



Beth Israel Deaconess
Medical Center



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

Division of Oral & Maxillofacial Surgery

Postoperative Instructions Following Major Maxillofacial Surgery

Wound care: Do not disturb or probe the surgical area with any objects. The sutures placed in your mouth are usually the type that self-dissolve. If you have any sutures on the skin of your face or neck, your surgeon will remove them on the day of your first follow up appointment. SMOKING is detrimental to healing and will cause complications.

Bleeding: Intermittent bleeding or oozing overnight is normal. Placing fresh gauze over the area and biting on the gauze for 30-45 minutes at a time may control the bleeding. If you had nasal surgery, you may have occasional slow oozing from your nostril for the first 2-3 days. Bleeding should never be severe. If bleeding persists or is severe or uncontrollable, please call our office immediately. If it is after normal business hours, please come to the emergency room and request that the oral surgery resident on call be paged.

Healing: Normal healing after oral surgery should be as follows: the first 2-3 days after surgery, are generally the most uncomfortable and there is usually significant swelling. After the first week, you should be more comfortable. The remainder of your postoperative course should be gradual, steady improvement. If you do not see continued improvement, please call our office.

Physical activity: It is recommended that you not perform any strenuous physical activity for a few weeks after surgery. Do not lift any heavy loads and avoid physical sports unless you obtain permission from your surgeon.

Swelling & Ice applications: Swelling is often associated with surgery. Swelling can be minimized by using a cold pack, ice bag or a bag of frozen peas wrapped in a towel, with firm application to face and neck areas. This should be applied 20 minutes on and 20 minutes off during the first 2-3 days after surgery. If you have been given medicine to control the swelling, be sure to take it as directed.

Hot applications: Starting on the 3rd or 4th day after surgery, you may apply warm compresses to the skin over the areas of swelling (hot water bottle wrapped in a towel, etc.), for 20 minutes on and 20 min off to help soothe tender areas and help to decrease swelling and stiffness. Please use caution when applying ice or heat to your face as certain areas may feel numb after surgery and extremes of temperature may cause serious damage.

Tooth brushing: Begin your normal oral hygiene the day after surgery. Soreness and swelling may not permit vigorous brushing, but please make every effort to clean your teeth with the bounds of comfort. Any toothpaste is acceptable. Please remember that your gums may be numb after surgery. To avoid injury to the gums during brushing, use a child size toothbrush and brush in front of a mirror staying only on teeth.

Mouth rinses: Keeping your mouth clean after surgery is essential. Use teaspoon of salt dissolved in an 8 ounce glass of warm water and gently rinse with portions of the solution, taking 5 min to use the entire glassful. Repeat as often as you like, but you should do this at least 4 times each day. If your surgeon has prescribed a specific rinse, use as directed.

Showering: You may shower 1-2 days after surgery, but please ask your surgeon about this. If you have any incisions on the skin of your face or body, you should cover them with a water resistant dressing while showering. **DO NOT SOAK SURGICAL SITES.** This will avoid getting the area excessively wet. As you may physically feel weak after surgery, initially avoid extreme hot or cold showers, as these may cause some patients to pass out. Also it is a good idea to make sure someone is available to assist you in case if you may need help.

Sleeping: Please keep your head elevated while sleeping. This will minimize swelling and discomfort and reduce pain while allowing you to breathe more easily. One or two pillows may be placed beneath your mattress at the head of the bed to prop the bed into a more vertical position.

Pain: Most facial and jaw reconstructive surgery is accompanied by some degree of discomfort. You will usually have a prescription for pain medication. Some patients find that stronger pain medications cause nausea, but if you precede each pain pill with a small amount of food, chances of nausea will be reduced. The effects of pain medications vary widely among individuals. If you do not achieve adequate pain relief at first you may supplement each pain pill with an analgesic such as Tylenol or Motrin. If you find that you are taking large amounts of pain medications at frequent intervals, please call our office.

If your jaws are wired shut with elastics, you may have been prescribed liquid pain medications. Please remember to rinse your mouth after taking liquid pain medications as they can stick to the braces and can cause gum disease and damage teeth.

Diet: Unless otherwise instructed, only a cool, clear liquid diet is allowed for the first 24 hours after surgery. After 48 hours, you can increase to a full liquid diet, but please check with your doctor before doing this. Avoid extreme hot and cold.

If your jaws are not wired shut, then after one week, you may be able to gradually progress to a soft diet, but **ONLY** if your surgeon instructs you to do so. It is important not to skip any meals. If you take nourishment regularly you will feel better, gain strength, have less discomfort and heal faster. Over the counter meal supplements are helpful to support nutritional needs in the first few days after surgery. A nutrition guidebook will be given to you before you are discharged from the hospital. Remember to rinse your mouth after any food intake, failure to do this may cause infections and gum disease and possible loss of teeth.

Nausea/Vomiting: Nausea is not uncommon after surgery. Sometimes pain medications are the cause. Precede each pill with a small amount of soft food. Taking pain pills with a large glass of water can also reduce nausea. Try taking clear fluids and minimize taking pain medications, but call us if you do not feel better.

If your jaws are wired shut with elastics and you experience nausea/vomiting, try tilting your head and neck to one side. This will allow the vomitus to drain out of your mouth. If you feel that you cannot safely expel the vomitus in this manner, you can cut elastics/wires and open your mouth. Inform our office immediately if you elect to do this. If it is after normal business hours, please come to the emergency room at once, and have the oral surgery on call resident paged.

Graft Instructions: If you have had a bone graft or soft tissue graft procedure, the site where the graft was taken from (rib, head, mouth, skin, clavicle, hip, etc.) may require additional precautions. Depending on the site of the graft harvest, your surgeon will instruct you regarding specific instructions for the care of that area. If you had a bone graft taken from your hip, we encourage you to ambulate on the day of surgery with assistance. It is important to start slowly and hold onto stable structures while walking. As you progressively increase your ambulation, the discomfort will gradually diminish. If you have any problems with urination or with bowel movements, call our office immediately.

Elastics: Depending on the type of surgery, you may have elastics and/or wires placed on your braces. Before discharge from the hospital, the doctor will instruct you regarding these wires/elastics. If for any reason, the elastics or wires break, or if you feel your bite is shifting, please call our office.

Medications: You will be given prescriptions, some of which may include antibiotics, oral rinses, decongestants, nasal sprays and pain medications. Use them as directed. A daily multivitamin pill for 2-3 weeks after surgery is recommended but not essential.

If you have any questions about your progress during business hours, please call our office at 617-638-4350, extension 1. After normal business hours or on weekends, call the page operator at Beth Israel Deaconess Medical Center at 617-667-7000 and have them page the on call Oral & Maxillofacial Surgery resident.