

Postsurgical Instructions

Implant Surgery



LOS GATOS
ORAL & FACIAL
SURGERY

Tooth Extraction, Implant Placement with a Bone Graft and a Denture (attached to implants at surgery)

Care of your mouth after surgery has an important effect upon healing. Swelling, discomfort, restricted jaw function, and cheek discoloration is expected, and need not cause alarm. You will look the worst on postoperative day 3 but begin to feel better.

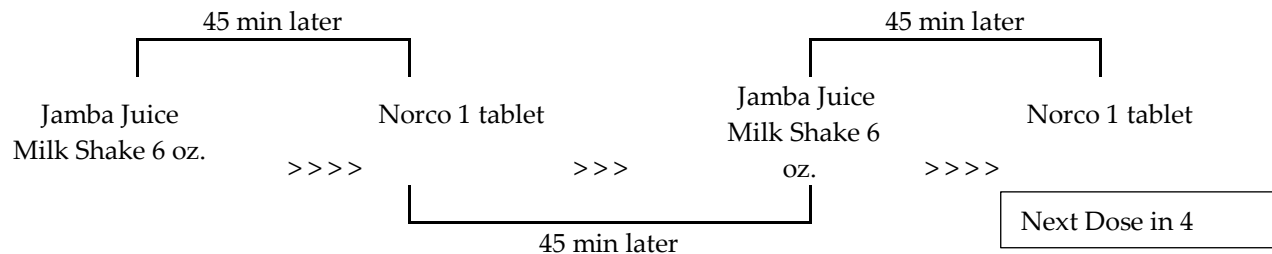
Sequence of Events

The key to a rapid and uneventful recovery is eating food prior to taking pain medications, staying ahead of the pain with pain medication and refraining from any activity for 48 hours. The following is a recommended sequence of events. Dr. Walker may customize this sequence for your specific needs.

Day of Surgery: First 4 hours

After surgery begin drinking liquid foods (2-6 oz. no straws) to include Jamba Juice (no seeds), milk shakes or cold soups or soft foods (yogurt, apple sauce, ice cream, pudding, Jell-O) waiting 45 minutes prior to taking the first Norco (Hydrocodone/Acetaminophen) pain pill. If you are not experiencing an upset stomach, continue the sequence of alternating liquid foods and pain medication as outlined below. The goal is to take 2 Norco pain pills within the first 4 hours after surgery. The maximum Norco dose is 10 tablets in 24 hours.

This Timeline Starts When You Get home



If you experience nausea, stop taking pain medications and liquid food. This will only worsen the nausea. It is for this reason, that Dr. Walker recommends holding antibiotics until the day after surgery. Antibiotics are known to cause nausea. After waiting a period of time (1 hour) for the nausea to pass, begin to slowly restart the liquids then the pain medications. If you have waited one hour and the nausea has not passed, you can drink one ounce of a carbonated beverage (Ginger Ale). Follow this with mild tea or clear broth and soda crackers. Be careful not to chew the crackers over the surgical site as you will be numb and unable to feel these areas. If during this process you throw up, wait 45 minutes before restarting clear liquids (Ginger Ale, clear broth). Advance to more solid liquids (Jamba Juice, milk shake) slowly.

During this same period, keep ice (bags of frozen peas or corn) on your face 30 minutes on and 30 minutes off to reduce facial swelling. When you arrive home from surgery, remove the gauze. If you experience oral bleeding, place new gauze in your mouth over the surgical site to collect the blood. Swallowing blood will result in nausea. Do not sleep with gauze in your mouth. If you vomit, it is usually one time clearing blood from your stomach. When you use the bathroom, someone must accompany you so that you don't fall.

