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SURGEONS P.L.C.

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YOUR DENTIST'S SPECIALIST

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AZ MAX  
SURGEONS P.L.C.

# *Postoperative Instructions*

Your Care and Recovery  
After Surgery



YOUR DENTIST'S  
SPECIALIST

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Thank you for choosing AZ Max Surgeons for your oral surgery needs.

Our practice has been providing excellent care to Arizona communities since 1992. We are commonly known simply as "AZ Max". Our doctors are leaders in the field of Oral and Maxillofacial Surgery and have been recognized by their peers as "Top Docs" in the dental community since 2003. We strive to provide the best care for our patients and use the most advanced, state-of-the-art surgical techniques and materials.

We want you to have the best recovery possible following surgery. We developed this postoperative booklet to help you recover from surgery as quickly as possible with minimal issues. These instructions have been tailored specifically to your surgery today.

Please carefully follow our postoperative instructions to help ensure a successful surgical outcome, maximize your comfort after surgery, and minimize your recovery time.

Should you have an emergency, there is always a doctor on-call for you. If you have any non-urgent questions or concerns during your recovery, please call (480) 830-5866 during regular office hours (Monday - Thursday 8am to 5pm and Friday 7am to 3pm) to reach our staff or your surgeon.



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- During the first 24 hours after surgery, you must be under the care and supervision of a responsible adult.
- Refrain from any physical activity for at least 48 hours after surgery. Strenuous activity should be avoided for five to seven days after surgery.
- Eat something liquid or soft ASAP after surgery.
- Don't take pain medication or antibiotics on an empty stomach.
- Prevent excess swelling by applying ice packs to the outside of the face next to the surgical area(s), alternating for 20 minutes on/20 minutes off throughout the entire day immediately after surgery (as soon as is comfortable) and for the next three postoperative days.
- Stay ahead of pain by taking pain medication as recommended until you get a sense of how your body responds to the medication.
- Do not take more than the maximum dose of any medication during a 24 hour period (see **PAIN MEDICATIONS** section)
- For the first seven days after surgery avoid touching the surgical sites with anything, including your tongue.
- Normal brushing can be resumed the day following surgery in all areas except surgical sites. To keep your mouth and surgery site(s) clean, use saltwater rinses (1/2 tsp salt per cup of warm water) after meals on days one through seven after surgery.
- Manage bleeding by properly using gauze (see **BLEEDING** sections)

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**SUPERVISION**

*The patient - whether adult or child - should not be left alone today.* A parent, guardian, caretaker, or responsible and fully capable adult (able to provide full assistance and transportation) must be present at all times during the 24 hours after surgery to provide any necessary postoperative assistance.

**ACTIVITY**

After your surgery, stay home and rest. Follow our postoperative instructions. As you will be under the effects of sedation, don't operate any vehicle, machinery, stove, microwave or run hot water, to reduce the risk of injuring yourself. Rest in a recliner chair or rest with your head and shoulders elevated above the level of your heart. **Do not return to work or school or engage in sports, exercise or other strenuous activities until otherwise instructed by your surgeon.** If you have scheduled a return appointment, it is important to keep it.

**CLEANING YOUR MOUTH**

Don't touch or "play" with the surgical site(s) or sutures. Don't allow your tongue to "investigate". This will cause injury or loosen the sutures.

**BATHROOM USE**

To prevent a fall today, someone must accompany you to the bathroom.

**EATING**

- Do not eat anything until you are alert and awake enough not to choke on food or drink.
- Remove any gauze from the mouth before eating or drinking.
- Do not use a straw to drink for 24 hours after surgery.

**It is very important to only have liquid diet while your lips, tongue, cheeks, gums or teeth are numb. Any chewing while numb could result in injury.**

Start with cool liquids (milkshakes, smoothies, fruit juice, tea, etc.). Avoid anything with small seeds (strawberries, raspberries, blueberries, kiwi, etc.). **It is important to eat/drink something as soon as possible once you get home to reduce the chance of nausea to avoid getting dehydrated.** Dehydration could cause headaches, muscle cramps, nausea, dizziness, fainting, or a low-grade temperature.

## SEQUENCE OF EVENTS: DAY OF SURGERY

The key to a rapid and uneventful recovery is to eat food before taking pain medications, staying ahead of the discomfort with pain medication, applying ice packs to the face outside the surgical area(s), and refraining from any physical activity. The following is a recommended sequence of events for the day of your surgery. *Your surgeon may customize this sequence for your specific needs.*

### FIRST HOUR AFTER SURGERY

- Drink a liquid food as soon as you are able. Start slowly with food intake.
- Drink at least 1/2 cup (four ounces) of something and let it settle for 15 minutes.
- If you are able, take your first dose of ibuprofen and the antibiotic.
- Continue to eat and finish at least one cup (eight ounces) in the next 30 minutes. You may eat more if you like, but during the first hour after surgery don't consume more than half the amount of a meal you would normally eat.
- Rest with your head elevated. There is no need to wake up a sleeping patient to eat, drink, or take medication.
- While the patient is awake, proceed with medication and food intake as recommended.
- Apply ice packs to the face next to the surgical site(s), alternating between periods of 20 minutes on and 20 minutes off.

