



UNIVERSITY OF THE PACIFIC,
ARTHUR A. DUGONI SCHOOL OF DENTISTRY
EXCELLENCE DAY 2024

POST-OPERATIVE INSTRUCTIONS RESOURCE

GUNEET GILL, DDS 2024
GURLEEN GILL, DDS 2025

“DWP:”

At the end of our SOAP notes, “DWP:” or “discussed with patient” is written in the note template and in the haste of a busy clinic session, students are vague in providing next steps for their patients and it is not well documented.

So how do we address this?



THE GOAL IS TO ACHIEVE THE BEST POSSIBLE OUTCOME

The goal of the project is to create a resource that dental students can reference following the appointment after rendering care. We recognize that after appointments in the clinic, post-operative care is not consistently provided to patients with extensive or detailed instructions.

Students can reference and present this guide to their patients, and should have access to it where they are able to print it as a handout and provide it to patients.

As dental students in the clinic and having undergone the various rotations, it is vital to provide patients with the “next steps” so that we provide patients with the best chance at successful treatment outcomes.





THE PROJECT

The purpose of this project is to create a **concise and informational guide** containing post-operative instructions for dental students and patients.

The guide contains details regarding care after appointments in several specialties of care that fall within the scope of general dentistry, and covers procedures where post-operative care is vital toward beneficial outcomes following treatment.

DISCIPLINES OF DENTISTRY

The instructions provided include procedures commonly conducted in the specialties of **restorative dentistry, periodontics, removable prosthodontics, and endodontics.**

Our instructions are created with patient-centered terminology making it easy for the patient to understand and follow.



Restorative Dentistry

- Fillings
- Crown and Bridges - Temporary Restorations
- Crown and Bridges - Final Restorations
- Veneers

Periodontics

- Scaling and Root Planing
- Crown Lengthening
- Gingivectomy
- Flap Surgery
- Guided Tissue Regeneration
- Osseous Surgery
- Soft Tissue/Gum Graft

Endodontics

- Care for ongoing endodontic treatment (interim restoration)
- Following completion of endodontic treatment

Removable Prosthodontics

- Complete dentures
- Partial dentures
- Immediate denture delivery - day of extraction
- Day after Immediate denture delivery
- Denture relines (soft relines)

Periodontics Post-Operative Instructions

The following document contains post-operative instructions for the following periodontal procedures:

1. Scaling and Root Planing
2. Crown Lengthening
3. Gingivectomy
4. Flap Surgery
5. Guided Tissue Regeneration
6. Osseous Surgery
7. Soft Tissue/Gum Graft

Scaling and Root Planing/Deep Cleaning Home Care Instructions

This procedure aims to remove dental plaque and calculus from the tooth surfaces and smoothing the root surfaces to promote gum tissue healing and periodontal health.

Anesthetic: After your deep cleaning, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or touch may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. Please consult your student doctor regarding dosage of these medications.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding persists beyond a few hours, please contact your student dentist.

Smoking: Please refrain from smoking and vaping for at least 24 hours after your cleaning. Nicotine and tobacco interfere with healing.

Care of your mouth: Start brushing, flossing, and continue your prescribed oral hygiene regimen to keep your mouth clean and facilitate healing.

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Restorative Post-Operative Instructions

The following document contains post-operative instructions for the following restorative procedures:

1. Fillings
2. Crown and Bridges - Temporary Restorations
3. Crown and Bridges - Final Restorations
4. Veneers

Fillings

This restorative procedure is performed to repair teeth damaged by decay or trauma, and restore tooth structure to maintain oral health.

Anesthetic: Your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or pressure may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Biting: You may chew with your composite fillings as soon as the anesthetic wears off. If your bite feels uneven, contact your student dentist as additional adjustments to your filling may be necessary.

Crowns and Bridges - Temporary Restorations

This procedure restores damaged or missing teeth by reshaping the tooth's outer layer to create space for a restoration. While the permanent crown/bridge is being fabricated, a temporary crown/bridge is placed to protect the tooth.

Anesthetic: Your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or pressure may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Eating: To keep your temporary in place, avoid sticky, hard, and crunchy foods on that side of your mouth.

Hygiene: It is important to brush normally, and floss carefully - do not pull up on the floss, but pull the floss out from the side of the temporary crown/bridge.

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IN THE CLINIC

- **Printable Guide available on PacManual**
 - Following the appointment, students may access the PDF and print the page that coordinates with the treatment rendered that day. Students can briefly discuss points mentioned on the handout and provide it to patients to take home and reference later.
- **Laminated guide available at the dispensary** which can be checked out by students to copy at the printers located in the hallway or to use as a guide when verbally providing instruction.

