



Post- Operative Care Instructions

ORAL SURGERY Including: *Extractions *Dental Implants *Periodontal Surgery

Bleeding: Expect some bleeding during the next 24-48 hours and understand that the area may not look smooth for several weeks. Keep in mind that any bleeding you see is mixed with saliva and usually 90% of what appears to be blood is actually saliva.

Numbness: the numb feeling will last another 2-4 hours. Do not touch the surgical area. Avoid checking out the numbness of the lips, cheek, or tongue with your teeth as you could accidentally bite yourself. The tissue may appear rough and puffy, however it should heal nicely and become smooth in 10-14 days. Avoid hot beverages to avoid burning the area which is numb. Keep in mind when drinking, the mouth may not posture itself as one would expect, and you may make a mess.

Discomfort: Ibuprofen (Motrin, Advil) is the first choice for pain control if your physician has not put any restrictions on its use due to your other medications. Consider the maximum dose of ibuprofen 600mg 3 times every 24 hours. If this is not sufficient to control pain, add Tylenol 1000 mg 3 times every 24 hours, taken at the same time as ibuprofen or staggered times. These two medications work differently and combined are considered the best option for pain control. Consider continuing ibuprofen as noted if there is some discomfort. Discomfort indicates inflammation; controlling inflammation will enhance healing.

Activity: Limit activity today and consider slowly adding activities tomorrow if the activities are not strenuous. Be cautious for two weeks to ensure good healing.

Diet: Do not eat on the side of the mouth of surgery for three weeks as this will disrupt the sutures holding the membrane in place which is holding the bone graft in place for the bony ridge preservation. Avoid crunchy foods and sticky foods in general for three weeks as they may find their way to the surgical site and disrupt healing. NO drinking through a straw, spitting, or nose blowing as they all create a suction that will slow and interrupt the healing process.

Medication: the source of the infection has been removed and an antibiotic may be prescribed to eliminate any residual microscopic infection in the bone that could not be removed during surgery, and to enhance healing. Take the antibiotic for the prescribed number of days unless GI upset, or any other reaction occurs. With any complications, discontinue the antibiotic and contact Dr. Danner, the Emergency Room, or your physician.

Smoking/Vaping: Both will significantly impede healing and should be stopped during the recovery process.

Oral hygiene: Do not brush, floss or waterpik the surgical area or the teeth in front or behind the surgical site. Do not touch the area with your fingers or tongue. Any contact with the surgical area will disrupt the healing process and could lead to complications of the delicate healing that is needed during the next 4 weeks. No spitting, nose blowing, kissing or any intimate activities involving the mouth, as this will create a suction that will slow and interrupt the healing process. Brush and floss the rest of the mouth as usual and use AO Gel as described specifically for you to keep the mouth clean.

Post operative appointments: Typically scheduled 3 weeks after surgery to evaluate healing progress, remove sutures & membrane with topical anesthetic and establish home care instructions for optimum healing.

For any questions following oral surgery, please call or text the office at (330) 494-6016