

FREQUENTLY ASKED QUESTIONS

PLEASE NOTE: Appointment times may vary.

Things come up before, during, and after surgeries that are beyond the doctor's control that may affect appointment times. Often, patients may need to use the restroom which sets the surgery time back 10-15 minutes every time as they must be transferred safely and securely to and from the bathroom, all the equipment to monitor vitals must be disconnected and reconnected. We also like to monitor our patients through the recovery period after the sedation and this is different for everyone, and some patients take longer than others to get to a comfortable level.

PLEASE READ YOUR PRE/POST OPERATIVE INSTRUCTION SHEET.

1. When does the patient take the prescribed medication after the surgery? All our patients will receive a discharge summary sheet that explains when to take their medication(s) the day of the surgery and continuing into the next few days until the medication is gone. The pain medication is optional.

2. What do I do while driving the patient home and what if they fall asleep in the car?

If they are very sleepy you should lay them back in the seat and make sure they have their seatbelt fastened. If they fall asleep and you need to walk them into the house, they may not respond to you calling their name, you may need to shake their shoulder a little or drop some water on their forehead or neck. This should wake them up.

3. What if I can't wake them up?

Remember the sedation is a sleeping pill so it's normal for them to fall asleep. If water doesn't work, an ice pack on the neck or forehead may work better.

4. If the patient is sedated what do I do once I get them home?

Make sure when you get them out of the car that you assist them and keep an eye on them for the rest of the day as they will still be sedated. To assist, you can hold them by their elbow and have them keep their head up. If the patient is very sleepy you may want to have someone help you.

5. If I'm unable to stay with the patient while they're sedated what should I do? Make sure the patient is brought home and helped into the house. They need to lie down on either the couch or the bed. It would be a good idea to have their medications with their instructions available next to where they will be resting so they will know what to do & when to take their medications.

6. How long does the sedation last?

The sedation is in their system up until 12 hours from when the patient took it, there is a "half-life" of 6 hours, meaning the medication starts to wear off but is still in their system. They may start to feel normal by then but, still, keep a close eye on them.

7. How do I give them their medication while they're numb? Place tissue or paper towel underneath their chin and have them take the prescribed medication with liquid, tilt their head back, and have them swallow. Then do a "Pill Check" to check if in fact they did swallow their medication.

8. What should they eat?

The patient will be numb at least 3 to 4 hours after surgery. We recommend eating after numbing wears off. Be careful as they could bite their cheek, tongue or burn themselves. Liquids would be best until the numbing wears off soft foods for the first day: i.e., milkshakes, soups, scrambled eggs, yogurt, cottage cheese, mashed potatoes, macaroni & cheese, pudding, Jell-O. It would be best if they continue eating soft foods for a few days depending on what type of periodontal treatment they have had.

9. How do they keep the area clean? And when can they floss and brush? They will need to be very careful around the area of surgery. There will be limited home care, this includes no flossing until we see the patient back in 2 weeks. After surgery they may start rinsing lightly with warm salt water or Peridex. Only brush the teeth that were not worked on. If no dressing was placed, then they may start lightly brushing when the area feels more comfortable. **For patients with tissue grafts there are special instructions on the pre/post operative instruction sheet.**

10. If the “putty” (dressing) falls off right after the surgery or shortly after should I be concerned?

No, but do call the office to make sure it does not need to be replaced. Do not start brushing if the “putty” falls off within the first 24 hrs. Lightly rinse after the first 24 hrs. with warm salt water or, Peridex, if prescribed.

11. What if the patient’s pain medication is not helping?

Please call our office and we will prescribe something stronger. If it happens to be after office hours, please leave a message on the emergency number & you will be called back. If the pain medication says they can take two – try 2 every 4 hours and be sure to keep taking your anti-inflammatory, the prescription has 2 refills in case the patient runs out, get it refilled and continue taking. If the pain is too severe, call Dr. Eastman, his home phone number is on the back of the discharge summary sheet.

12. If the patient had tissue grafts what should I expect when the “putty” (periodontal dressing) falls off?

Don’t be alarmed when the “putty” falls off. You will notice a material on the inside of the “putty” that closely resembles a tissue graft. This is not the patient’s graft it is a material we place over the graft. If, or when, the “putty” comes off, the patient can lightly rinse with warm salt water. No flossing or brushing near the gum. The patient should not pull out their lip, this is VERY IMPORTANT. Also, no biting into any foods, they should cut their food into small pieces.