful going from the lying position to standing. It may be difficult to take fluids or eat properly. Taking medication can make you dizzy. You could get lightheaded when you stand suddenly. Before standing, sit up for a minute or so first.

If the corners of your mouth are stretched, they may dry out and crack. Your lips should be kept moist with an ointment, such as Vaseline.

Sore throats and pain while swallowing is not uncommon. The muscles get swollen. The normal act of swallowing can then become painful. This will typically subside in 2-3 days. Stiffness (Trismus) of the jaw muscles may cause difficulty in opening the mouth for a few days following surgery. This is a normal post-operative event which will resolve with time.