### 2ND HOUR AFTER SURGERY

- Let one cup (or more) of food settle for 15 minutes.
- If you were prescribed a narcotic/Tylenol prescription, take one tablet. Let the tablet settle for 15 minutes.
- Drink/eat at least another half cup (four ounces) of recommended food.

*Do not consume more than the amount of a normal meal during the first two hours of surgery.*

### AS THE DAY PROGRESSES...

- Continue sipping on liquids throughout the day.
- Replace gauze as needed (see section on Bleeding for instructions).
- Keep your head elevated.
- Get plenty of rest.

## EATING SOLID FOOD

Once the numbness wears off, you may eat any food that is soft. Appropriate food choices include soups, pureed foods, applesauce, chicken broth, protein drinks, yogurt, Jell-O, ice cream, dairy products, popsicles, canned peaches or pears, bananas, mashed potatoes, refried beans (mashed), any cooked vegetable you can easily mash with a fork, soft noodles, eggs, soft breads, soft chicken and tuna.

There are many other types of soft foods. *It is very important you eat. Otherwise, you are going to feel worse. Please avoid hard, crunchy foods (chips, nuts, seeds, popcorn, etc.) for the first 14 days of your recovery.*

The temperature of the foods you eat should be moderate. *Hot foods can burn your mouth and/or increase swelling.*

Frequent, small meals every two to four hours are better than one or two large meals after surgery.

## **+++ Care the Day After Surgery**

### **SUPERVISION**

**The child patient still needs supervision.** Adult patients normally don't need supervision now unless they are still taking narcotic prescription medication every four hours. Those still taking narcotics CANNOT operate vehicles or machinery, cook, or engage in other physical activity.

### **ACTIVITY**

No physical activity today. Stay home and rest. Keep the head and shoulders above the level of your heart. You may bathe or shower but do not take a long, hot shower or bath. This will increase swelling. Keep your tongue, fingers, etc. away from the surgical site(s).

### **CLEANING YOUR MOUTH**

You may carefully brush your teeth today. Avoid the surgical site(s). Do not disturb the sutures (stitches). Use minimal toothpaste. Do not vigorously rinse. Do not spit. Do not use mouthwash unless prescribed by your surgeon. Gently rinse with saltwater (1/2 teaspoon per cup of warm water) after each meal and after brushing. **If you notice fluid moving from the mouth into the sinus this indicates a sinus opening may have occurred. Please call AZ Max on the next business day. In the meantime, be gentle with your sinus. Do not blow your nose, and try to keep fluids from passing from your mouth into the sinus.**

### **RETAINERS**

You may resume wearing your retainer if it causes no pain. Don't wear it if it puts any pressure on the surgical site(s). It can take up to five days before you can wear your retainer. It may not seat completely on your teeth initially, but you will be able to slowly seat it into place over time.

### **EATING**

Continue eating soft foods along with liquids. Avoid sharp, crunchy, and chewy foods or foods with seeds. They will injure the surgical site(s) and cause infection. Do not eat hot foods because they may increase swelling. Do not use a straw.

### **PAIN MANAGEMENT**

Pain and swelling typically increase during the first four to five days after

surgery. Do not be alarmed if you have more discomfort today than yesterday. If you can tolerate ibuprofen, continue to take it every six hours or four times daily to control pain and reduce swelling. Take the narcotic medication as prescribed only if pain can't be managed by ibuprofen alone. You can alternate between ibuprofen and the narcotic/Tylenol medication throughout the day. **DO NOT exceed the maximum allowed doses.**

If you would prefer not to take the narcotic and are able to tolerate Tylenol, you may substitute Tylenol alone for the narcotic/Tylenol combination medication. You may also alternate between taking 600 mg ibuprofen and 1000 mg Tylenol throughout the day. **Do not take more than 3200 mg total ibuprofen in a 24 hour period. Do not take more than 4000 mg Tylenol in a 24 hour period.** If you need to start taking the narcotic/Tylenol medication again, restart it only after waiting at least four hours after the last dose of regular Tylenol.

### **BLEEDING**

As you talk and eat more during recovery, you may notice bleeding that comes and goes or taste blood throughout the day. This is common for the first 24-48 hours after surgery. Rarely will you need to use gauze. If a clot has formed above the level of the gum tissue and it is bleeding continuously, carefully wipe the excess clot away with gauze and hold direct pressure on the site for 30 minutes. Changing the gauze too often can prevent clot formation.

### **SWELLING**

Swelling will start today. Continue to ice the surgical areas during the day for 20 minutes on, 20 minutes off. Keep your head elevated. No physical activity. Limit talking.

### **NUMBNESS**

Numbness from injections can last for eight hours or longer. Swelling and inflammation inside the jaw can also cause numbness. If you are still numb after 24-48 hours call us during regular business hours to schedule a follow-up appointment.

