POSTOPERATIVE VISITS: For certain procedures you may be given an appointment for a postoperative check. You will be given a date/time during discharge; please call to reschedule if needed. For many procedures a routine postoperative visit is not necessary, however if you have any issues or concerns, please contact our office to have an appointment scheduled.

It is our desire that your recovery be as smooth and pleasant as possible.

Following these instructions will assist you, however if you have questions or concerns, please call our office. If you have an after-hours urgent matter, please note that we do have staff on-call to answer your questions.

MEDICATIONS: Depending on the procedure(s) performed and expected postoperative needs, you may or not be prescribed medications. It is important to remember to take medications as prescribed by your doctor. Pain medications and most antibiotics are best tolerated with a small meal and plenty of fluids. If you experience any reactions (rash, hives, tightness in throat, etc.) stop medications immediately and contact our office. Below you will see a list of commonly prescribed medications and their class.

Pain, Anti-inflammatory

- o Motrin (Ibuprofen)
 - > *Do not take if allergic to Aspirin/NSAIDS or if on blood thinners/anti-platelet.
- Tylenol (Acetaminophen)
- o Ultram (Tramadol)
- o Norco (Hydrocodone/Acetaminophen)
- o Percocet (Oxycodone/ Acetaminophen)
- o Other:

Antibiotics

- o Amoxicillin
- o Augmentin
- o Clindamycin
- o Flagyl
- o Other:

Steroids

o Dexamethasone

Mouthrinse

- o Peridex (Chlorhexidine)
- o Magic Mouthwash
- o Viscous Lidocaine

We are thankful for the opportunity to care for you and appreciate your business! Please let us know how we did by leaving us a review on Google and follow us Instagram and Facebook!



12231 Bernard Parkway

Gulfport, MS 39503

POSTOPERATIVE & AFTERCARE INSTRUCTIONS

Jared Akers, D.M.D. Bennett York, D.D.S.

OFFICE NUMBER (228-687-1900)

24 Hour Answering Service

☐ We have scheduled a follow-up appointment for you:	
DATE:	TIME:
□ No post-op schedu any concerns.	ıled at this time. Please call if you have

PLEASE READ ALL OF THESE INSTRUCTIONS CAREFULLY

The healing and recovery process varies from person to person as well as to which procedure(s) were performed. Swelling, discomfort, and restriction in mouth/jaw function are expected and are not cause for concern in most cases. The answer(s) to many of your questions regarding post-operative care can be found in the instructions below. Please read through each item carefully, and please do not hesitate to call our office any time day or night if there are remaining questions and/or concerns.

BLEEDING: Bleeding is common after oral surgery, but for most will subside within the first few hours following your procedure. Bite down firmly on the gauze packs, making sure they remain in place. Change gauze after the first 30 minutes, or sooner if the bleeding is not controlled. Place new gauze pack over surgical site(s) as instructed, *changing every 20-30 minutes* until the bleeding has stopped. Intermittent (start/stop) bleeding or oozing during the first 12-24hrs is normal and typically controlled with a well-placed gauze pack and firm pressure. Additional measures to ensure bleeding stops as expected: limit physical exertion for 1-2 days, avoid smoking, keep head elevated, and do not disturb the surgical site for the first 24hrs.

If bleeding persists or becomes heavy you may substitute a tea bag (soaked in hot water, squeezed damp-dry and wrapped in a moist gauze) for 20 or 30 minutes. If bleeding remains uncontrolled, please call our office.

PAIN: Unfortunately, most procedures in oral surgery are accompanied by some degree of discomfort. Pain levels/tolerance varies widely among patients, as do the effects that different pain medications will have on an individual. We do our best to prescribe you the pain medication regimen that is adequate for most people undergoing a similar procedure.

In general it is recommended to take an over-the-counter (Ibuprofen, Tylenol) medication as soon as you can after your procedure with a light meal or glass of fluid (water, Gatorade, etc.). Pain will increase after the local anesthesia wears off, and in most cases will peak during the 2nd-3rd day after surgery. After this your need for pain medication should decrease. Should the need for a medication refill arise or if you have questions about your specific medications, please contact our office during normal business hours. An after-hours staff member is available to assist with any emergency questions.

