



*J. Alex Tomaich, DDS, MD*  
Davis Oral & Maxillofacial Surgery Center  
116 B Street Davis, CA 95616  
530-753-0550 Fax 530-753-0440

## HOME CARE INSTRUCTIONS FOLLOWING ORAL SURGERY

**GENERAL ANESTHESIA:** Make sure the patient is accompanied by a responsible adult until they are alert and coordinated enough to walk without danger of falling and injuring themselves. This is particularly important if the patient should arise on the evening of surgery to use the bathroom. The patient should not drive or operate machinery until the effects of the anesthetic agents have dissipated. The time required will carry with the length of the anesthetic procedure. The recovery period will often require 24 hours or more.

**LOCAL ANESTHESIA:** It is important not to consume any hot food or chew solid food until the effects of the local anesthetic are totally gone. This is particularly important in children. This is to prevent the inadvertent biting of soft tissue.

**BLEEDING:** It is helpful to exert firm pressure over the surgical sites for 1 to 2 hours following surgery. This can be done by biting on gauze packing which can be changed every 20 to 30 minutes. Biting on a moistened tea bag using the same time interval as above may be helpful for persistent bleeding. It is common to have slow bleeding and blood tinged saliva for 12-24 hours after surgery.

**NAUSEA:** It is common to experience nausea after surgery and general anesthesia. This can be alleviated by having patient lie flat or with the head slightly elevated. Anytime the patient gets up, he or she should do so with slow movements and assistance. Ingest only clear liquids to help minimize nausea (water, 7-up, ginger ale). Stay on clear liquids until the nausea passes.

**PAIN:** Use your prescription only as directed on the label. The patient will be comfortable following surgery due to the local anesthetic placed at the surgical sites during the procedure. When the local anesthetic wears off, the patient may experience pain. It is best to start taking the pain medication while still numb. You may take one pain pill as soon as you get home, then take the remainder as prescribed on the label. Many pain medications are opioids such as hydrocodone, codeine and propoxyphene and may cause nausea. Take a full 8 ounces of a clear liquid (water, 7-up, or ginger ale) when taking the pain medications to minimize nausea.

**MOUTH RINSING:** Unless otherwise directed DO NOT rinse your mouth on the day of surgery. The day following surgery you may resume brushing your teeth, avoiding the surgery sites. If given an irrigation syringe, you may use the syringe with warm water and gently irrigate the sockets beginning NO EARLIER than 5 days after surgery.

**DISCOLORATION:** You may develop black and blue areas adjacent to the surgical sites. These are caused by bleeding into the adjacent tissue and are of little significance. They will turn brown, then yellow, and gradually fade over a one to two week period. The areas of discoloration may migrate down the neck to the upper chest.

**SWELLING:** Swelling is normally expected after oral surgery and may be minimized by the immediate use of cold packs for the first 8 to 12 hours. Apply the cold pack to the outside of the face directly over the surgical sites. Do this 20 minutes on and 20 minutes off while awake. The swelling is usually the greatest on the 2<sup>nd</sup> and 3<sup>rd</sup> day after surgery, slowly resolving with time. Warm moist heat (a hot water bottle or a warm moist towel) may be used on the outside of the face periodically starting on the 3<sup>rd</sup> day after surgery and continued until all swelling is gone. If swelling appears to be increasing rather than decreasing after the third day, you should call our office.

**DIET:** It is important to maintain an adequate intake of fluids and nutrients for optimum healing. Drink at least 6 large glasses of water or fruit juice daily. A high-calorie, high-protein diet is recommended. Chewing may be a problem, and food choice is therefore limited. If solid foods cannot be taken, supplement a balanced soft diet with 2 or 3 servings of a liquid dietary supplement such as Meritene, Ensure, Sustacal, Nutrament, or Instant Breakfast. These products can be obtained at a grocery store or pharmacy without a prescription. Start with a liquid or soft diet for the first 24-48 hours. Avoid hot or hard foods for 48 hours as these can dissolve or dislodge the clot. Avoid fatty foods, as these may cause nausea. Also, avoid using straws or spitting forcefully as the pressure created may cause premature loss of the blood clot resulting in a "dry socket".

Some food suggestions include:

Juices, soups, puddings, custard, gelatin, ice cream, eggs, blended foods, smoothies

**SMOKING:** Smoking increases the incidence of post-operative complications, specifically "dry socket", and ideally should be avoided for 1 week following surgery.

**DRY SOCKET:** If you experience a sudden increase in pain 2-4 days after surgery, you may have osteitis or "dry socket." This can be intensely painful and often can be alleviated by using a medicated dressing placed in the socket. Please call the office if you feel you may be experiencing this.

**ANTIBIOTICS:** If these were prescribed, please take as directed.

**INTRAVENOUS SITE / PHLEBITIS:** This is the site where the intravenous line was placed at the time of surgery if you received a general anesthetic. On occasion, this area may become rosy or tender to the touch shortly after surgery. It is usually not worrisome, but should be brought to the doctor's attention at the follow up visit. This usually resolves on its own but may require several weeks.

The patient should improve daily. If you are in doubt about any of the above instructions or the status of the patient, please call our office at (530) 753-0550.