### **NAUSEA/VOMITING**

Nausea or vomiting are rare the day after surgery unless you take medications on an empty stomach.

## +++ Care Two Days After Surgery

**SUPERVISION, ACTIVITY, EATING, and PAIN MANAGEMENT** are the same as **ONE DAY AFTER SURGERY**

### **SWELLING**

Expect to have more swelling today than yesterday. Swelling will continue to increase, and generally peaks four to five days after surgery. It is important to continue icing over the surgical areas the entire day for 20 minutes on, 20 minutes off. Keep your head elevated. Limit physical activity. Limit talking. It is not unusual to be more swollen on one side of the face than the other.

## +++ Care Days Three and More After Surgery

### **SWELLING**

Facial and oral swelling will peak around days four and five and then start to lessen over the next seven days. If the swelling continues to increase after day five following surgery, please call AZ Max.

### **BRUISING**

Occasionally, bruising may develop and can last from seven to 14 days. Bruising can move from the surgical site(s) to the cheek, lower eyelids, chin, neck and even the chest area. This is the normal progression of facial bruising.

### **SUTURES**

The sutures (stitches) are slow to dissolve. They will weaken and can begin to fall out in fragments after day three. Do not pull on any sutures. If loose ends begin to unravel, you can trim them back with small scissors or come into our office to have them trimmed. If the sutures are not completely gone in 14 days, please call AZ Max. If a suture comes out prematurely, it does not need to be replaced.

### **NUMBNESS**

Please call if you are still numb in your teeth, lips, or chin four to five days after surgery.

### **PAIN MANAGEMENT**

It is not uncommon for patients to have discomfort for seven days, but most people are now beginning to switch from narcotic medication to taking only ibuprofen and/or Tylenol as needed for pain control. Rarely should the narcotic medication need refilled. *If pain is improving but you still need narcotic pain medication please call our office.*

If your pain worsens after day five and the pain medication is ineffective, you may have developed a dry socket. Please call AZ Max if the pain worsens after day five.

### **ACTIVITY**

Most people return to work and/or school the by the fourth or fifth day after surgery. You may resume light workouts by day five and your normal physical activity by day seven. When physically active, you may experience increased pain or soreness. If this happens, discontinue the activity. This will not result in a compromised surgical result, but could delay your recovery.

### **CLEANING YOUR MOUTH**

Continue to gently brush your teeth and rinse with saltwater. Usually by day eight, you may brush the gums around the surgical site(s) as they have begun to heal. Once you are comfortably able to brush the surgical site(s) with a toothbrush and toothpaste, you can discontinue the saltwater rinses. You may return to using a mouthwash if that is also a part of your normal oral hygiene practice. Continue irrigating the surgical site(s) at least once daily until the gums completely close over the surgical site(s).

### **EATING**

You may begin to eat your food at any temperature that is comfortable since no more swelling should occur. Continue eating a soft diet until day seven, when you may return to a regular diet. Continue to refrain from eating hard/crunchy foods like chips, popcorn, nuts, crunchy peanut butter, croutons, etc. Don't eat foods with seeds, like strawberries, blueberries, poppy seeds, sesame seeds, raisins, cranberries, and other foods until the gums have completely closed over the surgical site(s).

## HEALING OF SURGICAL SITES

It is common for the extraction site(s) to open up as the sutures begin to weaken. Continue to rinse with saltwater to keep the sites clean. Clots in the surgical site by this time will look an off-white or yellow-white color because the saliva has washed away the blood pigments. A clot may look like a piece of food. Do not pick at the surgical site(s) or try to remove these clots. Saltwater rinses will wash food debris out of the extraction sites.

**On DAY FIVE start using the irrigation syringe** provided to you to gently rinse out the extraction sites. Use lukewarm water or lukewarm saltwater to irrigate with. The extraction sites may take up to six weeks to close completely. Continue using the irrigation syringe to flush out the extraction sites until they are completely closed. If you feel there is a piece of food caught in an extraction site for more than one day and you are not able to remove it with the irrigation syringe, please call AZ Max so we may remove it.

## +++ Common Postoperative/Recovery Concerns

### BLEEDING

After surgery, you won't leave our office until the initial clot has formed in the surgical site(s). Medicines that thin the blood, excessive talking, chewing in the surgical area(s), spitting, vigorous rinsing, and/or increased blood pressure will prevent clot formation and cause bleeding. A slow trickle of blood for the first 8 hours after surgery is expected, and your saliva will be discolored for 24-48 hours. If you take any medications that thin the blood, expect intermittent slow trickles for the first three days after surgery.

After surgery gauze will be placed over the surgical site(s). Keep pressure on the site(s) with the gauze while you are in the recovery area for the first 30 minutes after surgery. Remove the gauze after 30 minutes (expect it to be soaked with saliva and blood). Replace with fresh gauze.

