

Pre-operative Instructions for Surgical Patients

During your pre-operative consultation, you and the doctor we'll have discussed the type of anesthesia that is best suited for you.

- □ **Local Anesthesia**: This type of anesthesia also known as "numbing" is commonly used in routine surgeries for patients who tolerate typical dental work.
 - Eat a light meal before surgery (especially diabetics).
 - Take all medications as prescribed.
 - You may drive and come alone unless instructed otherwise.
- Nitrous Oxide Anesthesia: This type of anesthesia uses an inhaled gas to relieve anxiety during the procedure.
 You will be awake and aware of your surroundings but will likely feel more relaxed and comfortable. local anesthesia is administered after you are relaxed.
- Pre-sedative Anesthesia: This type of anesthesia uses a prescription medication that is taken prior to surgery.
 The medication, Valium (diazepam) will help relieve anxiety and relax you, without fully sedating you or "going to sleep".
 - Make sure to have a responsible adult accompany you to the appointment and <u>remain</u> in office for the entire appointment. They must be able to drive you home afterwards.
 - You should take 1 tablet 1 hour prior to your procedure, with a small sip of water. An additional tablet can be taken in the office while checking in, if the effects are not fully felt, when instructed to do so unless otherwise instructed.
- Intravenous Sedation: This is a common and highly recommended approach for performing more complex oral and maxillofacial surgical procedures, or for those patients who prefer not to be alert during the surgery. This technique provides minimal to no discomfort, as you will be asleep during the procedure. This technique is safe and recovery is very quick. Once sedated local anesthesia will be administered in conjunction with the IV sedation. PLEASE FOLLOW THESE IMPORTANT PRE-OP INSTRUCTIONS FOR IV SEDATION
 - No food or liquids, including water, for (8) eight hours prior to your appointment. This includes gum, hard candy, mints, chewing tobacco, or anything else you can put into your mouth. If you do NOT follow these instructions your procedure will be canceled.
 - Make sure to have a responsible adult accompany you to the appointment and <u>remain</u> in office for the entire appointment. They must be able to drive you home afterwards. For minors under the age of 18 years, the adult must be a custodial parent or legal guardian. You will be drowsy for a short period after anesthesia and driving is not legally permissible for 24 hours.
 - **Take all normal medications**, with a small sip of water (just enough to swallow), unless otherwise instructed.
 - Where a short sleeve shirt, comfortable clothing, and comfortable supportive shoes.
 - Do not wear contact lenses.
 - Leave all valuables at home or with your driver, including jewelry, phones, etc.
 - Do not drink alcoholic beverages or use any recreational drugs prior to surgery the use of any stimulant drug can increase risks during anesthesia. No marijuana use for **one week** prior to surgery.

If you have any questions, please be sure to call the office prior to surgery. We are available to answer any questions or address any of your concerns. Your care and safety are our greatest concerns.



EXERCISE CARE: Do not disturb the surgical area today. No spitting, sucking, smoking or straws. Do NOT rinse vigorously or probe the area with any objects or your fingers. You may brush your teeth gently.

BLEEDING: Intermittent bleeding or oozing is normal. It may be controlled by placing fresh gauze over the surgical areas and biting down firmly for 45-60 minutes. Bleeding should never be severe. If it is, it usually means that the packs are being clenched between your teeth rather than exerting pressure on the surgical areas. Try repositioning fresh packs. Prior to applying fresh pack, place the fresh gauze into ice cold water (with ice in the cup) and squeeze out the excess water. Fold the gauze 2-3 times so that it is thick enough to apply pressure over the surgical sites when biting down. If bleeding persists or becomes heavy you may substitute a tea bag (soaked in cold water, squeezed damp-dry and wrapped in moist gauze) for 30 to 45 minutes. If bleeding remains uncontrolled, please call our office.

SWELLING: Often there is some swelling associated with oral surgery. You can minimize this by using a cold pack or ice bag wrapped in a towel and applied firmly to face or cheek adjacent to the surgical area. This should be applied twenty minutes on and twenty minutes after surgery. Your swelling may peak 3-4 days after the surgery and will begin to subside 5-7 days after the surgery.

PAIN: Unfortunately, most oral surgery is accompanied by some degree of discomfort. You may have a prescription for pain medication, and if you take the first pill before the anesthetic has worn off, you will be able to manage any discomfort better. Alternate narcotic pain medication and ibuprofen every 3-4 hours, unless other specific instructions were given or you can not take specific pain medications.

NAUSEA: Nausea is not an uncommon event after surgery, and it is sometimes caused by stronger pain medicines. Nausea may be reduced by preceding each pill with a small amount of soft food, then taking the pill with a large volume of water. Try to keep taking clear fluids and minimize the pain medication but call us if you do not feel better or if repeated vomiting is a problem.

DIET: Eat any nourishing food that can be taken with comfort. Avoid foods like chips, nuts, sunflower seeds, popcorn, etc., that may get lodged in the socket I areas. Avoid spicy and hot foods. Over the next several days you can progress to solid foods at your own pace.

SHARP EDGES: If you feel sharp edges in the surgical areas with your tongue it is probably the bony walls which originally supported the teeth. Occasionally small slivers of bone may work themselves out after the surgery. They are not pieces of tooth and, if necessary, we will remove them. Please call our office if you are concerned.

MEDICATION: Any antibiotics (penicillin, clindamycin, etc.) should be taken until gone. Pain medication should only be taken as prescribed to relieve discomfort. Remember, narcotic based pain relievers can cause drowsiness and decreased coordination. You should refrain from using alcohol or other sedative-type drugs while using them.

BRUSHING: Begin your normal oral hygiene routine as soon as possible after surgery. Areas that are away from surgical sites can be brushed normally. Around the surgical sites, use a soft bristle manual toothbrush. Soreness and swelling may not permit vigorous brushing of all areas, but please make every effort to clean your teeth within the bounds of comfort.

BITE: It is not uncommon for the bite to feel "different", or that the lower teeth have "shifted" following surgery. This is usually due to stiffness in the muscles resulting in a slight repositioning of the lower jaw or release of pressure on the adjacent teeth and thus a change in the way the teeth meet. This situation generally returns to normal in 1-2 weeks.

ACTIVITY: Take it easy the first few days after surgery. It is important to get plenty of rest and avoid strenuous activity especially during the first 48 - 72 hours. No heavy lifting, sports, or activities. You may gradually return back to your normal activities after 5-7 days.

HAVING PROBLEMS? If you do not see steady improvement with your recovery, don't suffer needlessly. Some indicators that you may have post-operative problems which should be looked at are: persistent pain and increasing swelling after the first 3-5 days, persistent jaw stiffness, and repeated bleeding or discharge from the surgical site. Call the office and report symptoms so you can be seen as soon as possible. Please contact our office at (425) 318-4789. **Your care and safety are our greatest concerns.**

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