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PRE-OPERATIVE INSTRUCTIONS

Before oral surgery and general anesthesia or IV sedation

Avoid the use of aspirin or aspirin products such as Anacin, Bufferin, or Alka-Seltzer, for at least three days prior to surgery; Tylenol is OK to use instead.

If you are going to have **local anesthesia only**, you may eat prior to your appointment and do not need somebody to accompany you to the office unless you are under 18.

If you have general anesthesia or intravenous sedation, a responsible person **must** accompany you, remain in the reception area, and take you home. You **must NOT drive** a car or operate machinery for 24 hours after intravenous sedation or general anesthesia.

It is also recommended that a responsible person be with the patient at home the first day.

Please read these additional important pre-operative instructions:

1. If you chose to have general anesthesia or intravenous sedation, do not have anything to eat or drink, including water, after Midnight the night before.
2. If you take medications regularly, you should take them with small sips of water at the regular time. Also, any additional medications, which might be prescribed to you by our office, should be taken with small sips of water as directed.
3. Wear comfortable, loose fitting clothing with short sleeves or sleeves that can easily be rolled up above both elbows.
4. Do not wear jewelry, including any nose, mouth, tongue or other facial piercings or makeup, including nail polish or eye cosmetics. Please tie long hair back.
5. If you wear contact lenses, please remove them prior to your appointment.
6. No smoking the morning of surgery and preferably for at least one week afterwards.
7. Your mouth and teeth should be well cleansed to help avoid infection.
8. Do not ignore a head or chest cold when oral surgery is to be performed. Please call the office if you have any symptoms, as an appointment change may be necessary.
9. If you wear dentures, please do not use denture adhesive.

POST-OPERATIVE INSTRUCTIONS

Following Third Molar (Wisdom Tooth) Removal

It is our desire that your recovery be as smooth and pleasant as possible. Following these instructions will assist you, but if you have questions about your progress, please call the office. Please try to call during office hours; however a 24-hour answering service is available for after hours contact with a doctor. **The after hours telephone number is (603) 433-5405.**

The removal of impacted teeth is a serious surgical procedure. Post-operative care is very important. Unnecessary pain and the complications of infection and swelling can be minimized if the instructions are followed carefully.

Immediately Following Surgery:

- The gauze pad placed over the surgical area should be kept in place for one hour. After this time, the gauze pad should be removed and discarded.
- Vigorous mouth rinsing or touching the wound area following surgery should be avoided. This may initiate bleeding by causing the blood clot that has formed to become dislodged.
- Take the prescribed pain medications as soon as you begin to feel discomfort this will usually coincide with the local anesthetic becoming diminished.
- Restrict your activities the day of surgery and resume normal activity when you feel comfortable.
- Place ice packs to the sides of your face where surgery was performed. Refer to the section on swelling for more details.

Bleeding

Bleeding after surgery may continue for several hours. Bite down firmly on the gauze packs that have been placed over the surgical areas, making sure they remain in place. Do not change them for the first hour unless the bleeding is not being controlled. If active bleeding persists after one hour, place enough new gauze to obtain pressure over the surgical site for another 30-60 minutes. The gauze may be changed as necessary and may be dampened and/or fluffed for more comfortable positioning.

Intermittent bleeding or oozing is normal. It is typical for bleeding to continue for a few hours after simple extractions and for several (6-10) hours after more complex surgery such as removal of impacted teeth. Placing fresh gauze over the surgical areas and biting down firmly for 30-60 minutes may control it.

Maintaining the head in an elevated position (use of a recliner or several pillows) will also help to reduce bleeding and swelling. **Bleeding should never be severe.** If it is, it usually means that the packs are being clenched between your teeth rather than exerting pressure on the surgical areas. Try repositioning fresh packs. If bleeding persists or becomes heavy you may substitute a tea bag (soaked in hot water, squeezed damp-dry and wrapped in a moist gauze pad) for 20 or 30 minutes. If bleeding still remains uncontrolled, please call our office.

Swelling

The swelling that is normally expected is usually proportional to the surgery involved. Swelling around the mouth, cheeks, eyes and sides of the face is not uncommon. This is the body's normal reaction to surgery and eventual repair. The swelling will not become apparent until the day following surgery and will not reach its maximum until 2-3 days post-operatively. However, the swelling may be minimized by the immediate use of ice packs. Two Baggies filled with ice, or ice packs should be applied to the sides of the face where surgery was performed. The ice packs can be left on continuously while you are awake or placed on the affected side(s) 20 minutes on and 20 minutes off while awake. After 24-36 hours, ice has no significant beneficial effect.