NEXT STEPS

1.

Approval of the content from course directors in integrated clinical sciences courses to use the post operative resource guide as instructional material.

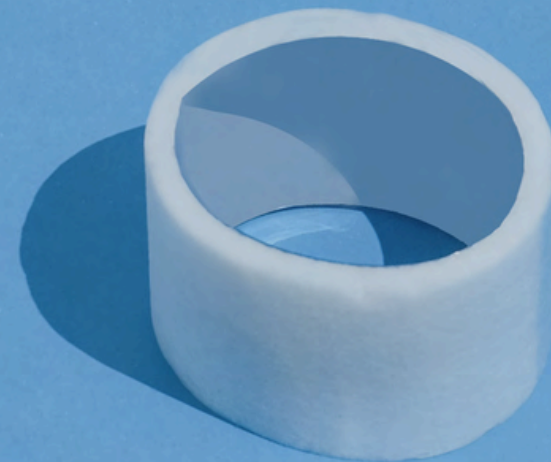
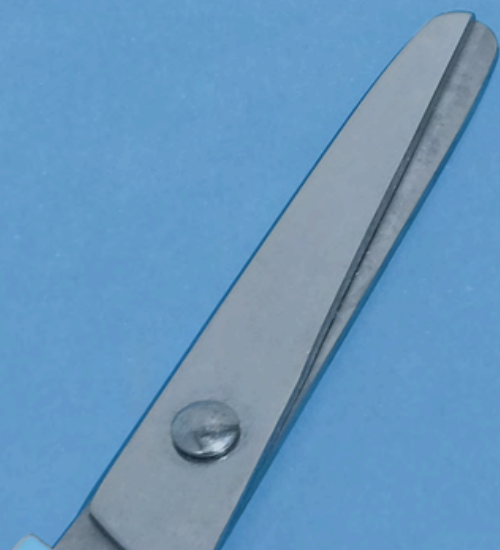
2.

Upload the post-operative instruction manual on the **Pac Manual** website and introduce it to students.

3.

Translation of the post-operative instruction manual in several different languages for the service of all patients that seek care here at the school.

THANK YOU!



Restorative Post-Operative Instructions

The following document contains post-operative instructions for the following restorative procedures:

1. Fillings
2. Crown and Bridges - Temporary Restorations
3. Crown and Bridges - Final Restorations
4. Veneers

Fillings

This restorative procedure is performed to repair teeth damaged by decay or trauma, and restore tooth structure to maintain oral health.

Anesthetic: Your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or pressure may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Biting: You may chew with your composite fillings as soon as the anesthetic wears off. If your bite feels uneven, contact your student dentist as additional adjustments to your filling may be necessary.

Crowns and Bridges - Temporary Restorations

This procedure restores damaged or missing teeth by reshaping the tooth's outer layer to create space for a restoration. While the permanent crown/bridge is being fabricated, a temporary crown/bridge is placed to protect the tooth.

Anesthetic: Your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or pressure may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Eating: To keep your temporary in place, avoid sticky, hard, and crunchy foods on that side of your mouth.

Hygiene: It is important to brush normally, and floss carefully - do not pull up on the floss, but pull the floss out from the side of the temporary crown/bridge.

If your temporary crown breaks or falls off, please contact your student dentist.

Crowns and Bridges - Final Restoration

In this procedure, a custom restoration has been cemented/bonded to your natural tooth in order to restore damaged or missing teeth.

Eating: Please do not eat or drink for 1 hour after your new crown is cemented. Do not eat sticky or hard foods for 24 hours while the cement completely sets.

Discomfort: Your new crown/bridge may feel tight or you might be experiencing hot or cold sensitivity. Some discomfort is expected and will usually wear off in a couple of days. If sensitivity persists beyond a few days, contact your student dentist.

Biting: The finished restoration may be slightly differently contoured and textured than the original tooth, but you will become accustomed to this in a few days. If your bite feels uneven, contact your student dentist as additional adjustments to your crown/bridge may be necessary.

Hygiene: It is important to brush and floss normally (twice a day) in order to avoid getting a cavity or gum disease around your new crown/bridge.

Veneers

Veneers are thin shells made of porcelain or composite resin placed over the front surfaces of teeth to cover stains or fix minor imperfections.

