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**PRE AND POST SURGICAL INSTRUCTIONS
FOR PERIODONTAL SURGERY**

PRE-SURGICAL INSTRUCTIONS:

*Suggestions for the **week before** your appointment*

1. Pick up **prescriptions:**
2. Purchase an **ice or cold pack:** After surgery you will use cold to help control swelling and discomfort. A soft fluid filled bag that can be reused after placing in the freezer is the best but an old fashioned ice pack will do just fine.
3. Prepare for **soft diet** from foods listed on the last page of these instructions.
4. Arrange for **transportation** to/from office if you are having sedation.
5. Begin **vitamin supplement with minerals** one week before your scheduled procedure (Such as Essential Bodyguard, Theragran-M, Centrum, etc.). Additional vitamin C will aid in the healing process especially if you smoke. Ask about specific dosage (usually 250-1000 mg two or three times a day). Co-enzyme Q has also been shown to be beneficial.
6. Please **refrain from taking aspirin** unless it will cause a medical complication, then ask Dr. Glover. *Aspirin can cause excessive bleeding if taken the week before a surgical procedure.*

*Suggestions for the **day before** appointment*

1. Take the medications prescribed the **evening before** your appointment unless instructed otherwise. This should include all medications *except* the pain reliever. For most patients this will be three medications: 1) a **non-steroidal anti-inflammatory** medication such as ibuprofen, 2) an **oral antibiotic** such as doxycycline and 3) an **antibiotic mouth rinse**.
2. No alcohol or street drugs to be consumed 24 hours before your appointment.
3. Confirm your transportation to and from the office

*Suggestions for the **day of** your appointment*

1. Take all medications as prescribed the **morning** of your appointment. A small amount of water (4 oz.) may be consumed to take the prescribed medication 1-2 hours before your appointment. Take your regular medications such as high blood pressure or thyroid medication also. The only medication this does not include is insulin or blood thinners. Please consult with Dr. Glover if you are taking this medication.
2. If you are being sedated, do not eat for at least **four hours before your appointment**.
3. Wear warm **comfortable clothing** (such as a warm up suit) and minimal make-up. The clothing must be **loose** so we can get the blood pressure cuff on and begin your IV if you are having one. You must remove your contact lenses before the sedation (bring your glasses).

POST-SURGICAL INSTRUCTIONS:

Prescribed medications: Take as directed. Most patients will have a non-steroidal anti-inflammatory medication such as ibuprofen, Motrin, Lodine, or Anaprox prescribed to keep your mouth from swelling. This will decrease swelling and lessen your discomfort. Please take all of this medication as directed. The most common side effect of this medication is an upset stomach.

A narcotic pain killer such as hydrocodone (*Vicodin*) **or** propoxyphene (*Darvocet N-100*) is often prescribed. The best schedule is to take the pain killer between the anti-inflammatory medication, not at the same time.

For example: If you were prescribed ibuprofen every six hours you would then take a hydrocodone three hours after the ibuprofen. You will take some form of medication every three hours - ibuprofen, then three hours later hydrocodone, then three hours later ibuprofen, etc. Your specific instructions may vary but they will be similar.

Take the antibiotic as prescribed but do not take with the other medications unless unavoidable because of the potential for nausea. Do not take within 30 minutes of ingestion of dairy products or vitamins because both of these contain minerals that can inactivate the antibiotic. If you take four medications together and become nauseous it is hard to determine which one was the cause. Most of the time it is the combination and not an individual medication

causing the problems. Also, be aware that antibiotics can interfere with oral contraceptives and take proper precautions.

If your pain is very mild, do not take the narcotic, such as hydrocodone; but be sure to continue the ibuprofen. If your pain is severe, you can take two hydrocodone instead of one but the side effects will increase such as sedation, upset stomach, constipation and nausea. If you have trouble taking the hydrocodone or your pain is simply not that severe you may substitute acetaminophen (Tylenol) for the narcotic and take it between the ibuprofen, if needed. Please do not mix any other over the counter medications with the ones prescribed as there are many potential problems that can occur with a mixture of seemingly innocent medications.

Discomfort: The average patient experiences some discomfort after surgery. If you have been given a prescription medication to alleviate this discomfort do not take on an empty stomach, drink at least 4 oz of water, (preferably 8 oz.) and eat something with your medication. The **cold packs are best for immediate pain relief**. If you wake in the middle of the night, in pain, reach for a cold pack then decide what medication to take. Any oral medication will take 20 minutes to work - a cold pack will work immediately. A sore throat that can persist for several days is common after surgery. If no medication has been prescribed for discomfort, 2 Tylenol, aspirin, or Advil tablets taken with a large glass of water every 3-5 hours should suffice. If for any reason the discomfort persists, do not hesitate to call Dr. Glover.

Swelling: It is not unusual to have some swelling and/or discoloration in the surgical area. Taken as prescribed until all gone the anti-inflammatory medication as well as the antibiotic will help reduce swelling. An ice pack will be of great benefit also. This should be applied to the face as soon as possible after the surgical procedure. It should be held to the face for 15 or 20 minutes, then removed for the same amount of time (return the pack to the freezer). This procedure should be repeated as often as possible for the first 24 hours. After 24 hours, you can use it as often as you would like for pain/soreness relief. Swelling may continue for 2-3 days. After 3-5 days the swelling will begin to go down. Remember, swelling does not mean that you have an infection, it is normal post-surgical occurrence. If you have a temperature over 100 degrees or breathing are hampered, please call Dr. Glover.

