

DENTAL IMPLANT AND BONE GRAFTING

POST-OP INSTRUCTIONS

GENERAL ANESTHESIA OR SEDATION

- Do not drive or operate machinery for 24 hours.
- Do not consume alcohol, tranquilizers, sleeping medications or any non-prescribed medication for 24 hours.
- Do not make important decisions or sign any important papers in the next 24 hours.
- You should have someone stay with you at home for the next 24 hours.
- If your face, jaws and tongue are still numb for 7 to 12 hours (and beyond), then it is probably due to the long acting local anesthesia (Marcaine). This is part of the pain control.

ACTIVITY

- You are advised to go directly home. Restrict your activities and rest for a day. Resume light to normal activity for the next few days.
- Avoid excessive physical exertion and fatigue during the first few days following your surgery. Obtain adequate sleep (rest).
- If the surgery involved your sinus or nasal cavities, avoid smoking, using straws, or blowing your nose until further notice. If you have to sneeze do it through an open mouth.

FLUIDS AND DIET

NOTHING HOT TODAY! Begin with clear liquids (e.g. Gatorade, ice tea, apple juice). If not nauseated, you may go to a full liquid diet (e.g. cold, liquidy milk products such as milkshakes, frozen yogurt or a smoothie). A homemade milkshake, using skim milk or soy milk, frozen yogurt or ice cream and fresh fruit blend into an excellent source of nourishment. **HELPFUL TIPS:** Additional foods you may eat the day of surgery – yogurt with fruit, applesauce, puddings, Jell-O, popcicles, fudgecicles and ice cream. The day following the surgery you can begin to eat regular soft foods for the next 5 days or so (e.g. eggs, omelets, spaghetti, meat loaf and well cooked vegetables). It is important to maintain a diet high in protein and complex carbohydrates. Do not skip meals. Please take a potent multivitamin and at least 500 mg of Vitamin C per day. Avoid big, hard and chewy foods for 5 days or until jaw stiffness and discomfort have resolved (e.g. no steaks, triple decker sandwiches or chewing gum).

MEDICATIONS

You should resume your daily prescription medication schedule per your physician's instructions. If you are diabetic, you may need to stay on a sliding insulin scale (based on your blood glucose level and your doctor's advice) until

you are back to your normal daily caloric intake.

Common Medication Instructions:

- *Naproxen (Aleve)* – [your daily maintenance pain medicine] - Analgesic/anti-inflammatory drug for mild to moderate discomfort. This medication must be taken consistently to be effective 2 times a day with food (preferably after meals) for the first week postoperatively. You should use your refill if needed.

This is an excellent analgesic to take for those patients who must go back to school, work or operate machinery such as cars. **Take as directed on the bottle.**

- *Narcotic analgesic [your rescue pain medicine] – Lortab (Hydrocodone 5/10 and acetaminophen) or Ultram (Tramadol 50 mg.)* – This analgesic should be taken (only as necessary) for moderate to severe pain not controlled by the Naproxen (Aleve). Take 1/2 to 1 tablet every 4 to 6 hours with food. You should use your refill if needed. You should not take this medication if you are driving a car or operating machinery. You may experience dizziness and drowsiness. Do not drink alcohol while taking narcotics. This medication requires a prescription.

Take as directed on the bottle.

- *Antibiotics (e.g. Amoxicillin, Clindamycin, Cephalexin or Metronidazole)* – These medications will help prevent infection and should be **taken as directed on the bottle until they are all gone.** This medication requires a prescription.

- *Promethazine suppositories* - This medication controls nausea and vomiting associated with anesthesia and surgery. It also has a sedative (antihistamine) effect. Doses may be repeated at 4 to 6 hour intervals. You should not take this medication if you need to be alert to drive a car or operate machinery. This medication requires a prescription. **Take as directed on the bottle.**

- **Please call us immediately if you have any side effects** (e.g. nausea, vomiting, diarrhea, headaches). Please call us immediately if you have an allergic reaction (e.g. rash, swelling or difficulty breathing). Do not take the offending drug again. If you are not sure which drug caused the problem, then discontinue all medications and call us immediately. **If you are having difficulty breathing or swallowing – then call 911 immediately.**

- If nausea occurs, try an antacid (over the counter), such as Mylanta or Maalox, before continuing with some bland foods (i.e. cereal, soft crackers, flat soda drink or milk).

- If your bowel habits become irregular, it is suggested you take a mild laxative (over the counter), such as Milk of Magnesia or Metamucil. Please call us if constipation becomes a problem.

Swelling:

- Facial swelling after surgery is normal. It usually takes three days for swelling to reach a peak before beginning to subside.

