

INSTRUCTIONS AFTER EXTRACTIONS

Bleeding

You may notice small amounts of blood in your saliva and may wake with some blood on your pillow. This is normal. If there is excessive bleeding, apply with pressure a moistened tea bag or gauze to the site for 10-15 minutes. Sit in an erect position. If the bleeding continues, apply again with pressure for another 10-15 minutes. If excessive bleeding continues, please call the office.

Swelling

Maximal swelling occurs 2-4 days after surgery. In order to minimize this swelling, it is important to apply ice to the cheek in the first 24 hours after surgery. The ice pack should be held against the cheek for 20 minutes, followed by 20 minutes without, then 20 minutes with, and so on. After 24 hours, apply moist heat to the cheek. If swelling is severe and you are unable to swallow, go to the ER immediately.

Discomfort

To minimize discomfort, 800 mg of Ibuprofen should be taken every 6-8 hours following surgery for a minimum of 3 days. This will reduce the inflammation and give comfort. A stronger medication may be prescribed.

Oral Hygiene

Do not rinse today. Tomorrow rinse with warm salt water. 1 teaspoon salt mixed with warm water. Do this approximately 5 times daily for 3-5 days following extraction. Do not brush the teeth located in the surgical area. It is important to keep your other teeth clean, so brushing should be performed normally in the other areas of the mouth.

Diet and Exercise

Eat soft foods, such as fish, soup, pasta, mashed potatoes, and yogurt. Avoid tough or sharp foods such as bagels and potato chips. Chew on the other side from the surgical site. Avoid excessive exercise.

DO NOT SMOKE, SPIT, or use a STRAW for the first 24 hours after the surgery. During this time, a blood clot is forming which is important for the healing process. Smoking, spitting, and straw use create suction in your mouth that will disrupt the blood clot and impair healing.

Please call the office if you have any concerns regarding the progress of your recovery.
617-723-6300

WHAT SHOULD I EXPECT?

- 1) It is not uncommon for a tooth to be uncomfortable or even to experience pain immediately after receiving root canal treatment. This should subside within 7-10 days.
- 2) Your tooth will be sensitive to biting pressure and may even appear to feel loose. This feeling is a result of the sensitivity of nerve endings, and bruised ligaments in the tissue just outside the end of the root. This should subside within 7-10 days.
- 3) You may feel a depression or rough area (on top of a back tooth or the back of a front tooth) where the entry to the canal was made. There is a soft, temporary material in that area, which may wear off to some degree before your next visit.
- 4) Occasionally the treated area may become slightly swollen; this is a result of inflammation. Anti-inflammatory medication is helpful in reducing this temporary healing process.
- 5) The removal of the pulp of the tooth will prevent sensitivity to hot, cold and decay. This does NOT protect the tooth against further cavities.

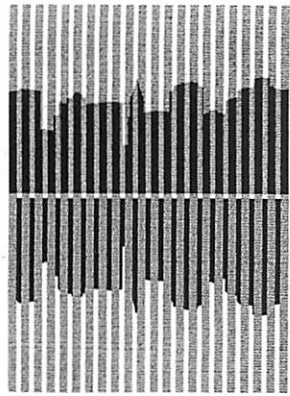
In order for the best possible results to be achieved, we ask that you follow these instructions:

- A. **WHAT MEDICATION SHOULD I TAKE?** – Take an anti-inflammatory where possible and/or something for pain relief within one hour of leaving the office; this should be done before the anesthesia begins to wear off. Generally one dose every six hours as needed. One dose is 3-4 tablets of 200mg each of Ibuprofen (i.e., Advil, Motrin).
 - i. If you cannot take Ibuprofen because of a medical condition or a stomach disorder, (Tylenol) acetaminophen can be taken instead, although it does not contain anti-inflammatory properties.
 - ii. As an alternative to ibuprofen, 1 tablet of Aleve (50 mg) every 12 hours is also recommended.
 - iii. Aspirin and aspirin containing products are **not** advisable, as they tend to increase bleeding from the area that was treated.
 - iv. Sometimes antibiotics and painkillers are prescribed to help control infection, and pain. Please take all medication as directed.
- B. **WHAT CAN I EAT ON THE DAY OF TREATMENT?** – Liquids are allowable, beverages not too hot, soup, shakes, and other foods that do not require excessive chewing of the treated area/tooth for two hours. For the period of two hours after the appointment, then soft foods (i.e., pasta) are allowable.
- C. **WHAT FOODS SHOULD I AVOID?** – Please avoid chewing gum, caramels, popcorn, or other sticky, soft candy, bread, or bagels, which could dislodge the temporary material or fracture your tooth.
- D. **DO NOT WAIT!** The root canal specialists cannot be held responsible for failure of the root canal in cases where excessive delay in restoration of the tooth (i.e., crown).