Anesthetic: Your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: You might be experiencing hot or cold sensitivity or soreness of the surrounding gums. Some discomfort is expected and will usually wear off in a couple of days. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Eating: Please do not eat or drink for 1 hour after your new crown is cemented. Do not chew on ice cubes or other hard objects as your veneers may fracture and damage your teeth. Minimize staining influences such as tea, coffee, red wine, colas and tobacco products.

Biting: The finished restoration may be slightly differently contoured and textured than the original tooth, but you will become accustomed to this in a few days. Avoid clenching and grinding your teeth. If your bite feels uneven, contact your student dentist as additional adjustments to your veneers may be necessary.

Periodontics Post-Operative Instructions

The following document contains post-operative instructions for the following periodontal procedures:

1. Scaling and Root Planing
2. Crown Lengthening
3. Gingivectomy
4. Flap Surgery
5. Guided Tissue Regeneration
6. Osseous Surgery
7. Soft Tissue/Gum Graft

Scaling and Root Planing/Deep Cleaning Home Care Instructions

This procedure aims to remove dental plaque and calculus from the tooth surfaces and smoothing the root surfaces to promote gum tissue healing and periodontal health.

Anesthetic: After your deep cleaning, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or touch may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. Please consult your student doctor regarding dosage of these medications.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding persists beyond a few hours, please contact your student dentist.

Smoking: Please refrain from smoking and vaping for at least 24 hours after your cleaning. Nicotine and tobacco interfere with healing.

Care of your mouth: Start brushing, flossing, and continue your prescribed oral hygiene regimen to keep your mouth clean and facilitate healing.

Crown Lengthening Home Care Instructions

This surgical procedure was designed to expose more of your tooth that was covered by gum and bone.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Swelling: Slight swelling of the operated area is not unusual. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Avoid sleeping/laying on the side that the surgery was performed.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Prescriptions: If you were prescribed an antibiotic, take it as directed until all tablets are gone. If you were prescribed a mouthrinse such as Chlorohexidine or Peridex, rinse 2 times a day or as instructed. Vigorous rinsing should be avoided.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Gingivectomy Home Care Instructions

This surgical procedure involves the removal of excess gum tissue to treat gum disease or to improve the appearance of your gums.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Flap Surgery Home Care Instructions

This procedure is done to treat advanced gum disease by lifting gums away from the teeth to remove calculus, thoroughly clean roots of your teeth, and reposition the gums to promote healing and reduce pocket depth.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Swelling: Slight swelling of the operated area is not unusual. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Avoid sleeping/laying on the side that the surgery was performed.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Prescriptions: If you were prescribed an antibiotic, take it as directed until all tablets are gone. If you were prescribed a mouthrinse such as Chlorohexidine or Peridex, rinse 2 times a day or as instructed. Vigorous rinsing should be avoided.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Guided Tissue Regeneration Home Care Instructions

This surgical procedure is used to promote regeneration of gum tissue that was lost or damaged.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Swelling: Slight swelling of the operated area is not unusual. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Avoid sleeping/laying on the side that the surgery was performed.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Prescriptions: If you were prescribed an antibiotic, take it as directed until all tablets are gone. If you were prescribed a mouthrinse such as Chlorohexidine or Peridex, rinse 2 times a day or as instructed. Vigorous rinsing should be avoided.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Osseous Surgery Home Care Instructions

This procedure involves removing diseased bone and irregularities, smoothing the bone surface, and recontouring it to promote better attachment and healing of the gum tissue.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Swelling: Slight swelling of the operated area is not unusual. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Avoid sleeping/laying on the side that the surgery was performed.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Prescriptions: If you were prescribed an antibiotic, take it as directed until all tablets are gone. If you were prescribed a mouthrinse such as Chlorohexidine or Peridex, rinse 2 times a day or as instructed. Vigorous rinsing should be avoided.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Soft Tissue/Gum Graft Home Care Instructions

In this surgery, tissue is taken from one area of your mouth (typically the palate) and is then grafted onto the areas of recession to cover exposed roots and restore a healthy gum line.

Anesthetic: After your surgery, your teeth, gums, lips, and cheeks will be numb. Refrain from eating and chewing until the numbness in your mouth has worn off to prevent accidentally biting your tongue and cheek. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and we suggest taking a pain reliever (such as ibuprofen or acetaminophen) before the numbness begins to wear off. Please consult your student doctor regarding dosage of these medications. Chapped lips or bruising of the lips and cheek area may occur.

Swelling: Slight swelling of the operated area is not unusual. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Avoid sleeping/laying on the side that the surgery was performed.

