

**ALVEOLAR RIDGE PRESERVATION PROCEDURE  
POST-OPERATIVE INSTRUCTIONS**

**INSTRUCTIONS SPECIFIC TO ALVEOLAR RIDGE PRESERVATION PROCEDURES**

- Avoid pulling on or lifting the lips and gum area around the surgical site, as these actions could damage the site and jeopardize the results of the surgery.
- Do not chew on the extraction site. Chew on the other side of the mouth if possible.
- No rinsing, no pressure, nor chewing on the grafted site until at least the first post-op appointment, typically one week following the procedure. Further instructions will be provided at that time.
- Some small granules may be found floating in the mouth over the first few days following surgery. This occurrence is normal and not cause for alarm.
- To minimize the number of granules shed from the surgery site:
  - pay particular attention to rinsing, spitting, and sucking habits
  - do not apply pressure with fingers or tongue to the grafted area
- If an appliance such as a denture or partial denture rests in the surgical zone, it will be inserted at the end of the procedure.
- The appliance should be left inserted in the mouth for at least 24 hours following the surgery to allow the natural swelling to follow the contours of the appliance but may be quickly removed to gently rinse the mouth and then reinserted.
- If IV sedation was used during surgery, follow the post-op instructions provided for that procedure as well.

**In addition to the above notes, the following guidelines should be followed to create the most ideal post-operative outcome.**

**Immediately Following Surgery:**

- Check for continued bleeding and refresh gauze if instructed to do so at discharge.
- Apply ice packs if recommended with periodic breaks to prevent frostbite.
- Eat as soon as able. Then take medications as directed.
- NO SMOKING AND/OR VAPING for 1 WEEK following surgery.
- Refrain from any strenuous activity for the first 24 hours following surgery.

**Bleeding:** Some bleeding is normal, and blood-tinged saliva should be expected for 24-36 hours after surgery. If active bleeding persists, the gauze pad may be incorrectly positioned between the teeth instead of over the surgical area. Try repositioning a fresh, folded gauze pad over the surgical area and bite down firmly for about 20-30 minutes. Repeat this process as necessary until active bleeding ceases. If active bleeding persists despite these measures, please contact our office.

**Swelling:** Facial swelling following surgery is normal and peaks approximately 48 hours after surgery. To minimize swelling, apply ice packs to the face adjacent to the surgical area for the first 24 hours following surgery. Ice packs should be applied in intervals to prevent frostbite: 20 minutes on, then 20 minutes off the face. Keep the head elevated while reclined, avoid bending over and strenuous exercise for first 72 hours. If swelling continues for more than one week or if swelling suddenly reappears, please contact our office.

**Bruising:** Discoloration/bruising of skin may occur following surgery. This is normal and will gradually disappear.

**Soreness:** Tightness of the jaw muscles following surgery is common and may cause difficulty opening the mouth to eat or perform proper oral hygiene. This issue may persist for up to 2 weeks. Passive stretching of the jaws is encouraged 24 hours or later after surgery. Moist heat applied to the face adjacent to the surgery area will ease soreness.

**Numbness:** Numbness from the local anesthetic may last for up to 24 hours following the procedure. Occasionally, some numbness may persist for weeks or even months, due to the close association of the roots of the teeth to the nerve that supplies sensation to the surgical area. Call our office if the numbness lasts longer than 24 hours after surgery.

**Oral Hygiene:** Maintaining oral hygiene after surgery is essential to prevent infection. Resume a normal brushing routine as soon as possible after surgery using a soft toothbrush, but be very gentle near the surgical area. Beginning the day after surgery, gently rinse mouth with warm salt water or mouthwash if provided 2-3 times per day for at least 5 days.

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**Medications:** Unfortunately, most surgery is accompanied by some degree of discomfort. Dr. Burns may recommend over-the-counter pain relief medications, or may prescribe antibiotic, anti-nausea, and/or pain relief medications, depending on the type of surgery performed. Before the first dose of medication(s) after surgery, eat a small amount of easily consumed food to minimize nausea.

- For pain relief, follow the pain medication sheet provided. Our goal is to avoid or minimize exposure to narcotics (oxycodone/hydrocodone), but it should be taken if needed.
- Alcoholic beverages and recreational drugs should never be consumed while taking narcotic pain relievers.
- If antibiotics are prescribed, take as directed until completed.
- For female patients, if oral contraceptives are currently being taken, antibiotics may interfere with the contraceptives' effectiveness. An alternative form of birth control measures should be used for the remainder of this cycle.
- If any unusual reactions to medications arise, stop the medication immediately and call our office. If rash, itching, or difficulty breathing occur, a severe life-threatening allergic reaction may be occurring. Please call 911 without delay.

**Diet:** After surgery, eat nourishing food that can be tolerated with comfort. Stay well hydrated. Drink nourishing liquids such as broth or protein shakes following surgery, then advance to pureed and soft foods such as soups, yogurt, scrambled eggs, ice cream, Jell-o, mashed potatoes, and pudding in the first few days following surgery. Return to a normal, nutritious diet when able to tolerate chewing solid food, as proper nutrition aids the healing process.

- Do not use straws and do not swish or spit vigorously for 2 days after the surgery. These actions may dislodge the blood clot.
- Avoid foods such as nuts, seeds, and popcorn that have small, hard pieces which could become lodged in the surgical area.

**Smoking and Vaping:** Smoking and vaping after oral surgery are never permitted. Avoid smoking and vaping for at least 1 WEEK after surgery. Smoking and vaping inhibit the healing process and significantly increase the chance of developing a dry socket or severe infection.

**Sutures:** Most sutures that may have been placed during surgery will dissolve on their own within 5-10 days after surgery. If they dissolve earlier, it is not a cause for concern and should be discarded. Occasionally, non-dissolving sutures must be used. If you were told that your sutures will NOT dissolve (white sutures), then these sutures will be removed at your post-operative appointment.

**Exercise:** Avoid exercise for the first 48 hours after surgery. After the first 48 hours, caution should be used when returning to light exercise, and strenuous exercise should be avoided at least until 72 hours following surgery. Avoid any contact sports that risk injury to the head and neck region (such as martial arts, wrestling, soccer, and football) until the area is fully healed.

**It is our desire that your recovery be as smooth and pleasant as possible. If you have any questions about your progress or any symptoms you are experiencing, please call our office at (574) 875-0547. After office hours, you may contact Dr. Burns at (574) 849-2713. Please leave a message with the patient's name and date of surgery, and Dr. Burns will return your call as soon as possible.**

**Contact our office immediately if you experience:**

- Fever over 101.5°F
- Severe pain that is not controlled by medication
- Excessive bleeding or swelling
- Difficulty breathing or swallowing
- Uncontrolled nausea