Please call if you are experiencing symptoms more intense or of longer duration than those described above, if you encounter significant post-operative swelling; develop a fever, rash or numbness, if the temporary material comes off or feeling "high" when biting, if your tooth fractures, or if you have any questions, or concerns not addressed in this letter.

CROWN & BRIDGE POST-OPERATIVE INSTRUCTIONS

- 1) Numbness of your lip, tongue or palate may persist for several hours. Do not chew gum, eat, drink hot liquids or smoke until the anesthetic has worn off to prevent injury from accidentally biting or burning oneself.
- 2) Soreness may occur at the tooth, the surrounding gum, the injection sites or the jaw joint. If these occur, apply moist heat to the affected area and take an analgesic/anti-inflammatory, such as ibuprofen or similar product (if medically able to do so).
- 3) A temporary restoration made out of acrylic or resin has been placed on your tooth. Avoid sticky or crunchy foods to avoid loosening or fracturing this restoration.
- 4) If the bite feels "high" on the temporary restoration, please call the office to have it adjusted. Failure to do so can result in a toothache or fracture of the temporary.
- 5) Brush your temporary restoration daily. When flossing, slide the floss out from between the teeth instead of lifting it back out to avoid loosening the temporary.
- 6) If your temporary restoration loosens, call the office to have it recemented. If you're unable to come in, we have supplied you with a take-home packet of temporary cement that you can mix and apply inside the crown or bridge to hold it in place temporarily.
- 7) Make an appointment between 2 and 3 weeks from now to receive your permanent restoration.
- 8) When the final restoration has been placed, brush and floss accordingly. Do not chew on ice cubes or other hard objects or continue deleterious habits, such as biting on popsicle sticks, pens, etc. Use a sensitive toothpaste with fluoride if thermal sensitivity occurs. Also, if the bite feels unusual please call to have it checked.
- 9) On occasion, damage to the pulp of the tooth may occur following any restorative procedure due to a variety of reasons. If this occurs, further treatment, such as root canal therapy, may be necessary.
- 10) Regular dental examinations are important to maintain the function and appearance of one's crowns, bridges, etc.
- 11) If you have any questions, please feel free to call the office.



**CITIDENTAL
BOSTON**

General and Cosmetic Dentistry

Post-op Instructions Traditional Crown (Lab fabricated)

Temporary Crown Stage

- Your temporary crown is meant to protect that tooth for a short time and is not durable. Be careful and avoid eating on this tooth until the permanent crown is cemented (which is usually 3 weeks from today)
- A tooth requiring a crown had had a lot of decay or trauma. Because of this and the amount of preparation needed for a crown, the tooth will likely be sensitive (unless the tooth has had a root canal). You can expect hot and cold sensitivity which can be more intense during the temporary crown stage. After the permanent crown is placed, the sensitivity should gradually subside.
- Your gum tissues may also be sore during the temporary crown stage. Continue to brush around the tooth even though it might be tender because this will help control bacteria from inflaming the tissues.
- Flossing needs to be done with extra care with the temp crown in place. You may floss down through the contact but not back up. This may loosen the temporary so pull the floss out to the side.
- The temporary crown is meant to protect the tooth for a short time and is not durable. Be careful and avoid eating on this tooth until the permanent crown is cemented.

Permanent Crown Stage

- The crown is now permanently cemented. Avoid eating on this tooth for approximately 6 hours to allow the cement to fully harden.
- The tooth may continue to have some sensitivity to hot and cold. The tooth has had a lot of work and irritation to the nerve. This can take time to improve. Usually it will subside within a few weeks but rarely can last for six months. Try sensitivity toothpaste if this happens.
- If anything feels out of the ordinary or if you have any problems or question, please don't hesitate to call the office.
- Thank you for choosing CitiDental for you dental care. We appreciate it!

Treating periodontal disease

Scaling and root planing

Periodontal diseases (also known as gum diseases) are infections of the gum and bone that hold teeth in place. They often are painless, and you may not be aware that you have a problem until your gums and the supporting bone are seriously damaged. The good news is that periodontal diseases often can be treated in the early stages with scaling and root planing.

During a checkup, the dentist examines your gums for periodontal problems. An instrument called a periodontal probe is used to gently measure the depth of the spaces between your teeth and gums.

At the edge of the gumline, healthy gum tissue forms a very shallow, V-shaped groove (called the sulcus) between the tooth and gums. The normal sulcus depth should be 3 millimeters or less. With periodontal diseases, the sulcus develops into a deeper pocket that collects more plaque bacteria and is difficult to keep clean.

If gum disease is diagnosed, your dentist may provide treatment, or you may be referred to a periodontist, a dentist who specializes in the diagnosis, prevention and treatment of periodontal diseases. Treatment often depends on how far the condition has progressed and how well your body responds to therapy.

