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PLASTIC & RECONSTRUCTIVE SURGERY  
ORAL & MAXILLOFACIAL SURGERY

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**POST-OPERATIVE INSTRUCTIONS FOR ORAL SURGERY**

**\*\*\*PLEASE READ THESE INSTRUCTIONS CAREFULLY\*\*\***

Sometimes the after-effects of oral surgery are quite minimal, so not all of the instructions may apply. Common sense will often dictate what you should do. However, when in doubt follow these guidelines or call our office for clarification. Our number is: **909-798-9950 during regular business hours. The emergency number for Dr . Punjabi during evenings and weekends is: 909-213-6183**

**FIRST HOUR:** Bite down gently but firmly on the gauze packs that have been placed over the surgical areas, making sure they remain in place. Do not change them for the first hour unless the bleeding is not controlled. The packs may be gently removed after one hour. If active bleeding persists, place enough new gauze to obtain pressure over the surgical site for another 30 minutes. The gauze may then be changed as necessary (typically every 30 to 45 minutes). It is best to moisten the gauze with tap water and loosely fluff for more comfortable positioning.

**EXERCISE CARE:** Do not disturb the surgical area today. Do **NOT** rinse vigorously or probe the area with any objects. You may brush your teeth gently. **PLEASE DO NOT SMOKE** for at least 48 hours, since this is very detrimental to healing and may cause a dry socket.

**OOZING:** Intermittent bleeding or oozing overnight is normal. Bleeding may be controlled by placing fresh gauze over the areas and biting on the gauze for 30-45 minutes at a time.

**PERSISTENT BLEEDING:** Bleeding should never be severe. If so, it usually means that the packs are being clenched between teeth only and are not exerting pressure on the surgical areas. Try repositioning the packs. If bleeding persists or becomes heavy you may **substitute a tea bag** (soaked in very hot water, squeezed damp-dry and wrapped in a moist gauze) for 20 or 30 minutes. If bleeding remains uncontrolled, please call our office.

**SWELLING:** Swelling is often associated with oral surgery. It can be minimized by using a cold pack, ice bag or a bag of frozen peas wrapped in a towel and applied firmly to the cheek adjacent to the surgical area. This should be applied twenty minutes on and twenty minutes off during the first 24 hours after surgery. If you have been prescribed medicine for the control of swelling, be sure to take it as directed.

**BRUISING:** Depending on the nature of the surgery which was performed and the nature of the person, some discoloring of the face may be seen for 3-5 days after the surgery. If this happens, do not be alarmed.

**NUMBNESS:** Many times the lower teeth are adjacent to the nerves that provide sensation to the lip, tongue and chin. When the tooth is removed, the nerves may be bruised or injured, which may lead to a numbness of your lip, tongue, chin and your lower teeth on that side. Numbness is usually temporary though it may remain for up to two years and occasionally may be permanent.

**ORAL HYGIENE:** Rinsing, spitting, and tooth brushing should be avoided on the day of the surgery. Starting on the day after surgery, frequent gentle rinsing with mild, warm salt water is encouraged. Brushing should also be resumed, being careful to avoid the surgical site for the first two days. Good oral hygiene is important to normal wound healing.

**ACTIVITIES:** Activities for the first 24 hours should be minimal. Rest quietly with head elevated. Smoking should be discontinued for at least 3 days. Do not expect to return to work or normal activities immediately. Two or three days rest is recommended and subsequently resuming activities as they are tolerated. Vigorous physical activities and sports should not be resumed until the surgical areas are comfortable, swelling is resolved and a normal diet is possible. Usually contact sports should not be resumed for approximately 1 week postoperatively. Musical wind instruments should not be played for at least 1 week to 10 days after oral surgery.

**TASTE AND ODOR:** After the surgery, a bad taste and odor may occur. This is usually secondary to a lack of appropriate cleaning in the area. Commercial mouthwash may be used along with normal rinsing and brushing.

**UNCOMMON PROBLEMS:** Many people fear the possibility of a dry socket, which is a very unusual complication. If you have pain, however, that is not relieved by the pain medication or aspirin, this may be the case. If possible, you should return to our office or if the distance is too great, see your local dentist. Pain in the ear, difficulty in swallowing, and difficulty in opening and closing the jaws are symptoms which can occur with varying frequency, and usually are not significant. Swelling at a later date is uncommon, but if the swelling increases after 5-7 days, please contact our office.