Bleeding: Slight bleeding may continue for several hours following the procedure, this is not unusual and will stop. Avoiding strenuous physical activity and creating suction (such as drinking from straws, blowing your nose) to reduce the risk of bleeding. If bleeding continues, apply light pressure to the area with moistened gauze or moistened tea bag. Keep in place for 20-30 minutes to see if bleeding has stopped. If bleeding still continues, contact your student dentist for further instruction.

Prescriptions: If you were prescribed an antibiotic, take it as directed until all tablets are gone. If you were prescribed a mouthrinse such as Chlorohexidine or Peridex, rinse 2 times a day or as instructed. Vigorous rinsing should be avoided.

Dressing/Bandage: A surgical dressing may have been placed around the teeth in the surgical site to protect the area from irritants. Maintain normal oral hygiene, but in areas where there is dressing, lightly brush only the biting surfaces of the teeth. If the dressing becomes loose or comes off, contact your student dentist to receive further instructions.

Eating/Diet: Follow a soft food diet and avoid the surgical area when chewing. Avoid sticky, hard (ice cubes, chips, nuts, popcorn), brittle, spicy, highly seasoned, or acidic foods. Soups, pasta, scrambled eggs, mashed potatoes, macaroni and cheese are best. Be sure to maintain adequate nutrition and drink plenty of fluids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Endodontics Post-Operative Instructions

The following document contains post-operative instructions for the following endodontic procedures:

1. Care for ongoing endodontic treatment (interim restoration)
2. Following completion of endodontic treatment

Care for ongoing endodontic treatment (interim restoration)

This dental procedure aims to treat infected pulp inside a tooth by removing the pulp, cleaning and shaping the root canals, and sealing the space to prevent further infection. Therapy usually requires 2-3 appointments for completion.

Anesthetic: You may experience numbness in your lips, teeth, and tongue due to the use of anesthetic, which can last for several hours. It's advisable to refrain from chewing on the side of the treated tooth until the numbness subsides completely. Be cautious with hot foods and liquids until sensation returns fully.

Discomfort: Some discomfort is expected when the anesthetic wears off, and sensitivity to cold or pressure may occur. Usually ibuprofen or acetaminophen will eliminate any discomfort. If sensitivity persists beyond a few days, contact your student dentist.

Eating: To keep your temporary in place, avoid sticky, hard, and crunchy foods on that side of your mouth.

Hygiene: It is important to brush normally, and floss carefully - do not pull up on the floss, but pull the floss out from the side of the temporary restoration.

Your student dentist will place a temporary filling or crown to safeguard the tooth between appointments. If the temporary filling dislodges or if the temporary crown comes off, please contact your student dentist promptly for replacement.

Following completion of endodontic treatment

Typically, the final stage following root canal therapy involves the installation of a crown onto the treated tooth. This crown serves to shield and fortify the tooth against potential future fractures. Unless advised otherwise by the dentist, it is imperative to promptly undergo crown placement following root canal treatment.

Failure to obtain the final restoration (crown) in a timely manner could lead to tooth fracture and/or potential loss. If you experience an uneven bite, persistent pain, or any other uncertainties, please do not hesitate to reach out to our clinic for assistance.

Removable Prosthetics Post-Operative Instructions

The following document contains post-operative instructions for the following periodontal procedures:

1. Complete dentures
2. Partial dentures
3. Immediate denture delivery - day of extraction
4. Day after Immediate denture delivery
5. Denture reline (soft reline)

Complete Dentures

These dentures replace all of the natural teeth in either the upper or lower jaw, or both and restore the appearance and function of individuals who have lost all of their teeth due to decay, gum disease, trauma, or congenital conditions.

What to Expect: At first, it is normal to feel awkward with your new dentures. Your speech may seem altered and some areas of your mouth may feel too full. Time, patience, and training will soon bring about a relaxation of the facial muscles and alleviate some of the apparent problems.

Speaking: Learning to talk with your new dentures requires some patience and perseverance. Reading aloud is a good way to learn to enunciate distinctly, especially those sounds or words that are not clear. Avoid any movements of the lips and tongue that tend to displace the dentures or cause them to click.

Eating: Initially, it is recommended that you avoid eating sticky, hard, or chewy foods. Start with soft foods, take small bites and keep the food distributed evenly on both sides and chew on the back teeth. To bite foods that normally require the front teeth, such as apples or corn on the cob, apply pressure backwards against the front when closing. If the denture begins to dislodge, biting with the side teeth may be an easier alternative.

