



ORAL AND MAXILLOFACIAL SURGERY
16511 goldenwest st. #109 huntington beach ca 92647

Post-Operative Instructions

Your cooperation with the following instructions will go a long way toward helping you have a smooth and uneventful post-operative course.

BLEEDING: will be under control by the time you leave our office. Some oozing or blood-tinged saliva may persist for up to 24 hours. Should excessive bleeding occur, it may be controlled with pressure. Apply a folded gauze pad over the area and bite firmly for 30 minutes. This may be repeated if necessary. Sleeping with the head of bed elevated above the level of the heart for the first two post-operative nights will minimize bleeding and swelling.

PAIN: is best controlled by the medications prescribed. They are most effective when taken before the local anesthesia diminishes and normal sensation returns to the area. Do not take pain pills on an empty stomach. Over the counter pain medication (Motrin or Tylenol as was discussed with the doctor) should alleviate most pain, should be taken throughout your recovery. Narcotic pain medication such as codeine or hydrocodone may cause nausea, vomiting, drowsiness, dizziness, itching or constipation. If these side effects occur, discontinue the medication. You may take an alternative over the counter pain medication if necessary or call our office for assistance.

SWELLING: may occur immediately and/or increase gradually over 24-48 hours. Swelling from the surgical procedure will maximize at 48-72 hours. Ice packs applied externally to the area at 20 minutes intervals throughout the day of surgery may help control swelling.

NAUSEA: may result from a general anesthetic or the drugs prescribed for pain. Drinking a small glass of a carbonated beverage will generally control mild nausea.

DIET: soft foods and liquids will be required for 24-48 hours following surgery. Avoid hot, spicy foods. Do not drink through a straw or smoke (if you do) for at least 48 hours. If you had surgery on only one side of the mouth, favor the other side while chewing for the first few days.

ORAL HYGIENE: should not be neglected. Brush your teeth as usual and rinse with warm salt water after each meal beginning gently the night of surgery. Brush gently in the surgical area.

ACTIVITY: should be restricted to a minimum for the first 2-3 days. To minimize stiffness and stimulate circulation, exercise the jaw periodically by opening and closing. Restricted jaw opening can occur and usually requires 7-14 days to return to normal. Strenuous work or exercise may promote bleeding. If you have had a general anesthetic or sedation, we must require that you be accompanied home by a responsible adult. Under no circumstances are you to drive a car or operate heavy machinery for at least 24 hours.

FEVER: after surgery it is normal for the body temperature to be slightly elevated for 24 hours.

SIDE EFFECTS: such as an ear ache, hiccups, temporary ache of adjacent teeth, restricted mouth opening, stretching or cracking at the corners of the mouth or discoloration of the skin may occur postoperatively. These



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are temporary conditions which will improve as healing progresses.

BRUISING: and soreness occasionally develop in the area of the intravenous injection. For arm soreness, place a warm moist cloth over the area. If this persists contact our office.

NUMBNESS OF THE LIP AND TONGUE: occasionally follows surgery. This is usually transient and no cause for alarm.

BONY EDGES: After teeth are extracted, you may feel hard projections in the area and think they are pieces of tooth. This is usually the hard, bony partition which surround the roots of the teeth. These generally work themselves out. If not, return to our office for their simple removal.

EMERGENCIES: Please feel free to contact our office, regarding any unusual occurrences or questions. The doctor can always be reached for emergencies (such as profuse bleeding, uncontrolled pain, persistent nausea and prolonged elevated temperature.)