Discharge advice following dental extractions

Definition
A dental extraction involves the removal of a tooth and is carried out under local or general anaesthetic. Teeth are extracted for a variety of reasons:
- pain
- abscess (pocket of infection)
- dental decay (caries)
- periodontal disease (disease of the structures that support your teeth, e.g., gums, membranes and bone)
- prosthetics (false teeth)
- orthodontics (correction of irregular teeth or to make space)
- cosmetic, if appearance cannot be restored.

What does the operation consist of?
- The operation is carried out under local or general anaesthetic.
- Local anaesthetic (usually lidocaine) is injected to numb an affected tooth and its surrounding area. This can take place in a clinic or treatment room.
- General anaesthetic involves being prepared and taken to an operating department, where you are put to sleep. You then wake up in the recovery area of the theatre department and are closely monitored by nursing staff. You are given medication to relieve any pain or sickness, as well as a drip (intravenous fluids) to hydrate you. The drip is taken down once you are able to drink enough fluids.

What happens afterwards?
- In both situations, you may have a small bite pack placed inside your mouth, over the area where you had the teeth out. This pack is made of gauze, onto which you bite down. The resulting pressure helps stop any bleeding from the socket(s).
- After general anaesthetic, you are returned to the ward once you are awake enough. You will need to rest in bed as you may still feel sleepy. We strongly advise you not to leave the ward area as you may feel unwell. Your condition will continue to be monitored with medication to keep you comfortable.
- Fluids and a light diet can be taken as soon as you are feeling able. For the first 24 hours, however, you need to avoid mouthwash, mouth rinses, hot drinks, hot food and strenuous activity. These can dislodge the healing blood clot in the socket(s) and make the area bleed.

Good dental hygiene
When food containing refined carbohydrate or sugar is eaten, some of it sticks to the plaque on your teeth. Plaque is a clear, sticky film of bacteria and food debris that coats the surface of the teeth. Some of this bacteria turn the sugar in your mouth into acid, which then dissolves away the enamel and dentine causing cavities and decay (dental caries). All plaque bacteria cause periodontal disease, which means that the condition of the gums, membranes and bone gradually deteriorates. Over time, the teeth lose their supporting structures and may fall out.

The following is advised to help prevent dental disease:
- Avoid snacks or acidic drinks between meals.
• Reduce your refined carbohydrate or sugar intake.
• Brush twice-daily with fluoride toothpaste.
• Use dental floss twice-daily to remove food debris from between your teeth.
• Visit your dentist at least once per year for check-up, cleaning and scaling.

Discharge advice

• Your surgeon will advise you on a suitable period of recovery at home. This will depend on the reason for having teeth removed, the number of teeth removed and the type of anaesthetic used. If you need a sick certificate, please ask the medical staff before you leave.
• Avoid mouthwash, mouth rinses, hot drinks, hot food and strenuous activity for the first 24 hours. These can dislodge the healing blood clot in the tooth socket(s) and make the area bleed.
• After 24 hours, gently rinse your mouth with warm salt water (one teaspoon of salt in one glass of warm water) 3-4 times per day, always after meals. Be very careful not to dislodge any blood clot in the tooth socket as these stop the area from bleeding and help protect from infection.
• If you do experience bleeding from the socket, apply pressure by biting down on a clean, rolled-up handkerchief that you have placed over the area. Do this for about ten minutes. Repeat if still bleeding. If bleeding has not stopped after about 30 minutes, contact F5 ward for advice.
• You will experience varying degrees of pain and it is advised to take regular painkillers to relieve any pain/soreness/jaw ache.
• You may experience some swelling to your jaw and face for a few days. A cold compress can help ease this. Sleeping propped up with an extra pillow can also make you feel more comfortable.
• Any bruising of the jaw muscles can cause stiffness and this tends to wear off after seven to ten days.
• Eat a well-balanced but soft diet for a few days until you feel able to chew carefully with your remaining teeth.
• Brush your teeth carefully and avoid any sockets. A child toothbrush is smaller and may be easier to use.
• It is rare, but sometimes there may be tingling or numbness to the face, lips or tongue. This tends to settle after a few days.
• Make sure you complete any course of antibiotics given to you. The nurses will explain how and when any medication should be taken.
• Avoid smoking or at least cut down. Smoking affects the body’s ability to heal and can irritate the open sockets, which will cause more pain. Staff can offer advice, aids (e.g., nicotine patches) and support group contacts to help you quit.
• Contact F5 ward if you have any concerns following discharge home or if you experience any worsening pain or swelling, uncontrolable bleeding from the sockets or a raised temperature.

Contact information

F5 ward: 023 8120 6511
023 8120 4644

NHS Direct: 0845 4647

If you need a translation of this document, an interpreter or a version in large print, Braille or audio, please call 023 8120 4688 for help.