VALLEY ORAL AND MAXILLOFACIAL SURGERY
11811 Hinson Rd Ste 100
Little Rock, AR 501-444-2429
ADULT BONE GRAFTING AND/OR IMPLANT Post-Operative Instructions

Grafting/Implant – Many times a bone graft is done before implant placement, but can also be done at the same time as implant placement. Be very gentle with the grafted or implant area for 2 weeks. It is important to protect the soft tissue (gums) over the graft/implant and for the graft/implant to be immobile.

- Do not chew food in the area of the graft or implant, you will need to eat a soft diet for 2 weeks (or longer if directed by surgeon)
- Do not irrigate/spray the graft or implant site with salt water or chlorhexidine
- Do not put your fingers in your mouth or pull your lips/gums/tissue near the graft or implant site
- You might feel small sand like particles in your mouth for a few days, you may swallow them or spit them out if preferred
- If an implant was placed it will have a cover screw, healing abutment or a temporary crown on it. A cover screw will be under the gums and will not be visible. A healing abutment will be metal and stick out of the gums a few millimeters. A temporary crown will look like a tooth. You should not bite or chew using the temporary crown or healing abutment. This will put unwanted forces on the implant.
- You should follow-up in 2-3 weeks to evaluate graft/implant healing, the graft/implant will be fully healed after 4-6 months.

Activity - Should be kept to a minimum for 2 weeks. Anything that can raise your heart rate or blood pressure can cause you to bleed and swell; including bending over and lifting more than 15 pounds.

Discomfort and Swelling – This will peak 3-4 days after surgery.

- For the first 24 hours after surgery use ice on the outside of your face (20 minutes on followed by 20 minutes off). On day 2 switch from ice to a warm moist heat to help with muscle stiffness.
- Sleep with your head elevated above your heart using 2-3 pillows below your head and shoulders for the first 4 days after surgery

Bleeding – Is expected and gauze is provided for home use.

- You will leave the office with gauze placed over the bleeding areas in your mouth.
- Gauze should be replaced every 30 minutes until bleeding is dark red, minimal, or has stopped. Remove the gauze from your mouth to eat and go to sleep.
- To replace the gauze, fold 1-2 pieces into a small square and moisten it with water. Look inside your mouth to identify the sites that are actively oozing. Place the gauze right on top of the area that is oozing, then lightly bite down to provide 30 minutes of continuous pressure on that area.
- If the area continues to ooze after 1 hour of continuous biting pressure, then wrap a new gauze around a moistened plain black tea bag and continuously bite on it for 1 hour.
- If you continue to bleed after trying a tea bag call our office: 501-444-2429

Prescriptions – Are provided to help with pain management and to prevent/resolve infection.

- Take prescriptions with food. A light meal or snack will help with gastrointestinal symptoms.
- Antibiotics should be taken as directed on the bottle. If you have an adverse reaction to your antibiotic stop taking it and call our office.
- Narcotics (Hydrocodone or Oxycodone) may be prescribed to use for any breakthrough pain. These are last resort medications and should only be taken if non-narcotic medications are not adequately managing your pain. Remember, pain is an expected result of any surgery and prescribed medications are intended to bring the pain down to a manageable level rather than completely eliminating it.
- For adult patients who are able to take Acetaminophen/Tylenol and/or Motrin/Ibuprofen it should be taken as followed for the first 4 days following surgery:

1. Start by taking 1000 mg (2) extra strength Tylenol as soon as possible after surgery
2. 4 hours later take 800 mg Motrin/Ibuprofen
3. 4 hours later take 1000 mg (2) extra strength Tylenol
    a. If this regimen is not bringing the pain down to a tolerable level then you can begin to take the prescribed Narcotic in place of one of the extra strength Tylenol tablets. So you will take 500 mg (1) extra strength Tylenol and one of the narcotic tablets. Many narcotic tablets contain acetaminophen (Tylenol), so it is important that you reduce the amount of extra strength Tylenol you are taking.
4. Continue this schedule alternating Ibuprofen and Tylenol +/- narcotic every 4 hours until pain is tolerable

Sutures (Stitches) – May be placed over the grafted sites. They will dissolve on their own in 7-10 days.

- It is normal for them to come out before 7 days but if sutures remain after 2 weeks call the office for a follow up appointment.

Brushing and Rinsing – DO NOT brush your teeth or rinse your mouth (with mouthwash) day of surgery. Do not use over-the-counter mouthwash for 3 weeks after surgery. To rinse your mouth rock your head gently from side to side to move it around DO NOT SWISH. Lean over a sink and let it fall out of your mouth.

- Resume normal oral care routine the day after surgery, DO NOT brush on the bone graft or implant sites.
- Begin using a salt water rinse 3-4 times a day 4 days after surgery

Diet – On the way home eat a liquid/smoothie meal to take first dose of pain medication, then once the numbness wears off begin soft diet for 2 weeks. This includes foods like milkshakes, yogurt, ice-cream, hummus, guacamole, cream soup and broth (spoons only, no straws)

- Avoid foods that are hot in temperature, sticky, spicy, chewy, crunchy, and have small nuts/seeds.
- After 2 weeks you may advance to a normal diet unless otherwise directed by your surgeon

Avoid – Spitting, drinking through a straw, forceful rinsing for 2 weeks.

Smoking – Smoking is detrimental to bone graft and implant healing. It increases the risk of infection and failure. Do not smoke for 4 weeks, if you make it to 4 weeks without smoking then you should consider stopping outright for implant longevity and your overall health. Nicotine patches still have the systemic effects of nicotine, but are not as harsh on dental implants as smoking. These can be prescribed by our surgeon if needed.