



Instructions Following Tooth Extraction

Tooth extraction is considered a minor surgical procedure. Therefore, it is natural that temporary changes will occur in the mouth afterward. You will be functioning normally in just a few days. In the meantime, you should just follow a few simple instructions to promote healing, prevent complications, and make yourself comfortable.

1. Bleeding

A gauze pack has been placed on the extraction site to limit the bleeding and confine the blood while clotting takes place. Leave the pack in place for 30 to 45 minutes. If you still have some bleeding or oozing after the pack is removed follow this procedure:

*Fold up a piece of gauze, dampen the pad, and place it on the extraction site.

*Apply moderate pressure by biting firmly on the pad for about 30 minutes. If pad becomes soaked replace it with a clean one as necessary.

It is normal that a small amount of blood will leave the extraction site until a clot has formed. However, if heavy bleeding continues call our office immediately. Remember though, that a lot of saliva and a little blood can look like a lot of bleeding. **After an extraction, a blood clot forms in the tooth socket. This is an important part of the healing process. You should therefore avoid activities that might disturb the clotting.**

*Do **not** smoke during the healing period.

*Do **not** rinse your mouth vigorously or drink through a straw the first 24 hours.

*Sutures may have been placed; usually these will dissolve after about a week or two. Do not play with or pick at the sutures, as they are placed to protect the socket.

2. Swelling and pain

You may have some discomfort and notice some swelling. You can help reduce this by applying cold compresses or an icepack to the face. If you have prolonged or severe pain, swelling or fever, call our office.

3. Medication

If you have been given a prescription medication for pain and infection control, please use it only as directed. If the medication does not seem to work for you, do not increase the dosage. Call the office. If you have a reaction to the medication, call the office.

4. Diet

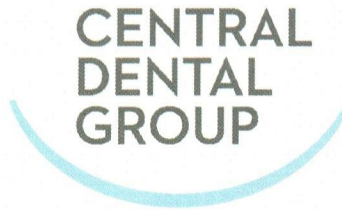
Drink lots of fluids (non-alcoholic), take your vitamins and eat soft nutritious foods. For the first few days try to chew on the opposite side.

5. Rinsing

The day after the extraction, gently start rinsing your mouth with warm salt-water rinses. (Half-teaspoon salt in 8 oz. glass of warm water). Rinsing after meals is especially important to keep food out of the extraction site. Avoid using a mouthwash during this early healing period.

6. Oral Hygiene

It is important to continue to brush and floss your teeth. However, avoid cleaning the teeth right next to the extraction site. The tongue should also be brushed as this will help eliminate the bad breath and unpleasant taste that is common after extractions.



Instructions Following Restorative Treatment

The filling or fillings you have now received are the most advanced direct tooth-colored bonded fillings available today. We are pleased that you are as committed to high quality dentistry as we are, and it is our privilege to provide this service for you.

Instructions

1. The filling material is hardened with the use of a special wavelength light. You may begin to use the tooth right away.
2. After a long appointment it is not unusual to experience muscle or jaw fatigue. However, this will only last a short time.
3. The bite should feel normal once the “freezing” wears off. If this is not the case, please call our office and come in for a quick bite adjustment. Remember that if many teeth were treated, it may take some time getting used to.
4. In a small percentage of cases involving large deep fillings the pulp (nerve) of the tooth can become permanently irritated and inflamed. Bacteria in the decay may have already infected the pulp and cannot be seen with the naked eye during treatment. This can lead to the pulp dying and present the need for a root canal filling. A root canal involves the removal of diseased or dead pulpal tissue and placement of a canal filling. If one of your restored teeth becomes very sensitive to biting or develops lingering sensitivity to cold after the cold item is removed from your tooth, you may require a root canal.

We recommend professional maintenance and evaluation at least twice a year. If you have a history of periodontal (gum) disease you should see us or a periodontist for a professional scaling a minimum of four times a year. It is important to maintain proper care, as it will prolong the life of the restoration and help prevent problems elsewhere in your mouth.

Please call us at 416-789-1372 if you have any questions.