Once home, keep your head above the level of your heart (30 degrees or more). This will minimize postoperative bleeding. When sleeping, prop yourself up with pillows or sleep in a reclining chair. **To prevent choking, DO NOT leave it in the mouth while sleeping.** It takes up to 8 hours after surgery for a mature clot to form. If this clot is dislodged by any activity of the mouth (talking, eating, chewing, spitting, rinsing, etc.), bleeding may restart. Increased blood pressure may also cause bleeding to begin. If you take blood pressure medication or heart medication, take your usual dose after surgery at the intervals your physician has prescribed. Postoperative pain can increase blood pressure and cause bleeding. Please follow our prescription pain medication recommendations to reduce pain and postoperative bleeding.

You were sent home with extra gauze to be used if bleeding is more than a small trickle. If this occurs once you are home following surgery:

- Gently wipe away any partial clot or blood that has formed above the gum tissue with gauze.
- Fold one gauze pad into a small square and place it directly over the surgical site(s) that are bleeding and press against the gauze with a finger for five minutes.

- Bite down on the same gauze that has been placed directly over the surgical site(s) for the next 60 minutes. **You must keep firm pressure on this gauze for 60 minutes.**
- After the 60 minutes, remove the gauze. It will be soaked with saliva and blood. You should see, at most, only a small trickle of bleeding from the surgical site(s). Blood should not “well up” from the site(s).
- Fold one gauze pad into a small square and place it directly over the surgical site(s) that are bleeding and press against the gauze with a finger for five minutes.

If active bleeding continues, follow the above instructions again and make sure you are putting direct pressure with your finger on the site(s) of bleeding. This should stop the bleeding. If active bleeding continues:

- Remove the soaked gauze.
- Fold a dry gauze around a tea bag (not herbal, regular tea only), and place it over the site(s) of bleeding, biting down on it for the next 60 minutes.
- If bleeding continues after 60 minutes of biting down on the tea bag, use your finger to push the tea bag firmly over the surgical site(s) for five minutes. Then, leaving the tea bag in place, bite down on it for 60 minutes more.

**IF BLEEDING PERSISTS AFTER ALL THE ABOVE ATTEMPTS, PLEASE CALL OUR OFFICE AT (480) 830-5866 FOR FURTHER INSTRUCTIONS.**

Because your mouth can be numb for hours after surgery, drooling may occur. Expect some blood stained saliva. It is normal for blood tinged saliva to pool in your mouth when you sleep. Protect pillows, chairs, etc. with old towels or sheets to prevent blood stains.

*Tip: Blood stains are effectively removed from materials by using hydrogen peroxide repeatedly applied to the fresh blood stain until it bubbles away. A good laundry detergent applied directly to the blood stain, or presoaking the garment in OxyClean, prior to washing will usually get the blood stain out. It is best to use clean old clothes, old sheets, and old towels during recovery.*

## BONE GRAFT

If you had a bone graft procedure, know that it generally takes four to six months to grow bone. Please be patient with your body while it is “under construction”. A healthy diet, daily multivitamin, and a calcium/magnesium/Vitamin D bone supplement will give your body the necessary “building blocks” to grow bone. Please consult your physician and other reputable sources regarding your specific dietary and medical needs.

The bone graft material is loose particles similar in size and consistency to small grains of sand. It is common throughout the first four weeks after surgery to find several loose particles against the gum tissue or in your mouth. This is to be expected. Do not worry if you happen to swallow some of these particles.

The surgical area of the bone graft will feel “bulky”. This is normal. Do not press or feel around the surgical area(s) with your fingers, your tongue, or with any instrument or object. If you feel the need for someone to check the surgical site(s), please call our office and you will be scheduled to be seen.

## BOWEL IRREGULARITIES

Narcotics, dehydration, or antibiotics can cause bowel irregularities. If you develop constipation, stop the narcotic and drink more fluids. A good rule of thumb is to drink about a gallon of fluids daily while using antibiotics and pain medications. You may also use a stool softener, such as Dulcolax or Miralax. Antibiotics may cause loose stools or in severe case diarrhea. Probiotics, Kefir, and yogurt with live cultures are recommended for daily use when taking antibiotics. If you develop diarrhea, stop the antibiotics and call AZ Max.

## BRUISING

Bruising may occur after surgery. Bruises will change in color (from purple/black fading to green/yellow) and may spread to other areas of the face and neck. If bruising occurs, it usually appears at the peak of swelling (3 to 4 days after surgery) and may last up to 21 days.



## CARE OF THE SURGICAL SITE(S)

*Leave the surgical site(s) alone for 7 days after surgery. Carefully follow the instructions provided on pages 1-7.*

### CLEANING YOUR MOUTH

Carefully start brushing your teeth once numbness is gone, and at least twice daily thereafter.

- Floss your teeth as soon as you are able
- Do not vigorously rinse for the first 7 days after surgery
- Avoid brushing and flossing directly on/around the surgical site for 7 days. You can gently clean the surgical site after 7 days
- Avoid pulling on the sutures (stitches). They will dissolve/fall out on their own
- After four weeks you should have minimal discomfort at the surgical site(s) when you clean your mouth.

