

NETCARE ROSEBANK

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NETCARE CONSTANTIA DAY CLINIC

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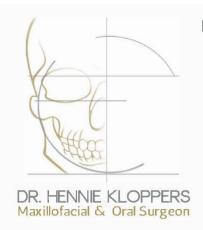
www.jhbmaxillofacial.co.za

BChD, PGDipDent(Oral Surg), DipOdont(Radiol), MChD, FCMFOS(SA), Practice No: 0666327

INSTRUCTIONS FOR THE SURGICAL REMOVAL OF TEETH, INCLUDING IMPACTED WISDOM TEETH AND RESIDUAL ROOTS.

- 1. Depending on how badly your wisdom tooth, or any other impacted tooth or root, is impacted, you will experience facial swelling after the procedure. This could last for up to 5 days. Any infection/ pain, present prior to your procedure could prolong swelling and healing afterwards. As a general rule, the older you are, the more difficult your procedure becomes, and the longer your healing period becomes.
- 2. All operation sites are sutured (stitched) with dissolvable sutures, and do not need to be removed.
- 3. Any intra- operative issue, like sinus involvement with the upper wisdom teeth or upper molars, as well as nerve involvement in the case of the lower wisdom teeth, will be highlighted and explained to you at your consultation prior to your operation. In case of sinus exposure during your procedure, the sinus will be cleaned and closed, and you will be asked not to blow your nose for 10- 14 days. Numbness of the lower lip, due to association of the tooth to the nerve in the lower jaw, could result in numbness of the lower lip, which can last for period of time after your procedure.
- 4. While still asleep and under general anaesthetic, after your procedure, all the areas in your mouth being operated on, will be anaesthetized. As a result, your lower lip, your tongue and your throat, as well as in the back of your upper jaw will be numb. This will last for approx. 2 hours. When you are back in the ward, and awake, you will be handed painkillers to swallow, to assist you in your pain management when your local anaesthetic wears off.
- 5. Once you have been discharged from the clinic, somebody must escort you home. You are not allowed to drive for the next 12 hours after your general anaesthetic procedure. All your post- operative medication will be dispensed to you. This includes antibiotics, painkillers, anti-inflammatory medication, and a mouthwash.
- 6. At home follow a liquidized diet for the next 3 days, after which you can start on a soft diet. View a liquidized diet on the website.
- 7. After every meal, brush your teeth with your toothbrush and toothpaste, and rinse your mouth with the mouthwash prescribed. Take extra vitamins (with a high Vitamin C content- at least 2 grams per day). You can rinse with salt water (a teaspoon of salt, bicarbonate and sugar diluted in a glass of lukewarm water), or any commercial mouthwash in between. It is crucial that you maintain good oral hygiene and keep your general body resistance high.
- 8. Apply ice packs on the outside of your face over the affected areas for at least 3 days. Crushed ice on the inside of your mouth could also help. Once swelling has optimized start using heat packs on the outside of your face and over your joint areas, and do mouth opening exercises. If any difficulty in mouth opening, visit your physiotherapist. Bruising with facial and neck discoloration is normal.
- Bleeding post- operatively is normal (especially after the local anaesthetic wears off). Apply pressure over the affected
 areas, and avoid rinsing. If bleeding persists, contact the rooms. A dry tea bag applied over the bleeding spot is a helpful
 home remedy.
- 10. Abscess formation in the mouth is due to food entrapment in a socket, and manifest as a facial swelling. This usually happens after a few weeks after your operation, and must be drained. Contact the rooms for treatment.
- 11. <u>DENTECTOMIES:</u> The above applies. Your dentures will be placed intra- operatively. Keep them in your mouth and sleep with them. At home remove them and clean your denture and rinse your mouth and replace them immediately. Visit your dentist after 2-3 days for relieving of pressure points. This denture is a temporary denture and must be permanently replaced/ relined after 6 months. You will experience bone loss over a period of time, necessitating the placement of implants. After 10-15 years you might experience total loss of your alveolar bone, which will necessitate a possible bone graft.
- 12. <u>Please refrain from any type of smoking!</u> Smoking, alcohol, sugar, stress and systemic diseases like diabetes and certain drugs may affect the healing process and thus limit successful tissue healing.
- 13. If you have any problem post operatively, or any question, contact our rooms.