Denture Care: It is important to clean your dentures with a soft brush and cleaning paste or soapy water after each meal. Avoid using abrasive cleaners or bleach. Remove your dentures and rinse your mouth with water or mouthwash after each meal, if possible. At least once a week, place them in an enzymatic or special denture cleaning solution to remove the insoluble stains and proteins.

Wear Time: Remove your dentures for at least 6 hours daily, usually when going to bed at night, to give your gum tissues a rest. Your dentures can be cleansed and placed in a small container of water to prevent them from drying out which can cause the denture to distort and not fit well.

Breakage: Dentures are made of acrylic material and can break easily when misused or dropped. Never wrap your denture in a tissue or napkin and put it in your pocket or purse. When going outside of the house, keep a denture case or container to stow away your denture safely if you need to remove it for a short period of time.

Changes of the mouth: Soreness from uneven pressure on the gums may develop at any time. This is not unusual and should be expected, especially if you have not worn a denture before. Contact your student dentist to have the denture adjusted. Stretching of the corners of the mouth can cause drying and cracking. Consider applying a thin layer of protective barrier cream or petroleum jelly (Vaseline) at the corners of your mouth.

Looseness: Complete healing of the gums and the underlying bone takes many months. During this period, a temporary liner may be placed inside the denture to keep it relatively snug. In addition, denture adhesives will help to retain a loose denture, once healing is complete, a permanent reline will be needed. Contact your student dentist to have your denture readjusted.

Future appointments: Be sure to have your dentures checked at least twice annually as changes in the mouth will inevitably occur. When supporting gums and bone change, causing your denture to become loose or uncomfortable, your denture may need to be adjusted, relined or replaced. Making sure careful maintenance of the dentures and the supporting soft tissues, will help to slow down these changes.

Partial Dentures

This is a removable dental prosthesis that replaces one or more missing teeth and is designed to blend with the remaining natural teeth for improved aesthetics and function.

What to Expect: At first, it is normal to feel awkward with your new dentures. Your speech may seem altered and some areas of your mouth may feel too full. Time, patience, and training will soon bring about a relaxation of the facial muscles and alleviate some of the apparent problems.

Taking Appliance In and Out: Use your fingertips to pull straight down on the clasps of the appliance to remove. To insert, use your fingers to secure your appliance in place. Do not bite into the appliance as this causes unnecessary force on the clasps and teeth that can cause them to bend or break.

Speaking: Learning to talk with your new dentures in place requires some patience and perseverance. Reading aloud is a very good way to learn to enunciate distinctly, especially those sounds or words that are not clear. Avoid any movements of the lips and tongue that tend to displace the dentures or cause them to click.

Eating: Initially, it is recommended that you avoid eating sticky, hard, or chewy foods. Start with soft foods, take small bites and keep the food distributed evenly on both sides and chew on the back teeth. To bite foods that normally require the front teeth, such as apples or corn on the cob, apply pressure backwards against the front when closing. If the denture begins to dislodge, biting with the side teeth may be an easier alternative.

Denture Care: It is important to clean your dentures with a soft brush and cleaning paste or soapy water after each meal. Avoid using abrasive cleaners or bleach. Remove your dentures and rinse your mouth with water or mouthwash after each meal, if possible. At least once a week, place them in an enzymatic or special denture cleaning solution to remove the insoluble stains and proteins.

Wear Time: Remove your dentures for at least 6 hours daily, usually when going to bed at night, to give your gum tissues a rest. Your dentures can be cleansed and placed in a small container of water to prevent them from drying out which can cause the denture to distort and not fit well.

Breakage: Dentures are made of acrylic material and can break easily when misused or dropped. Never wrap your denture in a tissue or napkin and put it in your pocket or purse. When going outside of the house, keep a denture case or container to stow away your denture safely if you need to remove it for a short period of time.

Changes of the mouth: Soreness from uneven pressure on the gums may develop at any time. This is not unusual and should be expected, especially if you have not worn a denture before. Contact your student dentist to have the denture adjusted. Stretching of the corners of the mouth can cause drying and cracking. Consider applying a thin layer of protective barrier cream or petroleum jelly (Vaseline) at the corners of your mouth.

Looseness: Complete healing of the gums and the underlying bone takes many months. During this period, a temporary liner may be placed inside the denture to keep it relatively snug. In addition, denture adhesives will help to retain a loose denture, once healing is complete, a permanent reline will be needed. Contact your student dentist to have your denture readjusted.