If you were prescribed Peridex (chlorhexidine) mouthwash, use it twice daily for the first 14 days after surgery. If there is any tenderness of the gums at the surgical site after 14 days, use Peridex nightly until the gums at the surgical site are no longer tender.

**Proper Use of Peridex:** place one tablespoon (15cc) of mouthrinse in your mouth and in contact with the surgical site. Let it sit for one minute, then very gently dispel the mouthwash out of your mouth into your sink. **Do not eat or drink anything for at least 30 minutes after using Peridex.**

### EATING

Carefully follow the instructions provided on pages 1-7 for information about when you should resume eating, and recommended food choices, after your surgery. In general, you'll feel better by eating and drinking as soon as possible. Frequent, small meals (every two to four hours) are better than one or two large meals after surgery. After tooth removal, you should avoid chewing in the surgical area(s) for the first 7 days following surgery. **After bone graft or dental implant surgery, it is very important to avoid chewing in the surgical area(s) for the entire healing phase of four to six months after surgery.**

## IMPLANT SITES

Typically you will have a titanium post (healing abutment) attached to the dental implant. As the swelling subsides, if you had a healing abutment placed, you will notice a dome shaped metal post appear slightly higher than the gum line. Avoid chewing on this healing abutment. Please start to very gently clean the abutments (along with your other teeth) 7 days following your surgery.

### I.V. SITE IRRITATION

During the first week after surgery, a small amount of redness, irritation, or bruising in the immediate area (about the width of your pinky) where the I.V. was started is common. **If pain, swelling, increasing tenderness or firmness of the vein or surrounding skin occurs, call us at (480) 830-5866.**

### NAUSEA/VOMITING

Nausea or vomiting may be a side effect of the general anesthesia or I.V. sedative used for your surgery. Nausea may also be caused by motion sickness during your ride home, prescribed antibiotics, pain medication, and swallowing blood. AZ Max patients rarely feel nausea after surgery because we give an anti-nausea medication intravenously during surgery, which works well for most people. If you have nausea and/or vomiting during the 24 hours after surgery, it is usually from swallowing small amounts of blood on an empty stomach. Do not take pain medication or antibiotics on an empty stomach. Eat or drink one of the recommended foods (see pages 1&3) and wait 15 minutes before taking the antibiotics or pain medication. Vomiting is usually a one-time event to clear the stomach. You may gently rinse the mouth with water to get the bad taste out of the mouth. **It is important not to disturb the clots that are in the surgical sites.** For nausea relief, drink two ounces (1/4 cup) of cola or ginger ale with most of the carbonation stirred out. Pour the drink over crushed ice and sip small amounts over a 20 minute period. If there is still some nausea, repeat with another 1/4 cup cola/ginger ale. As soon as you can, resume eating some of the recommended foods. Please call us at (480) 830-5866 if you are experiencing nausea, and especially vomiting, that is preventing you from eating or drinking. Prescription medication may be required for your comfort and to allow for proper nutrition and dehydration prevention.

## NUMBNESS

For your comfort, we use local anesthesia to numb the surgical site. The numbness can last for 4-12 hours, and sometimes longer, because it is a long-lasting local anesthetic. When numbness is present please be careful while eating as you could accidentally bite a lip or tongue. If numbness persists longer than 48 hours please call AZ Max during regular business hours to schedule a follow-up appointment.

Children or other patients needing special care should have a responsible adult help keep the patient from injuring the numb areas (lips, chin, tongue and cheeks). Children tend to rub the numb areas with their fingers or bite their numb lips. Please keep them from doing this as rubbing or biting a numb area could cause significant injury.

## RETAINERS/TEMPORARY CROWNS

When an immediate temporary plastic crown or bridge is not appropriate for you following your bone graft or dental implant surgery, a removable prosthesis (retainer, flipper, stay plate, essix tray, or partial denture) may be used to provide you with a cosmetic tooth replacement until the permanent restoration can be completed.

The removable/temporary tooth replacement should not put pressure on the gums in/around the area of the surgical site or near the metal healing abutment of the implant (if placed). Swollen gum tissue during the first 14 days after surgery may make it difficult to wear the retainer. If there is any pressure on the surgical site from the retainer, please see us (or whoever made the retainer) for an adjustment.

If a temporary crown has been attached to your implant, it is for esthetics (looks) only. Don't chew, bite, or touch the temporary crown with your teeth or tongue. Chewing on the temporary crown may result in failure of the implant. If you feel the teeth opposing the temporary crown touching it, call our office at (480) 830-5866 to have the crown adjusted.

Do not brush the temporary crown until after the sutures/stitches have come out. Do not floss around the temporary crown for the first 14 days after surgery. After 14 days, use the pull-through method to floss (once you have passed the floss between the temporary crown and adjacent

tooth, pull the floss out between the teeth rather than popping it out from between the temporary crown and the adjacent tooth).

