



PHOENIX

ORAL & FACIAL SURGERY

POST OPERATIVE INSTRUCTIONS FOR FACIAL OR RECONSTRUCTIVE SURGERY

- General: Stay home, relax, and keep your head elevated the first day. Do not drive for 24 hours.
- Nausea and vomiting are very common from anesthesia and can last up to 24 hours after the surgery. If you have been prescribed medications to manage these symptoms, take them as directed.
- For patients who have undergone operations which involve having their jaws stuck together, hollow cheek tubes can be placed between the sides of the teeth and cheeks to allow for easier air passage. Congestion from facial surgery can frequently make nasal breathing impossible, so the tubes should be used to help breathe through your mouth. Cheek tubes are especially helpful the first week when swelling and congestion of the nose is most prominent.
- Most oral sutures are dissolvable and will fall out within 2 weeks. Skin sutures may require removal and will be evaluated for healing and removal at your follow up visits.
- You may use a water pik on the lowest setting for the first week. Rinse your mouth 3 frequently with salt water or Peridex. Do not use straws or suck on food since this will create tension and pressure in the mouth that can tear open wounds or cause prolonged bleeding.
- You may apply ice to the face, 20 minutes on then off, for the first 24 hours postoperatively. After that, you may switch to moist heat. Vaseline or Aquaphor can be applied to the lips to keep them moist and prevent cracking..
- Your doctor will prescribe medicines for you at the time of your pre-op visit or before discharge. These may include analgesics, antibiotics, antiemetics (nausea), or other medications. Keep in mind that narcotic pain relievers may contribute to constipation.
- Avoid straining or heavy lifting more than 10 pounds for 2 weeks postoperatively. Activities such as swimming, strenuous exercise, or movements that involve bearing down or straining should be avoided. Elevating the head using extra pillows may reduce swelling, discharge, and throbbing in the days following the surgery. Getting out of bed and moving around without straining is recommended, however. You should not drive, operate heavy machinery, or make important decisions if you are taking narcotic pain medications.
- If you've had surgery involving the nose or upper jaw, your nose and sinuses may be heavily congested and filled with fluid and blood clots. You will not be able to breath through your nose for the first 2-3 weeks. It is common to have episodic bleeding from the nose for the first week or



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two following surgery. This is typically self-limiting and should not be brisk or bright red in nature. If the blood flow is high, however, then you should go to the nearest ED for more urgent evaluation. You should not blow your nose and avoid sneezing (by using the nose rubbing trick or keeping your mouth open) for the first month.

- A pureed or blenderized diet will be needed especially if your teeth are stuck together with tight rubber bands. Meals can include liquids such as juice, broth, milk products, and supplements (Instant Breakfast, Boost, Ensure). Your doctor will advise you when it is safe to begin chewing. Most large pharmacies carry a variety of supplements in different flavors. Condiment (squeeze bottles) or turkey basters from the grocery store work great to fill with food and squirt along the sides of the teeth / cheek. Alternatively, you may try to sip directly from a cup or use a feeding syringe. It is essentially impossible to overeat in this condition, so you should try to have at least 4-6 “meals” a day to be sure that you are receiving ample nutrition and hydration. You should also try to stay well hydrated with water or clear fluids. Ice chips or popsicles can be very helpful during the first few days of recovery.
- Do not allow skin wounds to get wet for the first 5 days.
- **NO SMOKING OR ALCOHOL!** This will always increase the chance for infections or poor wound healing.