Instructions Following Placement of a Temporary Restoration

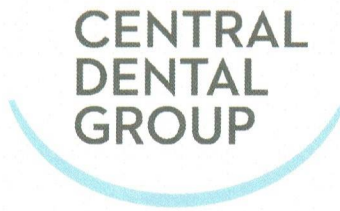
Today we have placed a temporary restoration in your mouth. A temporary is a filling or crown that is placed until the permanent filling or crown is made. It is easily removed when the permanent restoration or crown is ready to be placed in your mouth. It is normal for the gum around your tooth to be a little sore when the anesthesia wears off. You may use salt-water rinses to help speed the healing of your gum tissues.

The temporary restoration or crown is very important. It protects the exposed dentin preventing sensitivity, food from gathering in the preparation, and shifting and moving of the prepared tooth. All of which make the seating of the permanent crown more difficult. Use your toothbrush to clean the temporary as you normally do. However, **DO NOT** floss around your temporary as you may dislodge it.

It is not uncommon to have the following reactions to or problems with the temporary.

1. It may feel rough.
Please call us if the temporary crown is making your tongue sensitive.
2. It may feel high.
Call the office to schedule a quick appointment so we can adjust it for you. You can bruise the tooth if it is too high.
3. It may feel sensitive.
Since the temporary will not always fit as well as the permanent, there may be some sensitivity to hot, cold, and chewing. However, if it is too uncomfortable please call the office.
4. If it comes off.
This is probably the most common problem. A temporary is designed so it can be removed easily, unfortunately some foods will cause this. Do your best to chew on the opposite side until your next appointment and stay away from sticky foods or gum. If your temporary comes off, please call us so we can schedule a quick appointment to recement it for you.
5. It is not how I want the permanent to look.
No need to worry. The permanent will look different and by far better.

If you have any questions concerning the temporary, please feel free to call us. Remember, you will only wear the temporary for approximately two weeks, until your beautiful permanent restoration will be placed. It will have been worth the wait.



Instructions Following Veneers, Crown, Inlay, Onlay, Or Bridge Work

You have just received one of the most advanced cosmetic veneer, crown, or bridge available today. We are pleased that you are as committed to high quality dentistry as we are, and it is our privilege to provide this service for you.

1. The cement is already set, and your veneer, crown or bridge is ready for use. However, it is best to refrain from eating hard or chewy items for about an hour after you leave the office.
2. You may experience some minor gum soreness following cementation. This should diminish in a few days, but can be helped by using warm salt-water rinses, that speed up the healing of the gum tissue.
3. The bite may feel slightly high on your “new tooth” or you can have a tight feeling between the teeth. This feeling should subside gradually, however if this is not the case please call our office and come in for a quick bite adjustment. Remember that if many teeth were treated, it may take some time getting used to.
4. Sensitivity from a treated tooth is common. As the teeth become accustomed to the Veneer, Crown or Bridge this sensitivity should go away. This usually happens within a few days but can take as long as six to eight weeks.
5. You are reminded that in a small percentage of cases involving teeth with previously deep fillings, the pulp (nerve) of the tooth can become permanently irritated and inflamed. This can lead to the pulp dying and present the need for a root canal filling. A root canal involves the removal of deceased or dead pulpal tissue and placement of a canal filling. If one of your treated teeth becomes very sensitive to biting or develops lingering sensitivity to cold after the cold item is removed from your tooth, you may require a root canal.
6. If your front teeth have been treated, you may find that it takes several days for you to adjust your speech patterns to the new tooth position or shapes. Reading out loud in private for 20 to 30 minutes is often helpful.

We recommend professional maintenance and evaluation at least twice a year. If you have history of periodontal (gum) disease you should see us or a periodontist, if this has been recommended for you, for a professional scaling a minimum of four times a year.

It is important to maintain proper oral hygiene and care as it will not only prolong the life of the restoration(s) but will also help to prevent problems elsewhere in your mouth.

Please call us at 416-789-1372 if you have any questions.

PERIO SURGERY POST-OPERATIVE INSTRUCTIONS

If you are reading this (and we hope you are) you have just completed a periodontal surgery. Extreme care has been taken to ensure success. It is now also up to you to aid in the best possible outcome. Please, please follow these rules/instructions as it can be the difference between success and failure. This likely won't be the favourite week or so of your life but with following these instructions your recovery will progress quicker and with less discomfort.