*If you feel like the temporary crown is being touched or moved while chewing/biting or at any other time, please call our office by calling (480) 830-5866.*

## SINUS OPENING

If while drinking you feel water/liquid go into your sinus, air escaping from an upper molar extraction site when you blow your nose, or develop a nose bleed after upper jaw surgery, you may have a sinus opening. Call us on the next business day to be seen by your surgeon. There are special instructions we will give you to aid in the healing of the sinus opening. Don't swim or blow your nose until your surgeon has approved these activities.

## SUTURES

Don't disturb sutures (stitches); don't touch them with your tongue, fingers, or any other instruments. The sutures break down into small fragments and are usually gone by 14 days after surgery. It is common to notice a little blood in the saliva when the sutures begin to break down and unravel. It is not necessary to replace sutures that come out early. The combined length of the knot and tail of the suture(s) can be as long as 10mm (1/3 of an inch). As the sutures break down, a "tail" may form. If you are comfortable doing so, you may cut the suture to within 10mm of the gums. We are happy to do that for you if you prefer. Call us at 480-830-5866 to be seen for suture trimming.

## SWELLING

Swelling is a normal response that begins immediately following surgery. Minimizing swelling will help reduce postoperative pain. The key to preventing swelling is to apply ice right after surgery and keep at it all day. Use the ice pack provided by AZ Max (or ice cubes in a plastic bag, frozen peas/corn, etc.) for 20 minutes on, 20 minutes off over the jaw area where the surgery was performed. There will be little swelling during the first 24 hours after surgery, but don't let this fool you into thinking there will be no swelling. It usually peaks three to five days after surgery and can last as long as 14 days.

Follow the instructions for applying ice, keep the head/shoulders elevated above the heart for the first three days after surgery, taking ibuprofen (as instructed in the Pain Management section), and limiting talking and physical activity during this time will also help keep swelling down.

### TEETH IN A DAY (MY SMILE TODAY OR DIEM)

With the My Smile Today or DIEM dental implant procedure, a fixed healing bridge is your full upper and/or lower implant supported restoration. A WaterPik is useful to gently irritate out food debris that may get between your fixed bridge and your gum tissue. 14 days after surgery, use a perio brush or super floss to clean between the bridge and your gums.

Avoid clenching during the 4 to 6 months after surgery; this is required for proper healing of the bone around the dental implants. Soft food is required the entire time the healing bridge is in place to avoid dental implant failure or breakage of the temporary bridge. Brush the temporary bridge with a soft bristle toothbrush daily.

### ABOUT PAIN

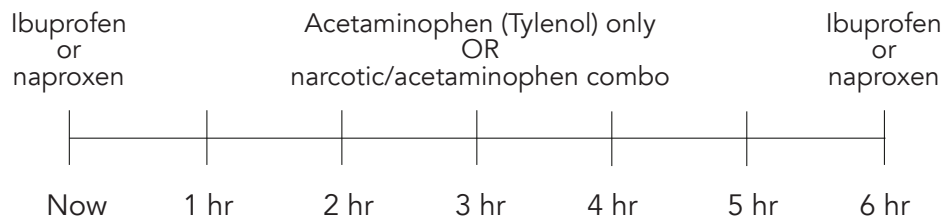
The human body is wired to report everything to the brain, which is the "command center". This is done by sending nerve signals with different messages (pressure, temperature, pain, taste, vibration, etc.) from the different areas of the body back to the brain. The signals or messages we want to manage after surgery come from the pain nerve fibers.

The most effective approach to pain management is a combination of rest, head elevation and ice, along with over-the-counter (OTC) and prescription medications as prescribed by your doctor(s). Other medications may be prescribed for you according to your unique needs. It is impossible to completely "turn off" pain nerve fibers, so it is important to understand you will have some discomfort after surgery. Discomfort can be minimized by following post-surgery care instructions.

***Many prescription medications and medical conditions do NOT allow for the use of certain pain medications. Before taking ANY pain medication (whether OTC or prescription), consult your doctor and/or pharmacist if you have any questions or concerns. Always follow the advice of your physician and pharmacist regarding proper use of pain medication with your specific medical condition and the use of medication(s) required for your medical condition(s).***

The following recommendations are general and will need to be customized to your specific medical condition(s). The use of any required prescription medications must be carefully managed for proper health, and to prevent liver and kidney damage. Your AZ Max surgeon may have prescribed narcotic or other pain medication(s). It is important to carefully follow dosage instructions for all OTC and prescription (including narcotic) pain medications.

The key to managing postoperative pain is to stay ahead of the discomfort by alternating between pain medications (when able to). If you fall behind on pain management by taking medication only when you start to feel pain, more pain medication than usual will be needed to decrease the pain, which could increase the negative side effects of the medication(s). We recommend taking medications according to the schedule on the next page (page 18).