PREVENTION AND TREATMENT

Prevention includes a good daily oral hygiene routine. Brushing twice a day with fluoride

toothpaste and cleaning between teeth once a day with floss or another interdental cleaner help prevent plaque from forming. Regular dental checkups and cleanings are important.

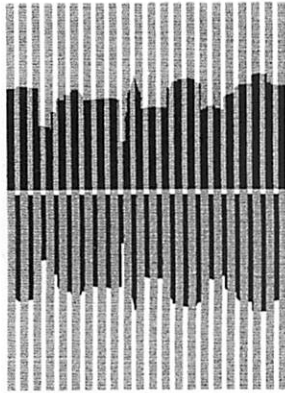
Scaling and root planing is a method of treating periodontal disease when pockets are greater than 3 mm. Scaling is used to remove plaque and tartar beneath the gumline. A local anesthetic may be given to reduce any discomfort. Using an instrument called a small scaler or an ultrasonic cleaner, the dentist carefully removes plaque and tartar down to the bottom of each periodontal pocket. The tooth's root surfaces then are smoothed or planed. This allows the gum tissue to heal. It also makes it more difficult for plaque to accumulate along the root surfaces.

Your dentist may recommend, prescribe and administer medications to help control infection and pain or to facilitate healing. At a follow-up appointment, the dentist checks how the gums have healed and how the periodontal pockets have decreased. When pockets greater than 3 mm persist after treatment, additional measures may be needed.

You'll be given instructions on how to care for your healing teeth and gums. Maintaining good oral hygiene and continued, sometimes lifelong, follow-up by your dentist are essential to help prevent periodontal disease from becoming more serious or recurring.

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"For the Dental Patient" provides general information on dental treatments to dental patients. It is designed to prompt discussion between dentist and patient about treatment options and does not substitute for the dentist's professional assessment based on the individual patient's needs and desires.



CITIDENTAL BOSTON

General and Cosmetic Dentistry

POST-OP INSTRUCTIONS AFTER RESIN (WHITE) FILLINGS

DISCOMFORT: It is normal to experience some minor sensitivity to temperature and pressure for a few days. Your gums may also be sore for several days. To reduce soft tissue soreness, you may rinse your mouth 2-3 times per day with warm salt water (1/4 tsp of salt in a cup of warm water.) Generally, 400 – 800 mg of Ibuprofen (i.e. two to four over the counter tablets of Advil, Motrin, or generic ibuprofen) every six hours, is all that is needed for post-operative soreness. If you have an allergy or sensitivity to Ibuprofen, or have been advised not to use it, you may take up to 1000 mg of Acetaminophen (i.e. Tylenol) as directed.

ORAL HYGIENE: It is important to continue to brush and floss normally to keep the area clean.

EATING AND DRINKING: After each appointment when anesthetic has been used, your lips, teeth and tongue may feel numb for several hours after the appointment. Avoid any chewing until the numbness has completely worn off. You may chew right away on white fillings since they set completely on the day of your appointment. If you experience some mild sensitivity, this is normal. Avoid eating/drinking very cold food/drinks until sensitivity subsides. Most of the time, your sensitivity will subside within a week or two. In rare instances, it could take several weeks.

If your bite feels uneven, you have persistence pain or pressure, or you have other questions or concerns, please call our office at 617-723-6300.



CITIDENTAL BOSTON

General and Cosmetic Dentistry

Post-op Instructions for Cerec Restorations

Congratulations on completing your Cerec restoration! Your new crown or onlay has been made with the newest, strongest, and most natural materials available in dentistry today. With the proper care and hygiene, you can expect your restoration to last for many years to come. The following are some instructions that will guide you on what to expect following your appointment.

- Your crown or onlay has been permanently cemented. Avoid eating on this tooth for 24 hours to allow the cement to bond and fully harden.
- Being numb and having your mouth open for so long may affect your bite immediately after the restoration was placed. Because of this, it may be possible that the bite may feel 'high' or doesn't feel quite right after the numbness wears off. If this happens, please call our office and come in so we can check the bite and adjust as needed. A 'high' bite may lead to long term problems if left alone.
- Your tooth may be sensitive after the procedure and is a normal side effect. This usually subsides within a few days to a couple of weeks. On rare occasion, sensitivity can last up to six months. If your tooth is overly sensitive or is lasting beyond with seems normal, please feel free to call and have us evaluate the tooth.
- Be confident that you have a long lasting restoration. Studies have shown that Cerec restorations have similar characteristics to your natural enamel, are more accurate than lab fabricated restorations, and lasts as long or even longer.

If you have any further questions or concerns, please don't hesitate to call our office!