

## ADVANCED AESTHETIC CENTER FOR ORAL AND MAXILLOFACIAL SURGERY

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## SPECIAL INSTRUCTIONS AND CONSIDERATIONS AFTER SURGERY

- ( ) ARCH BAR REMOVAL: Brush teeth and rinse with salt water after each meal and at bedtime. If antimicrobial mouthwash is prescribed, use as directed. Bleeding of gums may persist for up to three (3) days. Tooth brushing will help decrease this inflammation and bleeding.
- ( ) INFECTION: You presented to our office with an established oro-facial INFECTION. OUR TREATMENT IS DESIGNED TO REMOVE THE CAUSE AND ESTABLISH DRAINAGE. THE ASSOCIATED SWELLING USUALLY DOES NOT DECREASE MUCH DURING THE FIRST TWENTY FOUR (24) HOURS, IT MAY EVEN INCREASE SLIGHTLY DURING THIS PERIOD. ABOUT THE SECOND DAY AFTER DRAINAGE, THE SWELLING SHOULD BEGIN TO DECREASE. IF THE SWELLING CONTINUES TO INCREASE AND YOU HAVE A PERSISTENT FEVER, PLEASE NOTIFY OUR OFFICE AS SOON AS POSSIBLE. EXTERNAL MOIST HEAT SHOULD BE APPLIED BEGINNING THE DAY OF SURGERY AND CONTINUED UNTIL ALL SWELLING HAS RESOLVED. A HAND TOWEL SHOULD BE SOAKED WITH HOT WATER. WRING IT OUT AND FOLD INTO A PAD ABOUT SIX (6) INCHES WIDE THAT WILL EXTEND FROM EAR TO EAR UNDER THE CHIN. THE TOWEL SHOULD BE AS HOT AS YOU CAN STAND IT WITHOUT SCALDING YOUR SKIN. PRESS IN PLACE AND HOLD UNTIL IT COOLS. APPLY THE HOT WET TOWEL AS FREQUENTLY AS IS CONVENIENT, BUT AT LEAST ONCE AN HOUR WHILE AWAKE. THE WET TOWEL MAY BE HEATED IN A MICROWAVE OVEN. DISSOLVE 1/2 TABLESPOON OF SALT IN 8 OZ. (ONE GLASS) OF TAP WATER AS WARM AS YOU CAN TOLERATE, YET NOT SO HOT AS TO BURN YOUR MOUTH. HOLD A LARGE MOUTHFUL OF THIS SOLUTION OVER THE SURGICAL AREA UNTIL IT COOLS DOWN. WHEN IT COOLS DOWN, SWISH GENTLY, SPIT OUT AND TAKE A NEW, WARM MOUTHFUL. ALTERNATE FROM LEFT TO RIGHT IF BOTH SIDES ARE INVOLVED. FINISH THE GLASS IN THIS MANNER AND REPEAT HOURLY WHILE AWAKE.
- ( ) PRESSURE DRESSING: You have had an external bandage placed over your chin to help control swelling. This bandage should be left in place for at least for forty eight (48) hours. Do not get it wet.
- ( ) MAXILLARY SINUS INVOLVEMENT: A COMMUNICATION EXISTS BETWEEN YOUR SURGICAL SITE AND MAXILLARY SINUS. NORMAL HEALING USUALLY CLOSES THIS OPENING WITHOUT ADDITIONAL SURGERY. BLOOD-TINGED MUCOUS IN THE NOSE IS NOT UNCOMMON. TO AVOID DISRUPTING THE HEALING AND THE BLOOD CLOT, WE ADVISE YOU TO:
  - \* AVOID BLOWING YOUR NOSE FOR ABOUT TEN (10) DAYS
  - \* IF YOU SNEEZE, DO SO WITH YOUR MOUTH OPEN
  - \* NO SMOKING, USING A STRAW OR SUCKING IN ANY OTHER FORM
  - \* CHEW ON THE OPPOSITE SIDE FROM THE OPENING AS MUCH AS POSSIBLE
  - \* DO NOT RINSE YOUR MOUTH VIGOROUSLY FOR ABOUT FIVE (5) DAYS
  - \* DO NOT "TEST" FOR THE OPENING IN ANY WAY. NO ACTIVITY WHICH CAUSES INCREASED PRESSURE, (I.E., BLOWING UP BALLOONS, PLAYING INSTRUMENTS, FLYING, DIVING, VALSALVA'S MANEUVER [EQUALIZING CAR PRESSURE BY HOLDING NOSE AND BLOWING]) SHOULD BE DONE.
- ( ) WEAKENED JAW: Surgical removal of teeth that are deep in the Jaw can leave it temporarily weakened much like a knot in a piece of wood weakens the wood at that point. It takes six (6) to eight (8) weeks before new bone forms and full strength is reached. During this period, we advise you to avoid situations that might result in a forceful blow to your Jaw. Activities in your P.E. classes and contact sports should be modified accordingly.