Most of the swelling will normally resolve within the first 7 to 10 days. Ice packs are used for the first 24 to 48 hours. Plastic bags filled with crushed ice and wrapped in a towel or a commercial ice bag are convenient forms of application. Apply for 20 minutes each hour while awake (on 20 minutes/off 40 minutes). After discontinuing ice, you may switch to moist heat (warm water bottle or warm wash cloth) using the same time periods.

Bruising:

- Black and blue marks on the face are caused by bleeding internally. This appears first as swelling, but often on the second or third day, it may discolor the face black or blue then yellow. It will usually disappear within 10 days. Make-up tips are as follows: Mint Tint - Conceals redness; Lavender Tint - Conceals yellowish bruising; Yellow Tint - Conceals blue or lavender bruising.

Oral Hygiene:

- This is the single most important thing that you can do on your behalf to minimize the possibility of wound infection following oral surgery. Please use a soft bristle toothbrush with toothpaste (along with dental flossing) to keep the teeth clean. The recommended routine will be as follows: After meals, brush and floss your teeth being very careful around the surgical wound; then rinse with a diluted mouthwash (1/2 water and 1/2 Listerine) for 30 seconds. Be very careful during the first 24 hours following the surgery - Do not be too vigorous in your rinsing as this may stimulate bleeding. In addition, we want you to use a Q-tip dipped in Listerine to clean your dental implant healing cap twice a day while the gums are too tender for brushing. **NOTE:** Please avoid toothpaste and oral rinses containing whitening agents for 7 days as they can interrupt proper clotting.

Oral Bleeding:

- Gauze was placed over the surgical site to serve as a pressure bandage when you bite down. Replace the gauze hourly to control bleeding if necessary. Remove the gauze when sleeping, eating or taking medications. A small amount of oozing is normal for the first 24 hours. You may wish to cover your pillow with a towel to avoid staining. Rest with your head elevated by pillows at least 35 degrees. Avoid vigorous rinsing, spitting, smoking, carbonated soda drinks, drinking through a straw and alcohol containing mouthwashes (unless diluted) for the first 24 hours as this may interrupt the clotting process. Please limit your talking for several days to help reduce bleeding and swelling.

- **AVOID:** Please avoid the tendency to touch your wound with our tongue or fingers. This may cause significant problems with healing.

Sinus Instructions:

Blowing the nose, sucking liquid through a straw, and smoking, all of which create negative pressure, should be avoided for 3 weeks after surgery. Coughing or sneezing should be done with mouth open to relieve pressure. Pressure (gauze) at the surgical site, ice, elevation of the head, and rest are also recommended.

IF PROBLEM BECOMES URGENT OR LIFE THREATENING).

- Possible allergic reaction – rash, sudden swelling, difficulty breathing.
- You have severe headaches or notice changes in your vision.
- You develop difficulty seeing, become dizzy or pass out. You have difficulty speaking, breathing or swallowing.
- Fever over 101 degrees by mouth.
- Uncontrollable bleeding (call immediately).
- Pain not relieved by pain medication.
- Unexpected swelling around the surgical site.
- Increased redness, warmth and hardness around the oral wound.
- Increased and progressive drainage from the surgical wound.
- Increased redness, warmth, hardness of the IV site.
- New numbness or tingling in your face (persistent numbness beyond 24 hours).
- Inability to urinate.
- Continued nausea, vomiting, diarrhea or constipation.
- Jaw stiffness is expected after jaw surgery and usually begins to improve within 5 to 7 days. Notify us if it does not improve.
- Foul taste and odors are commonly reported after oral surgery. Good oral hygiene measures can help eliminate this problem.
- Any other unusual or abnormal symptoms.

NOTE: Typically, pain and swelling will peak on the third day post-operatively. If the pain medications are keeping you comfortable and the swelling is not severe, then you are probably doing as we would expect.

Follow-up Care:

- You were given a follow-up appointment card (check in your post-op bag or call us if you cannot find it). Dr. Satterfield will need to re-evaluate you (to check your progress) in approximately 2 weeks.
- After office hours and weekends our answering service (706-543-8377 or 706-475-9852) picks up 24 hours a day/7 days a week. There may be a brief delay in returning your call if the doctor is busy in the emergency or operating room

caring for another patient. Please place your call again if there is not a timely response.

NOTICE: If you have been given a temporary partial (AKA flipper) or denture to wear following your surgery, it is OK to resume wearing when you feel comfortable. You must take it out during meals (no chewing allowed). You must leave it out for the first two weeks following bonegraft surgery to (prevent damage to the wound) allow for swelling to resolve. Please bring it with you for evaluation (and any needed adjustment) to every follow-up appointment. THE TEMPORARY PARTIAL OR DENTURE SHOULD NOT CONTACT THE DENTAL IMPLANT (for at least 12 weeks) OR THE SOFT TISSUE OVER THE BONE GRAFT (for at least 20 weeks).