

After Extractions and Implant Placement

Post-operative instructions for tooth extractions, bone grafting, and dental implant placement. Includes sinus precautions.

Keep this document for reference during your recovery.

For emergencies, contact your treating office immediately. For general questions, email info@yantperio.com.

First 24 Hours

- **Bleeding:** Some bleeding and oozing is normal after extractions. Bite firmly on gauze for 30 to 45 minutes. Replace with fresh gauze as needed. If bleeding persists, apply a moistened black tea bag with firm pressure for 30 minutes. Contact your treating office if bleeding does not subside after two attempts.
- **Ice:** Apply ice packs to the outside of your face near the surgical area, 20 minutes on and 20 minutes off, for the first 24 hours.
- **Rest:** Rest with your head elevated. Avoid lying flat for the first 24 hours.
- **No rinsing or spitting:** Do not rinse, spit forcefully, or use a straw for the first 24 hours. This can dislodge the blood clot or bone graft material.
- **No smoking:** Do not smoke or use any tobacco products for at least 2 weeks. Smoking dramatically increases the risk of implant failure and dry socket.

Sinus Precautions

If your procedure involved the upper back teeth or a sinus lift, these precautions are critical. Failure to follow sinus precautions can result in graft failure, sinus infection, or implant loss.

Do not blow your nose for at least 2 weeks. If you feel the need to sneeze, sneeze with your mouth open to avoid creating pressure in the sinus cavity.

Do not use a straw for at least 2 weeks. The suction creates negative pressure that can dislodge the graft or open a communication between the mouth and sinus.

Do not hold back sneezes. Sneeze openly through your mouth. Pinching your nose closed while sneezing creates extreme pressure in the sinus.

Avoid flying for at least 1 week after a sinus lift procedure, or as directed by your periodontist. Cabin pressure changes can disrupt the healing graft.

Avoid scuba diving or swimming underwater for at least 4 weeks after sinus procedures.

Nasal decongestant: If prescribed, use the nasal decongestant spray or oral decongestant as directed to keep your sinuses clear and reduce pressure on the surgical site.

Sinus congestion: Some nasal congestion or mild bloody nasal discharge on the side of the surgery is normal for the first few days. If you experience persistent foul-smelling discharge, increasing congestion, or a feeling of air or liquid passing between your mouth and nose, contact your treating office immediately.

Sleeping position: Sleep with your head elevated and avoid sleeping on the side of the surgery.

Medications

Take all prescribed medications as directed. For pain control, alternate Ibuprofen 800mg and Tylenol (Acetaminophen) 1000mg every 3 to 4 hours. Do not exceed 3,200mg of Ibuprofen or 4,000mg of Tylenol in a 24-hour period (these maximums are for healthy adults; those with liver or kidney disease should consult their physician).

Why we recommend both: Ibuprofen and Tylenol work through different mechanisms. Ibuprofen is an anti-inflammatory that reduces swelling and pain at the surgical site. Tylenol blocks pain signals in the brain. When alternated together, they provide significantly better pain relief than either one alone. If you are only able to take one medication, Ibuprofen should be your first choice because controlling inflammation after surgery is critical to both pain management and healing.

If you received Exparel (long-acting anesthetic): Exparel provides numbing at the surgical site for approximately 3 days. Even though you may feel comfortable during this time, we still strongly recommend taking Ibuprofen on schedule throughout those 3 days. When the Exparel wears off, you will experience pain if you have not been keeping up with your anti-inflammatory medication. Staying ahead of the pain is much easier than trying to catch up once it starts.

If antibiotics were prescribed, complete the full course. This is especially important after implant placement and bone grafting procedures.

If a medicated mouth rinse was prescribed, begin using it 24 hours after surgery. Rinse gently for 30 seconds twice daily.

Diet

First 24 hours: Eat only cool or room-temperature foods. Hot food and beverages can increase bleeding and may burn your mouth if you are still numb from anesthesia. Do not chew on the extraction or implant site.

First 2 weeks: Eat soft foods only. Avoid anything hard, crunchy, sticky, tiny, spicy, or acidic. Small particles like seeds, rice, and nuts can become lodged in the extraction socket or around the implant site.

- **Good choices:** Scrambled eggs, yogurt, mashed potatoes, smoothies (no straw), protein shakes, lukewarm soup (after the first 24 hours), soft pasta, oatmeal, cottage cheese.
- **Avoid:** Hard, crunchy, sticky, tiny, hot (first 24 hours), spicy, or acidic foods. No chips, nuts, popcorn, seeds, rice, toast, raw vegetables, or alcohol.

Stay well hydrated. Drink plenty of water.

Oral Hygiene

Do not brush or floss the surgical area for the first week.

Brush and floss all other areas normally. After 24 hours, begin gentle warm salt water rinses (1/2 teaspoon salt in 8 ounces of warm water) or prescribed chlorhexidine rinse. Let the rinse flow gently out of your mouth.

After one week, you may gently brush the surgical area with an ultra-soft toothbrush. Be extremely careful around the implant site or extraction socket.

Implant-Specific Instructions

If a dental implant was placed, the implant needs 3 to 6 months to fuse with the bone (osseointegration). During this time:

- **Do not apply pressure** to the implant. Do not chew on the implant site until your periodontist clears you to do so.
- **Healing abutment:** If a healing abutment (small metal cap) was placed, do not twist, pull on, or play with it. Keep the area clean by gently brushing around it after the first week.
- **Temporary prosthetic:** If a temporary tooth or flipper was provided, follow the specific instructions given for wearing and removing it. Do not bite down hard on a temporary prosthetic.
- **Follow-up:** Attend all scheduled follow-up appointments. Your periodontist will monitor osseointegration and determine when the implant is ready for the final restoration.

Bone Graft Care

If a bone graft was placed at the time of extraction or implant placement:

- Small granules of bone graft material may come loose in the first few days. This is normal and does not mean the graft has failed.
- Do not probe, poke, or suction the extraction socket or graft site.
- Avoid rinsing vigorously, as this can wash out graft material.
- A membrane may have been placed over the graft. Do not disturb it. It will be removed or will resorb on its own.

Activity

Avoid strenuous physical activity, heavy lifting, and bending over for at least 72 hours. Exercise increases blood flow and blood pressure, which can cause bleeding and compromise healing at the surgical site.

What to Expect During Healing

- **Swelling:** Swelling is normal and peaks on days 2 to 3. It will gradually improve over 7 to 10 days.
- **Bruising:** Bruising of the face, cheeks, or jaw may occur and resolves within 7 to 14 days.
- **Jaw stiffness:** Limited mouth opening may occur and resolves within 1 to 2 weeks.
- **Numbness:** Temporary numbness of the lip, chin, or tongue may occur after lower jaw procedures. This typically resolves within days to weeks. If numbness persists beyond 2 weeks, contact your periodontist.
- **Dry socket (extractions):** A dull, throbbing pain that begins 3 to 5 days after extraction may indicate dry socket. This occurs when the blood clot is lost from the socket. Contact your treating office for evaluation and treatment.

When to Contact Us

- Excessive or uncontrollable bleeding
- Severe pain not controlled by medications
- Fever above 101.5 degrees Fahrenheit
- Significant swelling that worsens after day 3
- Air or liquid passing between your mouth and nose (sinus communication)
- Persistent foul-smelling nasal discharge
- Numbness that persists beyond 2 weeks
- Implant feels loose or the healing abutment has come off
- Any concerns or questions about your recovery