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Oral & Maxillofacial Surgery

**PRE & POST PROCEDURE INSTRUCTIONS
DENTAL EXTRACTIONS**

PRE-PROCEDURE:

*If you are having IV Sedation, **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE NIGHT PRIOR TO YOUR PROCEDURE.** (Includes water, gum, mints, etc.)

*If you do eat or drink anything after midnight, you will either have to proceed with local anesthesia or be rescheduled to another day.

*If you have a **COUGH, CONGESTION, SORE THROAT, OR ANY OTHER COLD OR FLU SYMPTOMS,** please contact our office and your procedure may need to be rescheduled.

*You will need a responsible adult to drive you home and help care for you the night of the procedure.

*You must be 19 years of age to sign your consent forms. If you are under 19, your parent will need to be present to sign the consent forms and present for any follow-up appointments

***DO NOT SMOKE!!**

*Wear comfortable clothing and a short-sleeve shirt.

DISMISSAL INSTRUCTIONS:

IV sedation medications may affect your awareness and judgment. You may be sleepy for 24-48 hours. For the next 24hrs you should follow these instructions:

*Rest. No strenuous activity or heavy lifting.

*Do not make important decisions.

*Do not operate machinery, motor vehicles, or appliances

*Have responsible adult available to stay with you-24hrs.

*Have someone care for small children if necessary.

Medications: Some pain is normal with extractions. Take pain medicine as prescribed. Notify our office if the pain medicine is causing nausea and/or vomiting or your pain is not relieved or decreased to a tolerable level. Do not take the pain medicine on an empty stomach.

Other: *No strenuous activity for 36-48hrs.

*Keep head elevated while resting.

*Diet as tolerated. Drink plenty of fluids!

*DO NOT smoke or use straws for at least 1 week.

*Maintain good oral hygiene. If applicable use mouth rinse twice daily for 1 week and then discontinue use.

*If bleeding continues/should occur:

-Place gauze in mouth at extraction site and bite down for 15 minutes.

-Recheck area, if bleeding continues, **Contact our office.**

If you have any questions after you are discharged, and your concerns are not addressed in these instructions, contact our office at **402-435-0044.

Patient/guardian signature

Date/Time