Special Note: If you are currently under the care of a pain management specialist, we recommend contacting their office as a first line with any narcotic related medication questions.

SWELLING: Swelling often accompanies many oral surgical procedures, and often peaks around the 2nd - 3rd day after surgery. It can be minimized by using a cold pack (ice bag or other substitution) applied to the outside cheek/jaw adjacent to the surgical area. *Cold therapy can be applied as a 20 minutes on/off schedule for the first 24-48hrs*. It is typically recommended to switch to moist heat and/or heating pad on the 3rd day after surgery. Other things that can aid in swelling reduction include keeping your head elevated, limiting physical exertion and heavy lifting for the first few days, and occasionally medications.

NAUSEA: Nausea is not uncommon after surgery, and it can be brought on my many different things (medications, anesthesia, empty stomach, etc.). To prevent the most common cause (medications), we recommend having a light meal (Jell-O, soup, smoothie, etc.) along with large glass of water prior to each pain and antibiotic pill. Small sips of carbonated beverages can help. If nausea persists, please contact our office.

DIET: For the first 1-2 days we recommend mostly a liquid/soft diet (water, Gatorade, soups, smoothies, pureed foods, etc.). Over the next several days you may gradually progress to solid foods (mashed potatoes, pasta, bite sized meats, etc.). If you are having difficulty progressing to solid foods, we recommend a nutrition supplement/drink (Boost, Ensure, etc.) to ensure your body is getting the nutrients it needs to heal properly and lessen the recovery period.

Avoid extremely hot foods for 2 days. *Do not use a straw for 5-7 days*. It is best to avoid foods like nuts, sunflower seeds, popcorn, etc., which may get lodged in the socket areas. If you are a diabetic, or have other specific dietary needs, maintain your normal eating habits or follow instructions given by your physician.

ORAL HYGIENE & WOUND CARE: Keeping your mouth clean after surgery is essential. We recommend no brushing or rinsing on the day of surgery. From day 2 forward gentle brushing can resume, taking care to avoid the direct surgical site. An antibiotic mouthrinse may be prescribed with directions on the bottle. In addition, a salt water rinse can be performed after meals and at bedtime for 3-5 days following surgery (1/2 teaspoon of salt dissolved in an 8 ounce glass of warm water). It is important to avoid vigorous swishing and spitting for the first week. Do NOT use hydrogen peroxide solutions and avoid alcohol containing mouthrinses. If you are provided an irrigating syringe, please do not start using until day 5 after surgery. Then you can irrigate the sites twice per day, or after meals, until area is no longer collecting food or debris.

SUTURES: Many oral surgery procedures require the use of sutures (stitches). We typically use resorbable (dissolvable) sutures that do not require removal and will come out within the first few days to 1st week. There is no need for worry if your suture comes out early or remains longer than expected, however please call the office if there is concern or to have an appointment scheduled. Occasionally we will place non-resorbable sutures that will need to be removed, and you should receive a postoperative appointment for this to happen.

MISCELLANEOUS:

Smoking: Avoid smoking for at least 3-5 days following surgery. Smoking is a known risk factor for bleeding, delayed healing, "dry sockets", and increase in pain levels.

Sharp/ Bony Areas: If you feel a hard or sharp area in the surgical sites, it is likely you are feeling the bony walls which once supported the extracted teeth. This can sometimes be mistaken for a piece of tooth fragment. Occasionally small slivers of bone may work themselves out during the 1-2 weeks following an extraction. If these areas persist or cause concern, please call the office.

Infection: Signs to watch for after surgery: Increases in swelling, redness, warmth and pain after the 3rd day. Also watch out for a foul smell or taste, as well as drainage from the surgical site. If you notice any of these signs, please contact our office to discuss with a staff member.

Dry Sockets: Also known as "alveolar osteitis" is a known potential occurrence after a tooth extraction. Typically occurs 3-5 days after surgery, and is associated with a sudden and significant increase in discomfort. It is the result of a disturbance in the blood clot that forms in the tooth socket. The best treatment is prevention by following the recommended instructions, however if you do develop a dry socket, we have treatments that can help alleviate the discomfort associated with a dry socket.