Future appointments: Be sure to have your dentures checked at least twice annually as changes in the mouth will inevitably occur. When supporting gums and bone change, causing your denture to become loose or uncomfortable, your denture may need to be adjusted, relined or replaced. Making sure careful maintenance of the dentures and the supporting soft tissues, will help to slow down these changes.

Immediate Denture Delivery - Day of Extraction

These dentures are given immediately after the extraction of natural teeth and provide functional and aesthetic benefits while the gums and underlying bone heal.

Wear time: It is important to keep your immediate denture in your mouth for 24 hours continuously until the doctor sees you the day after surgery. The denture serves as a dressing to help stop the bleeding. If your denture is removed, you may not be able to replace it in your mouth due to tissue swelling.

Changes of the mouth: You may experience some of the following changes in your mouth after denture delivery: immediate swelling, increased saliva, altered speech, discomfort, gagging, difficulty swallowing, mouth odor, minor bleeding, difficulty chewing, and altered facial appearance.

Diet: Although you have replaced extracted teeth with a denture, you will not be able to eat regular foods until healing has occurred and further adjustments are performed by your student dentist. A liquid to soft food diet is recommended the day of surgery. For the rest of the first week, limit your diet to soft, nutritious foods and drink plenty of liquids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Next appointment: The day after you receive your new dentures, your student dentist will adjust areas that may be sore, the bite, and any other initial problems.

Future appointments: As your tissues heal and you continue using the dentures, they may feel loose because of normal shrinkage of gums from healing. Your dentures will continue to need adjustment until healing is complete. Please contact your student dentist to schedule the following adjustment appointments.

Day after Immediate Denture Delivery

These dentures are given immediately after the extraction of natural teeth and provide functional and aesthetic benefits while the gums and underlying bone heal.

Denture Care: Starting today, gently remove the denture twice a day and gently rinse your mouth with warm salt water. Clean the denture by gently brushing with a denture cleanser and rinsing under water. Your student dentist will instruct you when to begin removing your denture at night and storing it in denture solution/water.

Bleeding: Minor bleeding can last up to 2-3 days. Biting pressure on the denture will promote clotting and decrease bleeding. Do not chew with the denture, as this can create a pumping action that can increase bleeding. Avoiding rinsing, spitting, smoking, or the use of a straw for the first 24 hours. If heavy bleeding continues, remove the denture and bite on folded gauze pads firmly for 1–2 hours.

Swelling: Swelling usually reaches a maximum in 2–3 days. An ice pack wrapped in a towel may be applied to help minimize swelling of your face. Alternating 20 minutes on and 20 minutes off will be helpful within the first 24-48 hours after surgery. Sleeping with the head elevated can minimize swelling.

Changes of the mouth: Stretching of the corners of the mouth can cause drying and cracking. Consider applying a thin layer of protective barrier cream or petroleum jelly (Vaseline) at the corners of your mouth. After immediate dentures have been inserted, sore spots, increased saliva production, speech difficulties, and gagging/trouble swallowing may occur. These can all be overcome as you get used to the new dentures and as your dentist adjusts them to fit your mouth.

Diet: Although you have replaced extracted teeth with a denture, you will not be able to eat regular foods until healing has occurred and further adjustments are performed by your student dentist. A liquid to soft food diet is recommended the day of surgery. For the rest of the first week, limit your diet to soft, nutritious foods and drink plenty of liquids.

Alcohol and Smoking: Please refrain from smoking and vaping for at least 7-14 days after your surgery.

Future appointments: As your tissues heal and you continue using the dentures, they may feel loose because of normal shrinkage of gums from healing. Your dentures will continue to need adjustment until healing is complete. Please contact your student dentist to schedule the following adjustment appointments.

Denture Relines (Soft Reline)

In this procedure, the tissue surface of the denture is reshaped to improve its fit and comfort.

Wear time: It is important to keep the denture in the mouth for the first 6 hours after it has been placed. If the denture is removed, it may be very difficult to place it back in the mouth without distorting the material.

Eating: Do not eat for at least 2 hours after the denture has been relined. Food particles may become incorporated into the material while it is still soft, which can alter the fit of your denture.

Cleaning: Rinse the denture under running water and brush it lightly. Do not soak the denture in a cleaning solution. If the denture is removed from the mouth, store it in a container with plain water.

OKU Sutro Excellence Day Project Cover Sheet

Project Title

Full name(s) and class year(s) of all project collaborators

Example: Jane Smith, DDS 2022; John Smith, DDS 2022

Project Category

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