SCHIFFMAN ORAL SURGERY

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INSTRUCTIONS FOR HOME CARE - DAYS 3-10

Your swelling and other symptoms peak at the end of day 2. The healing process is ready to begin.

- 1) You may experience soreness in or in front of your ears, which radiates up the side of the head accompanied by a headache, and pain beneath the jaw extending up the cheek toward the eye socket. There may also be purple, yellow, or green bruising of the skin on the face, which should resolve within ten days. Painful ulcers (canker sores) may also appear.
- 2) All of the teeth on the side of the mouth where the surgery was performed may feel sore, initially affecting the teeth closest to the extraction site, but may eventually reach all the way to the front teeth. This is the result of the teeth drifting slightly backwards now that the forward pushing of the wisdom tooth has been stopped.
 - Both of the above symptoms often begin three to five days after surgery and may continue for seven to ten days. They may be relieved by sticking to the soft dietary suggestions on #5 on your blue sheet, and are worsened by trying to eat harder foods. Once you have completed your prescription pain relievers, you may want to take either acetaminophen (Tylenol) or ibuprofen (Advil, Motrin) if you are allowed to take them. If symptoms are accompanied by chills or fever, you must contact the office.
- 3) Do not apply ice to the surgical site after the first twenty four hours. If you wish to apply a compress to the affected area, warm moist heat is suggested.
- 4) Beginning twenty four hours after surgery, rinse your mouth frequently with warm salt water. Dissolve a half a teaspoon of salt in a juice glass of warm water. If you are on a salt restricted diet or have high blood pressure, rinse with a diluted mouthwash.
- 5) Continue to take your antibiotics as prescribed unless you develop diarrhea, upset stomach, or an allergic reaction, such as itching or hives, in which case you should call the office for instructions. Remember not to take the pain medication at the same time as your antibiotic.
- 6) Please try to be meticulous about your oral hygiene the week after surgery. You may brush all areas except for the tooth adjacent to the extraction socket, which should be cleaned with a cotton tip (Q-Tip) dipped in mouthwash. It is suggested that after the bleeding has stopped, you rinse the surgical site at least five or six times daily. Should you sense the presence of food in a socket which you are unable to remove, please call the office for assistance.
- 7) Although the soft tissue (gums) may appear to be healing nicely on the surface, the bony tissues below will continue to heal at a slower rate for several weeks. You may notice a firm raised area on the cheek side of your gums which actually contributes to the healing process. Small spicules of bone may come to the surface over the next several weeks.
- 8) Some discomfort may persist following your check-up visit. In the event of a fever or new swelling, call the office for an appointment, or the answering service at 646-992-9212.

IMPORTANT INFORMATION FOR PATIENTS WITH PARESTHESIA

Oral surgery, like any surgery, has risks that can occur despite the best of care. You may remember discussing these risks before surgery. One risk we discussed was the possibility of a change in sensation of the lip, chin, gums, and/or tongue. This change in sensation is called paresthesia, and it requires close follow-up care.

What Causes Paresthesia?

The nerves that give sensation to the lip, chin, gums, and tongue are very close to where your surgery was performed. When these nerves are disturbed during surgery, they may not function normally. It is important to note that these nerves affect sensation only, not movement. Therefore, you may feel numb or your food may taste different, but the affected areas should move normally. You should be able to smile, speak, and chew as usual.

How Long Will Paresthesia Last?

The duration of paresthesia is unpredictable. It may last days, weeks, months, or, in rare cases, it may be permanent.

What Is The Treatment For Paresthesia?

Paresthesia usually gets better by itself over time. You may notice tingling or other sensations while your nerves are repairing. On the other hand, your sensation may return so gradually that you might not be aware of any improvement. It is possible that all or some of your sensation will return. However, nerve repair surgery, if performed in a timely manner, is sometimes an option for extreme cases of paresthesia. If you decide to have nerve surgery, it is recommended that you consult with a nerve surgery specialist (microsurgeon) and have surgery between two months and six months following your extractions in order to have the best chance of a successful nerve repair.

It is very important for you to keep all of your follow-up appointments so that we can evaluate your progress and develop the best treatment plan for you. During your follow-up appointments, we will perform tests that will enable us to monitor your nerve response and document any changes in the area affected. It is by monitoring changes in your symptoms over time that we are able to advise you of your prognosis and best treatment options. Your failure to return for regular follow-up care may prevent us from helping you regain your sensation to the best possible extent.

In Closing...

We hope that this addresses some of the concerns you may have about paresthesia. We know that paresthesia can be upsetting, and we want you to understand your condition so that we can work together to develop the best treatment plan for you. If you have any questions or concerns at all, please feel free to give us a call. We look forward to seeing you at your next scheduled appointment so that we can work together for the best possible result.