PAIN: In spite of being given pain meds prior to the start of your surgery, discomfort may begin to set in as the anesthesia wears off - this is normal. You may have been given additional prescriptions for pain and these medications should be started right away. Unless otherwise specified, take the Ibuprofen, 4 times/day (breakfast, lunch, dinner, bedtime) for the first 3 days, even if you are not experiencing pain or swelling. It is easier to prevent pain, than fight it once it sets in. After 3 days you may take the Ibuprofen as needed, up to a maximum of 4 times/day. If you can't take Ibuprofen, you may have been prescribed an alternative such as Tylenol 3. Otherwise, Tylenol extra strength (2 tablets) every 6 hours is a good alternative and can even be taken **in addition** to the Ibuprofen if desired. There is no rule to how long pain lasts – for most it is 3-5 days whereas others have no pain or some may persist for a week or longer.

SWELLING may occur after the procedure and tends to peak at 3-5 days. It is not uncommon for increased swelling and discomfort several days following the surgery – this is the body's attempt to heal. Placing an icepack over the treated area (exterior of the face) after the procedure can minimize swelling. 10 min on/off is recommended for the first 24 hours. In some instances, bruising may occur, and may last 1-2 weeks before dissipating – this is a normal part of the healing process and occurs more frequently in those with fair skin.

BLEEDING: Small amounts of blood may discolor your saliva for the first few days. This is normal. The bleeding always appears more than it is due to mixing with your saliva – much like a drop of red food colouring turns a glass of water entirely pink. Do not spit or rinse your mouth vigorously to remove. If excessive bleeding occurs, apply gauze/tea bag over the area and press or bite firmly for at least 30min. Continue to repeat until the bleeding subsides.

HYGIENE: Avoid brushing/flossing in the area of the surgery for at least 2 weeks. Do not go anywhere near these regions – it is not a game to see how close you can get. We would rather have some plaque buildup vs a brush traumatizing the area. Gentle rinsing can begin 2 days after your treatment: using salt water to rinse your mouth twice daily, or an alcohol-free mouth rinse, swishing gently and avoid spitting. You should brush the non-surgical involved teeth as you do normally as overall oral hygiene is paramount to success.

DIET: You should attempt to implement a soft diet for 2 weeks and favour the opposite side of the mouth. This does not mean you must restrict yourself to liquids – although many find it best to start this way. Items such as pasta/noodles, eggs, yogurts, tender meats, softer fish, mashed potato, oatmeal, smoothies are all great. The worst foods include those that are crispy and crunchy like chips, nuts and crackers or crusty breads. These tend to gouge into the area and may delay healing. The softer the food and the longer you are on that soft food – the quicker and better things will heal. As a helpful rule - if you can cut it with a fork it's fine to eat.

EXERCISE: Try to avoid heavy lifting or vigorous exercise in the first 48hrs. Physical activity that raises the heart rate can result in increased blood pressure and initiate secondary bleeding. It is ok to go about your daily routine, take a walk but no classes.

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EXERCISE: Try to avoid heavy lifting or vigorous exercise in the first 48hrs. Physical activity that raises the heart rate can result in increased blood pressure and initiate secondary bleeding. It is ok to go about your daily routine, take a walk but no classes.

STITCHES: Most sutures (stitches) used for your procedure are dissolving and can begin to loosen or break down as early as a couple days following the procedure. That said – it isn't a race to see how quickly you can eject them from your mouth. The tongue gets curious but you should NOT continuously flick the area with the hopes of wearing them down. The stitches have a job to do and it is actually a good thing when they are still present in certain areas for longer periods. Avoid pulling at them as they are attached to other areas and can cause pain/bleeding. If a suture is long and dangling you may attempt to snip it shorter if accessible, otherwise please refrain from playing with them. You may also have a dressing/bandage placed which stays on for varying amounts of time. If it comes off- it's ok, if it stays on until your return to see Dr Walton/Dr. Soll- this is also ok.