**NAUSEA:** Nausea is not uncommon after surgery. Sometimes pain medications are the cause. Nausea can be reduced by preceding each pain pill with a small amount of soft food, and taking the pill with a large volume of water. Try to keep taking clear fluids and minimize dosing of pain medications, but call us if you do not feel better. Classic Coca Cola may help with nausea.

**SHARP EDGES:** If you feel something hard or sharp edges in the surgical areas, it is likely you are feeling the bony walls which once supported the extracted teeth. Occasionally small slivers of bone may work themselves out during the following week or so. If they cause concern or discomfort, please call the office.

**PAIN:** Unfortunately most oral surgery is accompanied by some degree of discomfort. You will usually have a prescription for pain medication. **If you take the first pill before the anesthetic has worn off, you should be able to manage any discomfort better.** Some patients find that stronger pain medicine causes nausea, but if you precede each pain pill with a small amount of food, chances for nausea will be reduced. The effects of pain medications vary widely among individuals. If you do not achieve adequate relief at first, you may supplement each pain pill with an analgesic such as aspirin or ibuprofen. Some patients may even require two of the pain pills at one time.

Remember that the most severe pain is usually within six hours after the local anesthetic wears off; after that your need for medicine should lessen.

**If you find you are taking large amounts of pain medicine at frequent intervals, please call our office. If you anticipate needing more prescription medication for the weekend, you must call for a refill during weekday business hours.**

**DIET:** Eat any nourishing food that can be taken with comfort. Avoid extremely hot foods. Do not use a straw for the first few days after surgery. It is sometimes advisable, but not absolutely required, to confine the first day's intake to liquids or pureed foods (soups, puddings, yogurt, milk shakes, etc.) It is best to avoid foods like nuts, sunflower seeds, popcorn, etc., which may get lodged in the socket areas. Over the next several days you may gradually progress to solid foods. It is important not to skip meals! If you take nourishment regularly you will feel better, gain strength, have less discomfort and heal faster. If you are a diabetic, maintain your normal eating habits or follow instructions given by your doctor.

### **INSTRUCTIONS FOR THE SECOND AND THIRD DAYS**

**MOUTH RINSES:** Keeping your mouth clean after surgery is essential. Use 1/4 teaspoon of salt dissolved in an 8 ounce glass of warm water and gently rinse with portions of the solution, taking five minutes to use the entire glassful. Repeat as often as you like, but at least two or three times daily.

**BRUSHING:** Begin your normal oral hygiene routine as soon as possible after surgery. Soreness and swelling may not permit vigorous brushing, but please make every effort to clean your teeth within the bounds of comfort.

**HOT APPLICATIONS:** You may apply warm compresses to the skin over the areas of swelling (hot water bottle, hot moist towels, and heating pad) for 20 minutes on and 20 minutes off to help soothe tender areas. This will also help decrease swelling and stiffness.

**HEALING:** Normal healing after tooth extraction should be as follows: The first two days after surgery are generally the most uncomfortable and there is usually some swelling. On the third day you should be more comfortable and, although still swollen, can usually begin a more substantial diet. **The remainder of the post-operative course should be gradual, steady improvement.** If you don't see continued improvement, please call our office. If you are given a plastic irrigating syringe, **DO NOT** use it for the first five days. Then use it daily according to the instructions until you are certain the tooth socket has closed completely and that there is no chance of any food particles lodging in the socket.

**INCISION AND DRAINAGE:**

- Rinse mouth 3 or 4 times per day with on half teaspoon of table salt and 2 tablespoons of hydrogen peroxide in a glass of warm water and start rinsing immediately after surgery.
- Do not apply ice to face.
- If the drain inserted falls out or extrudes, do not become alarmed. This is normal.
- You may be aware of drainage from the incision for a few days after surgery.

**REMEMBER YOUR FOLLOW UP VISIT:**

It is often advisable to return for a postoperative visit to make certain healing is progressing satisfactorily. A follow-up visit will be scheduled. In the meantime, maintain a healthful diet, observe rules for proper hygiene, and visit your dentist for regular check-ups.

**PLEASE NOTE: telephone calls for narcotic (pain killer) prescription renewals are ONLY accepted during office hours.**