If swelling or jaw stiffness has persisted for several days, there is no cause for alarm. This is a normal reaction to surgery. Thirty-six to 48 hours following surgery the application of moist heat to the sides of the face is beneficial in reducing the size of the swelling

Pain

Unfortunately, most oral surgery is accompanied by some degree of discomfort. If you have no history of allergy to non-steroidal anti-inflammatory medications like Ibuprofen (Motrin, Advil) or ketorolac (Toradol), we recommend taking this prior to the local anesthetic wearing off.

Follow the instructions on the medication bottle if you are taking over the counter pain medication or as Dr. De Tolla prescribed.

If pain is more severe, a narcotic pain medicine may be needed. Please take any narcotic medication as prescribed.

In general, we suggest Ibuprofen four times a day as needed with Extra Strength Tylenol or equivalent in between Ibuprofen doses if needed. Try to take the narcotics primarily at night and never when driving or operating potentially dangerous machinery or equipment. The prescribed pain medicine will make you groggy and will slow down your reflexes. Avoid alcoholic beverages. Pain or discomfort following surgery should subside more and more every day. If pain persists, it may require attention and you should call the office.

There is no interaction between the prescribed narcotic pain medicine and Ibuprofen or ketorolac (Toradol). Be aware that narcotic pain medicine may cause upset stomach, which may include nausea, vomiting or constipation. Also, these should not be taken if you must operate any machinery or a motor vehicle. Effects of pain medicines vary widely among individuals. Remember that the most severe discomfort is usually within the first six hours after the anesthetic wears off, after that your need for medicine should lessen.

Exercise Care

Do not disturb the surgical area on the day of surgery. DO NOT RINSE VIGOROUSLY or SPIT for at least 48 hours following surgery. Do not probe the area with any objects or your fingers. You may brush your teeth gently. DO NOT SMOKE for at least 48 hours, since it is very detrimental to healing, as well as to your overall health.

Diet

After general anesthetic or I.V. sedation, liquids should be taken at first.

On the day of surgery, we ask that you avoid hot foods that will prolong bleeding. Cold soft foods (such as ice cream, milk shakes, Instant Breakfast, puddings and yogurt) are ideal. Over the next several days you can progress to solid foods at your own pace. Try chewing away from the surgical sites. It is important not to skip meals! If you take nourishment regularly, you will feel better, gain strength, have less discomfort and heal faster. Avoid foods like nuts, sunflower seeds, popcorn, etc., which may get lodged in the socket areas. Drink plenty of fluids from a glass and do not use a straw as extraction site healing can be disturbed dislodging the blood clot.

High calorie, high protein intake is very important. Nourishment should be taken regularly. You should prevent dehydration by taking fluids regularly. Your normal 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.

If you are diabetic, maintain your normal eating habits as much as possible and follow our instructions or those from your physician regarding your insulin schedule.

Fainting Precaution: If you suddenly sit up or stand from a lying position you may become dizzy, especially if you have not eaten or kept up your fluid intake. Therefore, immediately following surgery, if you are lying down, make sure you sit for at least one minute before standing.

Keep Your Mouth Clean

No rinsing of any kind should be done until the day following surgery. You can brush your teeth the night of surgery but rinse gently. The day after surgery you should begin rinsing at least 4-5 times a day especially after eating with one-half teaspoon of salt dissolved in an 8 ounce glass of warm water. Avoid heavy spitting.

Discoloration

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 the discoloration.

Antibiotics

If you have been placed on antibiotics take the tablets or liquid as directed. Antibiotics will be given to help prevent infection. Discontinue antibiotic use in the event of a rash or other unfavorable reaction and notify our office. Call the office if you have any questions.

Nausea and Vomiting

In the event of nausea and/or vomiting following surgery, do not take anything by mouth for at least an hour including the prescribed medicine. You should then sip on coke, tea or ginger ale. You should sip slowly over a fifteen-minute period. When the nausea subsides you can begin taking solid foods and the prescribed medicine.