DRESSING/BANDAGES: If you had a gum graft performed – you may have a dressing/bandage placed on the palate to cover the wound. These dressings tend to fall off on their own and there is no correct date for this to happen – it may fall off the first evening or last for a couple of weeks – this is not a problem. Often when the dressing comes off the area which was previously comfortable may be sore due to being exposed for the first time – this is normal.

INFECTION: The chance of infection is very small. Pain does not mean infection. In the rare instance of infection – you are already on antibiotics – so please simply complete the course.

IMPLANT ABUTMENTS: If you had a dental implant there is a small component that looks like a tiny screw which can sometimes come loose and fall off – this is NOT the implant. Do not panic – this is not something that requires immediate care and can be inserted back at any time. Here are images of what the abutment can look like to help clarify:



Remember: **NO PULLING, NO PEEKING, NO POKING, NO TOUCHING, NO TONGUING** – please leave the area alone. Retracting the lips/cheek to take a photo is not a good idea.

In cases of extreme pain, swelling, or bleeding, please reach out to our office for follow up and guidance.



MINIMAL SEDATON

PRE-OPERATIVE INSTRUCTIONS:

- 1) YOU WILL NOT BE ABLE TO DRIVE HOME. YOU MUST BE ACCOMPANIED BY A RESPONSIBLE ADULT, AND MAY TRAVEL BY PRIVATE VEHICLE OR TAXI.
- 2) DO NOT EAT OR DRINK FOR 2HOURS PRIOR TO YOUR APPOINTMENT TIME.
- 3) TAKE ALL REGULAR MEDICATIONS AT THEIR USUAL TIME WITH SIPS OF WATER, UNLESS YOU HAVE BEEN INSTRUCTED OTHERWISE BY YOUR DENTIST OR PHYSICIAN.
- 4) WEAR LOOSE COMFORTABLE CLOTHING. DO NOT WEAR NAIL POLISH.
- 5) REPORT ANY HEALTH CHANGES PRIOR TO YOUR APPOINTMENT.

POST-OPERATIVE INSTRUCTIONS

- 1) AFTER YOUR APPOINTMENT, YOU MUST NOT OPERATE A MOTOR VEHICLE OR HAZARDOUS MACHINERY FOR AT LEAST 18 HOURS. YOU MAY BE DROWSY FOR THE REMAINDER OF THE DAY AND SHOULD NOT CONSUME ALCOHAL AND OTHER DRUGS WITH SEDATIVE PROPERTIES OR MAKE IMPORTANT DECISIONS.
- 2) DEPENDING ON YOUR DENTAL TREATMENT, YOU MAY NEED TO MODIFY YOUR DIET. THIS WILL BE REVIEWED WITH YOU PRIOR TO LEAVING THE OFFICE.
- 3) IF YOU HAVE ANY CONCERNS FOLLOWING THE APPOINTMENT, CONTACT THE OFFICE AT 416-789-1372 FOR ADVICE.

CONSENT I have been explained the risks, benefits, and limitations of oral sedation. I consent to the administration of oral sedative drugs combined with nitrous oxide and other drugs as deemed necessary. I have also been explained the proposed treatment as presented to me. I am aware of the options to treatment; the associated risks and I have been given the opportunity to ask questions. I agree to be responsible for any associated fees. These instructions are for your safety. Failure to follow them could result in cancellation of your procedure and a fee will apply.

X _____ SIGNATURE DATE



MODERATE SEDATION

PRE-OPERATIVE INSTRUCTIONS:

- 1) YOU WILL **NOT** BE ABLE TO DRIVE HOME. YOU MUST BE ACCOMPANIED BY A RESPONSIBLE ADULT, AND MAY TRAVEL BY PRIVATE VEHICLE OR TAXI.
- 2) DO NOT EAT OR DRINK FOR 8 HOURS PRIOR TO YOUR APPOINTMENT TIME.
- 3) TAKE ALL REGULAR MEDICATIONS AT THEIR USUAL TIME WITH SIPS OF WATER, UNLESS YOU HAVE BEEN INSTRUCTED OTHERWISE BY YOUR DENTIST OR PHYSICIAN.
- 4) WEAR LOOSE COMFORTABLE CLOTHING. DO NOT WEAR NAIL POLISH.
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