LA JOLLA

ORAL AND FACIAL SURGERY

POST OPERATIVE INSTRUCTIONS

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GUIDE FOR TAKING MEDICATIONS

___ **Norco** (hydrocodone/acetaminophen)

This is pain medication. Take 1-2 every 6 hours for the first 24 hours after surgery. Then take 1-2 every 6 hours as needed.

___ **Vicoprofen** (Ibuprofen/hydrocodone)

This is pain medication. Take 1-2 every 6 hours as needed for pain.

___ **Percocet 5/325 mg** (acetaminophen/oxycodone)

This is pain medication. Take 1-2 every 6 hours as needed for pain.

___ **Tylenol #3 with Codeine** (apap/codeine)

This is pain medication. Take 1-2 every 6 hours as needed for pain.

___ **Motrin 800mg** (Ibuprofen)

This is a pain medication/anti- inflammatory. Take 1 every 8 hours as needed.

___ **Amoxicillin 500mg**

This is an antibiotic. Take 1, three (3) times a day (breakfast, lunch, and bedtime)

until gone.

___ **Keflex 500mg (**cephalexin)

This is an antibiotic. Take 1, four (4) times a day (breakfast, lunch, dinner, and bedtime) until gone.

___ **Z-Pack** (azithromycin 250mg)

This is an antibiotic. Take 2 the first day, then 1 a day for the next four (4) days.

___ Clindamycin 150mg or 300mg

This is an antibiotic. Take 1, four (4) times a day (breakfast, lunch, dinner, and

bedtime) until gone.

___ Augmentin 875 mg

This is an antibiotic. Take 1, two (2) times a day until gone.

___ **Medrol Dosepak** (methylprednisolone dosepak)

This is a steroid to help reduce swelling. Take as directed on package insert.

___ **Peridex** (chlorhexidine gluconate)

This is a mouth rinse, swish ½ capful for 1 ½ minutes then gently expectorate (spit).

Use after breakfast and at dinner time.

SUGGESTED PAIN MEDICATION SCHEDULE

For wisdom teeth patients or equivalent type procedures. Please keep in mind that everyone responds differently; managing the pain should be done according to each individual's response to the pain medication.

If Exparel was administered during your procedure:

For the first 48 hours take Ibuprofen 800mg every 8 hours or 2 Tylenol extra strength every 4 hours. If pain has decreased by day three, taper down to 400mg of Ibuprofen (2 of the 200mg over the counter Ibuprofen) or 2 Tylenol regular strength.

If Exparel was not used:

For the first 24-48 hours take 1-2 tablets of Norco every 6 hours. If pain persists, you can additionally take 400mg of Ibuprofen (2 of the 200mg over the counter Ibuprofen) or 2 Tylenol extra strength, 3 hours after taking Norco. If pain has decreased by day three, then taper the Norco and transition into 400mg of Ibuprofen or 2 Tylenol every 6-8 hours as needed.

***Alternating between Ibuprofen and Tylenol has been shown to be more effective than only taking one over the other.**

BASIC INSTRUCTIONS

Extraction of teeth or other oral surgeries are serious procedures. Post operative care is very important and to prevent complications, unnecessary pain, discomfort and expense, the following instructions should be followed closely to en-sure proper healing.

KEEP THE MOUTH CLEAN

Do not do any rinsing of the mouth or brushing of teeth until the next morning after surgery. The day after surgery use a solution of ½ teaspoon of salt in a glass of warm water as needed, not too vigorously, since this could dislodge the blood clot and delay healing. **You may begin brushing the tissues of the extraction site(s) one week after surgery, this will promote healing.** Stitches will dissolve in 5-10 days.

BLEEDING

Following oral surgery, spotted bleeding is not uncommon for the first few days, especially when you brush or rinse. Place a roll of gauze over the wound and bite down firmly, change every 30 minutes until the bleeding stops. Do not spit or rinse, this only makes the bleeding worse. Swallow normally; the fluids will not hurt you. If bleeding continues after trying the above, bite on a moistened black tea bag for 20 minutes. The tannic acid in the tea bag helps to form a clot by contracting bleeding vessels. Do not become excit-ed, but rather lie down with your head elevated on 3 pillows. Please note that blood mixed with saliva appears to be more blood than it actually is. Please call the office if the bleeding appears to be brisk or pumping.

FLUIDS & EATING

Dehydration must be guarded against when having oral sur-gery, since a patient's food intake is limited the first day. It is necessary to compensate for this by increasing the fluid intake (at least 5-6 glasses of fluid should be taken). Suggested food for the day of surgery: yogurt, pudding, jello, instant breakfast, milk, ice cream and applesauce. The day after surgery should consist of soft foods such as soups, eggs, cottage cheese, and pasta.

PLEASE NOTE: remove all gauze BEFORE eating.