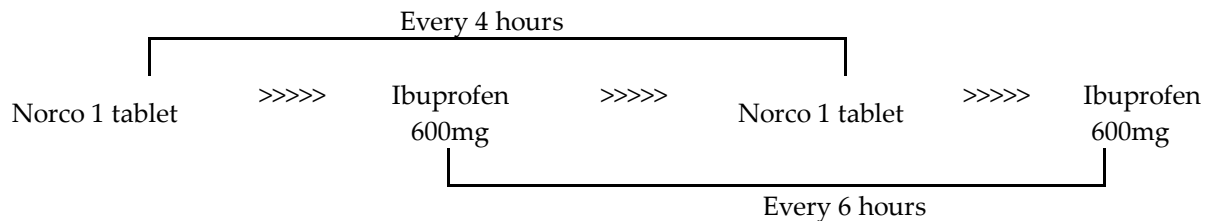
Day of Surgery: Hour 4 to bedtime

This is the maintenance phase of recovery. You have begun soft foods, pain medications and are not experiencing nausea. Patients often complain of little discomfort due to the local anesthesia (numb mouth). Some of the local anesthesia may last into the night and begin to disappear four hours after surgery. If you are numb the morning after surgery, notify Dr. Walker. It is important that you continue to stay ahead of the pain by taking one pain pill (Norco) every four hours until bedtime. Always take pain medication with food to prevent nausea. If you get behind on pain medication, it takes significantly more medication and time to get the pain under control. During the night, we don't recommend waking up to take pain medication. Continue ice to your face.

Day of Surgery: Pain medications not working

You can expect soreness at the surgical site for several days and up to one week for some people. If you follow the above protocol, it is very unusual for you to have any pain. If after taking two Norco you are still experiencing pain, begin Ibuprofen (Advil/Motrin) 600mg 4x/day. Be cautious of nausea as taking Norco with Ibuprofen significantly increases your chance of nausea and vomiting. **Do not take Tylenol** as Norco contains Tylenol and you will exceed the recommended dose.

This Timeline Starts When Pain Meds Not Working



Postoperative Day 1: Day after surgery

Nausea is very rare the day after surgery and pain medication requirements are usually significantly less. It is for this reason that Dr. Walker recommends switching from Norco to Ibuprofen and resuming your antibiotics. Begin taking Ibuprofen 600mg every 6 hours for the next 5 days. Ibuprofen will reduce soreness, pain and swelling. You can continue taking Norco for break through discomfort either with the ibuprofen or in between ibuprofen doses. Ibuprofen does not make you sleepy, but Norco does. It is important to continue to stay at home and rest. You will experience swelling worsened by physical activity. On postsurgical day 1 you can resume a normal diet; however, Dr. Walker recommends avoiding sharp foods (potato chips) as this may aggravate the surgical sites. Do not eat on the implant as this can result in implant failure. Continuing applying ice to the face 30 minutes on and 30 minutes off to decrease swelling and pain.

Postoperative Day 2: Second day after surgery

Although you may awake with more swelling on the second postsurgical day, you will begin to look and feel better throughout the day. You can resume light activities but avoid strenuous physical activity. Becoming overly active on this day will delay your recovery causing more pain and swelling. Continue to advance your diet as tolerated and maintain ibuprofen for soreness. Continue to apply ice to the face to reduce facial swelling and pain. Begin exercising your jaw returning to normal opening. It will be stiff and uncomfortable to open, but once you return to normal range of motion you will feel better. Limiting jaw movement will cause more pain.

Postoperative Day 3: Third day after surgery

On this day you will notice a decrease in swelling and discomfort. Discontinue applying ice to your face as this will no longer reduce facial swelling and pain. Continue to advance your diet to non-chewing and activity but avoid strenuous physical activity. You can return to normal physical activity on the 4th day after surgery. We recommend Ibuprofen for general soreness through the 5th day after surgery.