Dressing: We occasionally use a dressing around your teeth. Its purpose is to protect these areas. **PLEASE DO NOT DISLODGE THE DRESSING**. It takes about 6 hours for the dressing to harden after placement. Please do not drink any hot liquid for 6 hours after the dressing is placed, since this will prevent the dressing from hardening. In addition, please do not eat any solid food until the dressing has hardened. **SMALL PIECES OF THE DRESSING MAY COME OFF FROM TIME TO TIME**, this will not harm anything as long as it causes no discomfort. If the dressing causes you discomfort, please call our office. In most cases, the dressing will be removed and sometimes replaced at the first post-operative visit.

Bleeding: Do not be concerned if you notice traces of bleeding in your saliva for several hours after the procedure has been completed. It may continue for as long as 24 hours. Do not vigorously rinse your mouth as this will dislodge the blood clot and encourage the bleeding to continue. If you discover a site of bleeding use pressure to control the bleeding. A moist tea bag may be used as a compress against the roof of the mouth or behind the last teeth. If it is coming from an area next to the cheek an ice pack or gentle pressure outside the mouth will often stop the bleeding. Hold gentle pressure in place for 15 minutes before removing to check bleeding. If this fails, repeat by increasing the time by 15 minutes to 30 minutes then 45 minutes. If this does not stop the bleeding, please call me at the office or at home.

Rinsing: We ask that you do not rinse on the day of surgery or at any time that you have bleeding. **After 24 hours** you may rinse with warm salt water (8 oz. glass of warm tap water and a teaspoon of salt). If Peridex has been prescribed, use as directed starting 24 hours after the procedure.

Oral Hygiene: **Peridex** is a powerful antibacterial mouthwash that will assist in plaque control, preventing infection after surgery. It will assist your efforts in cleaning your mouth for the first two weeks following surgery. You should rinse **gently twice a day for thirty seconds**. Dr. Glover is aware that this medication can temporarily stain your teeth. You will not be using it for that long and if it does stain your teeth it is easy to remove. On the other hand, if you do not use it then infection is more likely to occur because of your inability to brush properly. Temporary staining is far preferable to the bacterial infection of the surgical site. Peridex is only a crutch to be used until you are able to brush normally. Peridex can alter taste for a short time. It is important that you maintain as high a level of oral hygiene as possible. In some cases, Chloraseptic sore throat spray may give temporary relief from the discomfort since it works as a local anesthetic. Be sure to read and follow the directions on the label. The cleaner your teeth are the better your gums will heal. Try not to dislodge the dressing if present by rinsing too vigorously.

Oral Hygiene: Normally the first week brush only the biting surfaces of your teeth and your tongue. You can floss gently even with sutures in place if you are careful. As the soreness decreases you can gently clean the teeth with Peridex on a cotton swab at the gum lines. The sutures will begin coming out in 7 to 14 days. We will remove any loose sutures at your first post-operative appointment and determine if it is time to begin brushing. By 21 days you should be brushing and flossing gently and carefully. By 28 days all soreness should be gone and normal brushing and flossing can resume.

Activity: We ask that you refrain from physical activity the day of the surgical procedure. It would be preferable to have "a light day" the three days after the surgery. After that let your good judgment be your guide.

Sensitivity: Your teeth may be sensitive to hot, cold or sweets. This sensitivity usually slowly diminishes as healing occurs. The teeth in the areas affected by the surgery may look somewhat longer or in some cases shorter since the gingival tissue (gums) have been moved. This may also result in spaces between the teeth resulting in food lodging between teeth. This can be gently removed with floss or a toothpick.

POST-SURGICAL DIETARY SUGGESTIONS

A good diet will favorably affect both healing in the area of surgery and the way you feel. We suggest that you maintain a high protein diet. We also recommend that you drink at least 8 large glasses of liquid per day for the first 2 weeks following surgery. For the first 48 hours after surgery, eat small amounts every 2-4 hours especially when taking medications.

Protein drinks: Ensure, Sustacal, Resource, Meriten, Portagen, etc.

Dairy Products: Plain whole milk, skim milk, buttermilk, yogurt, soft or grated cheese

Juice: Fruit juices (except those with sugar added), Gatorade

Soup: All soups including vegetable, cream soups made with milk, and bouillon.

Pasta: All kinds

Eggs: Soft boiled, scrambled, poached, or in omelets. (Use cheese for extra nutrients)

Meats: Ground meat or finely minced, or in the form of broth

Fish: Creamed tuna, salmon, shellfish (minced), fish loafs and the like

Vegetables: Mashed or baked potatoes, pureed vegetables, or vegetable juices, etc.

Fruits: Bananas, stewed fruits, and pureed fruits

PATIENTS HAVING GINGIVAL (GUM) GRAFTS:

You likely will have a surgical stint custom made for you, It is for your comfort as well as the control of bleeding. Please leave the surgical stint in place for the first 24 hours following your surgery. After 24 hours remove the stint, brush it off, rinse your mouth and place the stint back in your mouth. If bleeding occurs, apply pressure to the far back roof of your mouth with your thumb by pushing the stint against the palate. If the bleeding does not diminish after a few minutes of applied pressure, move your finger to try and find the area where the bleeding is coming from. When you find the correct pressure point the bleeding will stop. Hold pressure on the site for at least 15 minutes with your head elevated. If bleeding continues repeat and increase the time by 15 minutes to 30 minutes then 45 minutes. If this does not stop the bleeding please call Dr. Glover. The surgical stint is best worn until your after your first post-operative visit, except to rinse your mouth and brush the stint twice daily. Healing will progress whether you wear the stint or not. If you are more comfortable without the stint carry it with you at all times for at least 3 weeks in case bleeding unexpectedly begins. The gum grafts will appear white after the surgery. Do not brush the gum grafts until instructed to do so by one of my staff members.

Dr. Glover's Emergency Telephone Numbers: *Home: (972) 401-3306* *Cell Phone: (214) 552-5593*
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