PAIN

For severe pain, take medication prescribed for pain. The pre-scription for pain will make you a little groggy and will slow down your reflexes. Do not drive or work around machinery. Move about slowly because if you suddenly sit or stand from a lying position, you may become dizzy. For moderate pain, please take 800mg of Ibuprofen **OR** 500mg of Tylenol, 3 times a day with food. **Pain peaks around day 3 or 4, then gradual-ly subsides through the next 1-2 weeks.**

ANTIBIOTICS

If you have been given a prescription for an antibiotic, take the entire prescription as directed. The drugs you may have been given will help minimize swelling, reduce discomfort, prevent infection and promote healing. Discontinue only in the event of a rash or other unfavorable reaction, then call our office im-mediately. **PLEASE NOTE:** Antibiotics may reduce the effec-tiveness of birth control pills, therefore you should use other forms of birth control until you start your next pack of pills.

SWELLING & DISCOLORATION

These are normal responses following surgery, but can be partially avoided by using ice packs for the first **72 hours** after surgery. You should put them on for 20 minutes and take them off for 20 minutes, as much as you can. **Maximum swelling normally occurs around the 3rd day following surgery.** Warm, moist heat should be started following the 3rd day and continued until the swelling is down. Jaw stretches are recommended at this point, open as wide as you can, then close and repeat for a few minutes. These should be done several times a day until the jaw returns to normal. You may also develop black, blue, or yellow bruising in the tissue. This is due to a slight oozing of blood beneath the tissues and is perfectly normal. It should be treated the same as swelling, as well as, massaging the bruised area. Slight fever can be expected after surgery.

NAUSEA

In the event of nausea from taking pain medication, keep some-thing light in your stomach. Do not get up and move around more than necessary. Call our office if nausea persists.

IMPACTED OR BURIED TEETH

The following conditions are not uncommon with removal of these teeth: difficulty in opening your mouth due to muscle spasms. If a lower impaction was removed, you may have numbness of the lower lip or tongue on the side from which the tooth was removed. This is almost always a temporary condition. It is not disfiguring, but can be annoying. It may last from a few days to many months. Sores may develop at the corner of the mouth and these should be covered with a mild ointment such as Vaseline.

SHARP BONY EDGES

Occasionally patients will place their tongues on an operation site and feel a hard substance, which they think is a part of a tooth. It is the hard, bony wall that originally supported the tooth. Leave it alone and it should heal nicely. Please note that it will take **approximately** 4-6 weeks for the extraction sites to fill in with bone, depending on the patient's age.

DOs:

DO rest today and tomorrow; half speed on the third day.

DO place ice on jaws for **72** hours as directed.

DO use pressure on gauze packs until bleeding stops, changing every 30 minutes.

DON'Ts:

DON'T smoke, dip or chew tobacco.

DON'T use drinking straws.

DON'T use alcohol or mouthwash.

DON'T lift, bend, strain or play sports.

The above **DON'TS** apply for **7 days** after your oral surgery.

PLEASE NOTE:

In most cases, it is not necessary to return for a post-operative visit unless a problem arises. If you are in doubt about anything at any time, please contact our office at (858) 459-0862.

DRY SOCKET INFORMATION

A dry socket is a defective, abnormal healing, most common in the lower molar extraction sites. When a tooth is removed, the empty pocket fills with blood. This blood becomes the forerun-ner to the future permanent tissue that will eventually fill the socket. The pain experienced with a dry socket is caused by exposed bone that is not covered by a blood clot or new tissue.

A dry socket can occur somewhere between 5-7 days follow-ing the extraction.

The two most common signs of a dry socket are pain in the jaw that radiates into the ear and a foul taste or odor from the extraction site. A dry socket is not an infection nor an ear problem.

Factors that influence the incidence of dry sockets are female hormones, the birth control pill and smoking. It has been shown that cigarette smoking can increase the incidence of dry socket by approximately 4 times. **We ask our patients to refrain from smoking, using straws or spitting too forcefully for 7 days post-operatively.**

A dry socket is treated by gently rinsing the wound and placing an antiseptic and soothing dressing into the wound. This will greatly reduce the discomfort and foul taste. There is not a surgical treatment for a dry socket, nor are antibiotics of much value.

If you are experiencing any of the symptoms listed above and it's been approximately **5-7 days** after your surgery, please contact our office to schedule an appointment to have it checked.

USING YOUR MONOJET SYRINGE

This is an important part of your recovery from oral surgery. Please follow these instructions as they are given.

Begin using your monojet syringe **FIVE DAYS AFTER YOUR SURGERY.** Using your syringe prior to that day can cause complications such as dry socket.

To use your monojet syringe:

1. Remove the stopper from the syringe and fill syringe with tap water.

2. Replace the stopper and aim the curved tip of the syringe into the extraction site of the lower jaw.

3. Depress the stopper letting the water irrigate down into the extraction sites. Let the water run out of your mouth into the sink.

4. Repeat steps 1-3 five times for each **lower** extraction site. It is important to irrigate the extraction sites first thing in the morning, after eating and before going to bed. You will need to follow this routine for 7 days.

If you had upper third molar extractions, you do not need to irrigate these extraction sites; gravity will keep them clean.

IMPORTANT

If at any time you feel you're having a medical emergency and need assistance, please call 911 or go directly to the hospital.

If you have a question or issue that is NOT an emergency, please contact our office at **(858) 459-0862**. Our office hours are Monday-Thursday 8am-5pm / Friday 7am-12pm.

If outside of our normal office hours and you have a question or issue that needs immediate attention, please call (858) 459-0862 and press 7 to be connected to our answering service. They will get your contact information and page the doctor to call you.