Wound Healing

Slight oral bleeding is expected up to one week after surgery. If bleeding is excessive, place a roll of sterile gauze or a dry tea bag (black tea is best) directly over the wound and bite firmly for 10 minutes with constant pressure. Do not open your mouth or talk during this time. If the gauze becomes soaked with blood, remove and replace with a new gauze. Repeat this process until bleeding stops. Chewing on the gauze or talking with gauze in your mouth will milk the site and cause continued bleeding. Spitting or using straws causes bleeding by drawing the clot from the surgical site. Avoid this if at all possible. Avoid blowing your nose for 5 days after surgery (upper back implant only) as this can cause the surgical site to bleed into your sinus and drain out your nose. The sutures will begin to dissolve and fall out after 3 days. Bleeding when brushing your teeth is an indication of tissue irritation. This will resolve with improved oral hygiene.

Cleaning Your Mouth and Surgical Site

The day of surgery, do not clean the surgical site, spit or rinse your mouth as this can cause bleeding and loss of the blood clot. The day following surgery, begin to brush your teeth and gums not involved in surgery with a tooth brush and tooth paste, clean the surgical site with a cotton tipped applicator (Q-Tip) dipped in diluted 3% hydrogen peroxide (½ water, ½ 3% hydrogen peroxide, no double dipping), and finish with a gentle swish of warm salt water (1/2 teaspoon of salt in a large glass of warm water). This sequence is repeated after each meal (any food products) and at bedtime. This care must be continued for at least 7 days. The oral rinses (hydrogen peroxide and warm salt water) are a substitute for a tooth brush and tooth paste. You can discontinue the oral rinses once you can comfortably brush the surgical site with a tooth brush and tooth paste. If a healing abutment is placed onto the implant, it should be kept shiny. Your tongue might notice a groove on top of the abutment. The use of an electric tooth brush is not recommended for cleaning of the healing abutment. The cleaner you keep your mouth and the surgical site, the better you will feel.

Extraction Socket Bone Graft

An extraction socket grafted with bone has a temporary collagen dressing. The purpose of the dressing is to contain the graft during the initial healing. The dressing will fall off within one to two weeks after surgery. You might notice the dressing hanging from the extraction site prior to falling off. It is not a problem but may be a nuisance. If this is bothering you, come into the office and we can remove the dressing. You may also notice some graft migration in the form of small sand like particles inside your mouth. Unlike a sinus lift bone graft described below, graft migration is not a problem. The site is over packed with graft and some graft migration is expected.

Sinus Lift Bone Graft / Back Upper Site Graft

It is important to keep your sinus clean as the surgical site is below the sinus. A sinus infection during the first two weeks after upper jaw grafting can result in a graft infection, graft migration and graft loss. Nasal saline irrigation with a Neti Pot is an effective way to keep your sinus clean. This will alleviate congestion and pressure. A Neti Pot can be purchased at your pharmacy without a prescription. If you experience congestion and pressure it is recommended you also take an over the counter decongestant. If you experience these symptoms within the first two-weeks post-surgery and have completed your antibiotics, immediately come in for an evaluation. Unlike an extraction socket bone graft, you should also not experience sand like particles in your mouth. This is a symptom of the bone graft leaking and may be a symptom of an impending bone graft infection. If you experience this symptom, Dr. Walker would like to see you for an examination.

Swelling Control

Apply an ice pack to the jaw immediately upon your return home from surgery, 30 minutes on and 30 minutes off. Continue this care for up to 2 days after surgery (a total of 3 days). Facial and oral swelling will peak on the third day after surgery and last up to 7 days. Occasionally, facial bruising will develop lasting 7-10 days. Assume a semi-upright bed position when sleeping using 2 pillows for the first 48 hours. This will reduce facial swelling. Expect more facial swelling on the side of your face that you sleep on.