Normal Healing and Dry Sockets

Normal healing after tooth extraction should be as follows: The first day of surgery is usually the most uncomfortable and there is some degree of swelling and stiffness. The second day you will usually be more comfortable and, although still swollen, you can usually begin a more substantial diet. From the third day on, gradual, steady improvement should mark the remainder of your post-operative course. If a **DRY SOCKET** occurs (loss of blood clot from socket, usually on the 3rd to 5th day), there is a noticeable, distinct, persistent throbbing pain in the jaw, often radiating toward the ear and forward along the jaw to cause other teeth to ache. If you do not see steady improvement during the first few days after surgery, don't suffer needlessly. Call the office and report symptoms so you can be seen as soon as possible. A medicated dressing is often placed to decrease pain if medications alone do not help.

Sinus Precautions

Some procedures in the back part of the upper jaw may involve entry into the sinus cavity. If you are advised of this following your surgery, please follow these precautions for 10 days after the surgery. Do not blow your nose or sneeze holding your nose. Sneeze with your mouth open. Do not drink with straws and do not spit. Scuba diving and flying in pressurized aircraft may also increase sinus pressure and should be avoided. Decongestants such as Drixoral, Dimetapp, or Sudafed will help reduce pressure in the sinuses. You may also be given a prescription for antibiotics. Please take these as directed. Anything that causes pressure in your nasal cavity must be avoided. Avoid "bearing down"—as when lifting heavy objects, blowing up balloons, playing musical instruments that require a blowing action or any other activity that increases nasal or oral pressure. Smoking must be stopped. If necessary Dr. De Tolla can prescribe Nicoderm patches.

Sutures

Sutures are placed the area of surgery to minimize post-operative bleeding and to help healing. Sometimes they become dislodged; this is no cause for alarm. Just gently remove the suture from your mouth and discard it. The sutures will usually dissolve on their own approximately one week after surgery. If necessary, the removal of sutures requires no anesthesia or needles. It takes only a minute or so, and there is no discomfort associated with this procedure.

Additional Post-Operative Considerations:

- If numbness of the lip, chin, or tongue occurs there is no cause for alarm. As stated before surgery, this is usually temporary in nature. You should be aware that if your lip or tongue is numb you could bite it and not feel it so be careful. Call our office if you have any questions about this. We would like to be informed of post-operative numbness so we can help make sure it resolves.
- Slight elevation of temperature immediately following surgery is not uncommon. Tylenol or ibuprofen should be taken to reduce the fever. If the elevated temperature or fever persists, notify the office.
- Occasionally, patients may feel hard projections in the mouth with their tongue. They are not roots; they are the bony walls, which supported the tooth. These projections usually smooth out spontaneously. If not, Dr. De Tolla can remove them. Occasionally, small slivers of bone may work themselves out during the first week or two after surgery. This is not unusual.
- 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 or lip balm.
- Sore throats and pain when swallowing are not uncommon. The muscles get swollen. The normal act of swallowing can then become painful. This will subside in 2-3 days.
- Stiffness (Trismus) of the jaw muscles may cause difficulty in opening your mouth for a few days following surgery. This is normal post-operative event, which will resolve in time.
- Retainers may be worn after surgery when it is comfortable for you. We recommend leaving them out at least the first few days after surgery.
- The pain and swelling should subside more and more each day following surgery. If your post-operative pain or swelling worsens or unusual symptoms occur call our office for instructions.
- There will be a cavity or small hole where the tooth was removed. The cavity will gradually over the next month fill in with the new tissue. In the mean time, the area should be kept clean especially after meals with salt-water rinses or a toothbrush.
- Your case is individual and no two mouths are alike. Do not take seriously well-intended advice from friends. Discuss your problem with the persons best able to effectively help you: Dr. De Tolla or a member of his patient care team.
- Brushing your teeth is okay—just be gentle around the surgical sites.
- If you are involved in regular exercise be aware that your normal nourishment intake is reduced exercise may weaken you. If you get light headed stop exercising.

EXTREMELY IMPORTANT

We will make every effort to help expedite your healing process and ensure that your healing is progressing normally. However, to do that we must be kept informed of your progress. If, after surgery, there is any question about how you are healing, please contact our office. If, after 72 hours you do not feel better, with decreased swelling or pain, please contact our office.

It is our desire that your recovery be as smooth and pleasant as possible. Following these instructions will assist you, but if you have questions about your progress, please call the office. Please try to call during office hours; however a 24-hour answering service is available for after hours contact with a doctor. **The after hours telephone number is (603) 433-5405.**