For instructions on implant surgery, turn page over.



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INSTRUCTIONS FOR THE PLACEMENT OF DENTAL IMPLANTS:

- 1. The above-mentioned instructions are applicable to the removal of your tooth/ teeth prior to implant placement.
- 2. An implant can be placed simultaneously only if sufficient bone is available to ensure solid primary stabilization of the implant. If sepsis with puss drainage is present, the implant cannot be placed. Weak primary stability will result in the implant be covered by gum, and the implant will be exposed only after bone integration after 4 to 6 months. If the primary stability of the implant is sufficient, the implant will be exposed through the gum, showing the healing abutment after healing of the soft tissue. In case of a missing tooth/ teeth, an implant /implants, will be placed and exposed provided there is sufficient bone both in quantity and quality. Bone, as a rule, falls away after tooth removal. In the case of upper molars associated with the maxillary sinus, a sinus lift with bone augmentation will be performed simultaneously, (It is the floor of the sinus is elevated to create a cavity for bone grafting to facilitate more vertical bone height for implant placement). In this case the implant will be buried by closing the socket, and will only be exposed after 4-6 months. If an implant cannot be placed simultaneously, a sinus lift with bone augmentation will be performed and the implant will only be placed after bone healing after 6-8 months depending on the bone being used. No nose blowing will apply for 10-14 days. A dressing will be placed over the socket/ wound as well. This will be removed after 7 days.
- 3. In the case of central incisors, immediate placement of implants will be attempted in all cases. In most cases immediate temporization will be attempted. (Temporary crown placed).
- 4. In all cases of implant placement, osseo- integration of the implant (to unite with the bone) needs to take place. This takes at least 3-4 months in normal cases, and could take longer in bone graft cases. In this period of time, no chewing is allowed on the implant. Chewing is allowed on the opposite side of the mouth.
- 5. Once healing of the soft tissue surrounding the implant abutment has occurred, the implant must be brushed with your toothbrush and toothpaste.
- 6. In the case of the edentulous jaw, multiple implants will be place to accommodate an over denture "clip on denture" or a fixed bridge. The option which applies, will be discussed at your consultation.
- 7. After the dentectomy with implant placement, your dentures will be relined and fitted. You will not be without teeth. Your diet however will be a liquidized / soft diet for a 3 months period. See the website for a liquid menu.
- 8. <u>Bone augmentation</u> applies to most cases of tooth removal with simultaneous implant placement. Bone augmentation materials are usually synthetic. Very seldom is bone harvested from the hip. Bone can sometimes be harvested in the mouth.
- 9. Osseo- integration of your implant needs to be monitored. Your first follow up visit is after 3-4 weeks after implant placement. Your final visit is after 3-4 months, at which appointment a torque test on your implant will be performed to determine if your implant is suitable for loading (a crown, bridge or denture). X-rays will be taken at each appointment. Your prosthetic phase is done by your dentist/ prosthodontist.
- 10. <u>Please refrain from any type of smoking!</u> Smoking, alcohol, sugar, stress and systemic diseases like diabetes and certain drugs may affect the healing process and implant integration.
- 11. Implant failures: The most common causes of implant failures are, weak primary stability at implant placement due to insufficient or a weak bone. Other causes are premature chewing on the implant, sepsis, any type of smoking and bad oral hygiene. Implant abutments / crowns coming loose, will result in an implant failure. Visit our rooms or your dentist in case of a loose abutment. The screw thread, in the case of a loose abutment or crown can fracture, leaving the screw behind in the implant. If un- retrievable, the implant is lost and must be removed. All failed implants will be removed and replaced after 3 months. In special circumstances your implant will be replaced without costs. However, a surgical fee will be charged to replace the implant.

For instructions on the surgical removal of teeth, turn page over.