Diet

To skip meals will add to your discomfort. Maintain a soft diet the day of surgery. Avoid hot liquids if you are numb as you may burn your mouth. Increase your fluid intake as it is easy to get behind in fluids, which causes more discomfort and delayed healing. Do not use straws for 5 days. An example of soft foods is mashed potatoes, fish, overcooked pasta, bananas, soup and yogurt. Avoid chewing foods, acidic foods (tomato and orange juice burns) or spicy foods. If the denture is attached to the implants, you MUST avoid chewing for the duration of implant healing (3 months). Chewing on the denture attached to implants will result in implant failure. Watch for irregularity of bowel habits, which can be caused by antibiotics and the narcotic (Norco). If you develop diarrhea, stop the antibiotics and call Dr. Walker. If you develop constipation, consider discontinuing the narcotic (Norco).

Jaw Exercise / Stiff Jaw

On the second day after surgery begin exercising your jaw by opening. It will be stiff and uncomfortable to open, but once you return to normal range of motion you will feel better. Limiting jaw movement will cause more pain.

Physical Exercise

It is important to stay at home, rest and avoid physical activity the day of surgery and the next 2 days. You can return to school or work after the 3rd postoperative day and resume working out on the 4th postoperative day. Don't expect to perform at optimal physical activity until the 5th postoperative day. When physically active, you may experience an increase in pain, soreness or a "heart beat" at the implant site. If this occurs, discontinue that activity. This pain, soreness or a "heart beat" sensation may result in implant failure. Swimming is permitted after the 3rd postoperative day.

Travel

It is important not to travel for two weeks following surgery. A change of pressure (elevators, Tahoe or airplanes) may be uncomfortable and cause oral or nasal bleeding. This could result in implant failure.

Denture

If the implants meet stability criteria at surgery, your denture will be attached to the implants. This will be a very comfortable temporary prosthesis but the denture will not support chewing. You must restrict your diet to soft non-chewing food during the 3 months of implant healing. Chewing normal foods will result in implant rejection. You will need to have your bite adjusted one week after surgery.

If you do not meet the stability criteria or Dr. Walker chooses not to attach the implant to the denture (upper jaw), the denture will rest on the surgical site and is very uncomfortable for the first two weeks. You have two choices. You can either leave the denture out for 2 weeks or immediately wear the denture. It is more comfortable to leave the denture then see your dentist after two weeks of healing for a soft denture reline. However, if you change your mind and decide to wear the denture, the denture won't fit due to tissue swelling. If you chose to wear the denture, it is recommended you wear your denture continuously for 48 hours and remove it only for cleaning each night. Make sure to clean the denture as well as the surgical site. The denture will not fit well and you may develop sores under the denture. If denture sores develop, leave your denture out of your mouth until the denture can be adjusted by your dentist.

Smokers

It is best to cease all use of tobacco, alcohol and marijuana for 2-3 weeks prior to and after surgery. If you must smoke, do not smoke 48 hours before and after surgery. Smoking is directly related to surgical complications including implant and graft rejection. It is best not to smoke at all.

Dry Socket

A dry socket is loss of the blood clot from the surgical site. You can prevent a dry socket by avoiding spitting for 24 hours, avoid using straws for 5 days and not smoking for the first 5 post-operative days. If you experience a sudden increase in pain on the 3rd day after surgery, you may have a dry socket. This pain will continue for the next 2 days requiring narcotic pain medication (Norco), to control the pain. A clot will reform in the surgical site, and the pain will go away by the end of a week. If you think you are experiencing a dry socket, come into the office for an evaluation and treatment. We can pack the surgical site with a medicated dressing, which significantly reduces your pain. The medicated dressing will need to be replaced each day for 4 days. A dry socket is unlikely to occur in sites where an implant is placed or the tissue is closed over the extraction site.

Allergic Reaction

If you develop hives or a rash, discontinue all medication and immediately contact our office at 408-412-8400.

Telephone Support 24/7: 408-412-8400

Should you have any questions please call our office. Surgical assistants and Dr. Walker are available to answer your questions. You are welcome to call Dr. Walker after hours. For after-hours support, call the office and follow the voice prompts to the emergency mailbox then leave your name and telephone number. The doctor will be paged and call you back. If you think something is not right, call or come in. We are here to help you.