*If you choose to use prescription pain medication, take ONLY as prescribed. Do not exceed the prescription dosing on your bottle. Taking OTC (over-the-counter) pain medication and prescription pain medication together is dangerous. You must calculate the total dose of all ingredients - narcotic, acetaminophen, and ibuprofen/naproxen - to know your total 24 dose. Permanent liver or kidney damage may occur if you take more than the maximum daily dose.*

#### IBUPROFEN (MOTRIN or ADVIL) or NAPROXEN SODIUM (ALEVE)

A non-steroidal anti-inflammatory medication, ibuprofen and naproxen sodium are in the same broad family of drugs that includes aspirin and many other drugs that treat muscle and joint pain. They work to relieve pain at the source and help reduce swelling. If you were prescribed ibuprofen (Motrin or Advil), take it as soon as you have eaten something. Some people prefer naproxen (Aleve) instead of ibuprofen for pain control. **DO NOT TAKE ibuprofen (Motrin or Advil) and naproxen sodium (Aleve) together. You must only take one or the other.** For most adults, 600 mg of ibuprofen every six hours is the typical starting dose, but this may change depending on your size and how well your stomach tolerates medication. **The MAXIMUM typical adult dosage of ibuprofen is 3200 mg during a 24 hour period. DO NOT EXCEED THIS DOSE.** You may not need to take the maximum dose to control your pain and reduce swelling. Kidney damage can occur if more than 3200mg of ibuprofen is taken in a 24 hour period.

If you have kidney disease, any compromise of your kidneys, are on medication that already stresses the kidneys, or take medication to thin the blood, DO NOT take ibuprofen or naproxen unless permitted by your physician. Do not take ibuprofen or naproxen sodium and any other non-steroidal anti-inflammatory medications at the same time.

#### NARCOTIC/ACETAMINOPHEN (TYLENOL)

*Everyone at AZ Max is dedicated to patient safety. To learn more about how our surgeons and team aim to help patients wisely make medication and pain control choices, please see our Statement on Narcotic Use on page 23 of this booklet. Misuse of narcotics can cause excessive sedation (sleepiness) which could lead to death.*

Hydrocodone/APAP (Vicoden or Lortab) is a combination medication that has both the narcotic hydrocodone and acetaminophen (Tylenol). Each tablet has 325mg of acetaminophen in addition to the narcotic.

Oxycodone/APAP (Percocet or Roxicet) is the combination of both the narcotic oxycodone and acetaminophen (Tylenol). Each tablet has 325 mg of acetaminophen in addition to the narcotic.

Your prescription bottle will have two numbers separated by a slash (/) symbol. The first number represents the dose of the narcotic and the second represents the dose of acetaminophen (Tylenol). Take your first dose to see how the narcotic will affect you and manage postoperative pain. If you have a sensitive stomach or are underweight, you may want to start with 1/2 tablet. Narcotic medications are used for moderate to severe pain control. Many find they are able to comfortably manage their postoperative pain using only over-the-counter (OTC) medications. If you wish you use OTC medications for pain control, then take your usual dose of OTC ibuprofen or naproxen sodium (Advil, Motrin or Aleve) or OTC acetaminophen (Tylenol) 15 minutes after you eat or drink, and preferably before the numbing agent from your surgery wears off.

**The MAXIMUM dosage of the prescribed narcotic medication is 8 tablets in a 24 hour period. The MAXIMUM dose of acetaminophen (Tylenol) is 4000mg in a 24 hour period. Taking more than this can cause liver damage as acetaminophen is toxic to the liver in high doses.**

Severe liver or kidney damage may occur if you consume three or more alcoholic drinks every day while using acetaminophen (Tylenol), ibuprofen (Motrin or Advil) or naproxen sodium (Aleve). Consult your physician or pharmacist for proper dosing instructions. Stay well hydrated while taking pain medications to avoid liver, kidney, or stomach problems.

Your maximum dose of the different pain medications may be lower if you are sensitive to medication, have kidney or liver conditions, or are already taking medication that stresses the liver or kidneys. If you have any heart or vascular conditions, decreased cardiac output or blood flow, pain medication dosage will be lowered as recommended by your physician. Always follow a lower dose as recommended by your physician or pharmacist, and use the lowest pain medication dose possible. Pregnant women must always consult with their OB/GYN before taking ANY medication.

### TYPICAL ADULT DOSE FOR PAIN MEDICATIONS

Ibuprofen (Motrin or Advil): 400mg to 800mg orally every 6 to 8 hours for five days, then as needed for pain. Do not exceed 3200mg in a 24 hour period.

Naproxen sodium (Aleve): 220mg orally every 8 hours for five days, then as needed for pain. Do not exceed 2 capsules/tablets in any 8 to 12 hour period.

Acetaminophen (Tylenol): 325mg to 650mg every 6 hours for five days, then as needed for pain. Do not exceed 4000mg in a 24 hour period.

### TYPICAL GERIATRIC (AGE 75+) DOSE FOR PAIN MEDICATIONS

Ibuprofen (Motrin or Advil): 200mg to 400mg orally every 8 hours for five days, then as needed for pain. Do not exceed 1600mg in a 24 hour period.

Naproxen sodium (Aleve): 220mg orally every 12 hours for five days, then as needed for pain. Do not exceed 2 capsules/tablets in any 8 to 12 hour period.

Acetaminophen (Tylenol): 325mg to 650mg every 8 hours for five days, then as needed for pain. Do not exceed 2000mg in a 24 hour period.

*Always follow the pain medication dosages recommended by your physician or pharmacist.*







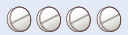


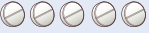


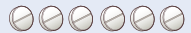

### USUAL PEDIATRIC (AGE 12 & UNDER) DOSE FOR PAIN MEDICATIONS

Ibuprofen (Motrin or Advil): Children age 6 months to 12 years: See table below; use of weight to select dose is preferred. Doses may be repeated every 6 to 8 hours (maximum 4 doses in 24 hours).

Weight (pounds)	Age	Dosage (mg)
12 - 17	6 - 11 months	50
18 - 23	12 - 23 months	75
24 - 35	2 - 3 years	100
35 - 47	4 - 5 years	150
48 - 59	6 - 8 years	200
60 - 71	9 - 10 years	250
72 - 95	11 years	300

Please see the illustrated chart below for pediatric dosage of various acetaminophen (Tylenol) forms:

### ACETAMINOPHEN (TYLENOL) TYPICAL PEDIATRIC DOSE *never give your child more than 4 doses in 24 hours*

CHILD'S WEIGHT & AGE	INFANTS' TYLENOL SUSPENSION LIQUID 160 MG/5ML	CHILDREN'S TYLENOL SUSPENSION LIQUID 160 MG/5ML	CHILDREN'S TYLENOL MELTAWAYS CHEWABLE TABLETS 80 MG	JR TYLENOL MELTAWAYS CHEWABLE TABLETS 160 MG
UNDER 2 YEARS	If your child is under 2 years of age, be sure to ask your doctor for the right dose.			
24-35 lbs   2-3 years	 5 mL (1 tsp)	 5 mL (1 tsp)	 2 tablets	_____
26-47 lbs   4-5 years	_____	 7.5 mL (1 1/2 tsp)	 3 tablets	_____
48-59 lbs   6-8 years	_____	 10 mL (2 tsp)	 4 tablets	 2 tablets
60-71 lbs   9-10 years	_____	 12.5 mL (2 1/2 tsp)	 5 tablets	 2 1/2 tablets
72-95 lbs   11 years	_____	 15 mL (3 tsp)	 6 tablets	 3 tablets

## SIDE EFFECTS

Side effects from narcotics include nausea/vomiting, headaches, constipation, urinary retention (bladder distention), or hyperactivity. Stop taking the narcotic if any of these side effects occur.

**Itching** with no visible rash can occur with narcotics. 25mg to 50mg of over-the-counter diphenhydramine (Benadryl) may be taken every six hours to control itching. Continue to take the narcotic as needed for pain control. CAUTION: Taking Benadryl and narcotics will increase sleepiness. Please be careful and start with the lowest dose of Benadryl to avoid excessive drowsiness.

**Dizziness** or a lightheaded feeling is a common side effect of general anesthesia or I.V. sedation. When standing up, do so slowly to prevent dizziness. If you are having dizziness, ask your caretaker to assist you. Follow the prescribed dietary recommendations closely. Dehydration can contribute to dizziness.

**Fainting** can occur when standing too quickly. If you are dizzy or lightheaded at any time, get assistance from your caregiver.

## ANTIBIOTICS

Follow the recommended dose carefully. Do not wake up to take the antibiotic. It is meant to be taken during waking hours. Most antibiotics we prescribe should be taken after eating to reduce the chance of nausea. If your prescribed antibiotic needs to be taken on an empty stomach, it will say so on the prescription bottle.

Antibiotics may cause stomach or abdominal pain or loose stools because they affect bacteria in the intestines. Taking probiotics (found over-the-counter in the vitamin section of most stores) one hour before or two hours after taking antibiotics will replenish your intestine with good bacteria and lessen abdominal pain or loose stools. Taking probiotics is a recommendation, but not a requirement.

**IMPORTANT: Antibiotics may render birth control pills ineffective during the menstrual cycle in which they are taking. Use of an additional method of contraception during this time is recommended.**

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AZ MAX  
SURGEONS P.L.C.

## + AZ Max Statement on Narcotic Use

At AZ Max we are dedicated to the safety of our patients. We understand the concerns patients have about adequate pain management to provide for a comfortable postoperative recovery. We, like others in our community, are sensitive to the opioid crisis and the potential addiction associated with narcotic usage. With years of experience, we are aware that patients have individual pain tolerances and differ in the way that medications work to control their pain. We are not averse to prescribing medications to assist with pain management but want our patients to be cautious when using narcotic medications. Recent studies have shown that Tylenol (acetaminophen) and Advil (ibuprofen) in combination have been equally effective in alleviating postoperative pain as compared to narcotic medications. Again, we are not suggesting that patients do not need narcotic medications but only that judicious usage of the narcotic medications be instituted by our patients to help avoid potential substance abuse.

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