



Post-operative Instructions after Full-Mouth Dental Rehabilitation in an OR Setting

Dr. Rawson's After Hours #559-556-0118

Diet and Other Limitations. Your child may experience some nausea, so for the first 1-2 hours, please make sure to help your child to rehydrate by offering clear liquids only (water, apple juice, sports drink). If able to tolerate those liquids, feel free to add pureed foods (apple sauce, Jell-O, smoothie) to the rehydration effort. The remainder of the day we want to stay with a soft, mild diet (noodles, smashed potatoes, oatmeal, PB&J, etc.). By the next day your child should be able to return to a normal diet.

Activity Limitations. Your child will likely be sleepy or acting groggy today due to receiving a sedative. It is okay for your child to take multiple naps. However, it is important to make sure your child is sleeping on his/her back or side and is not left unsupervised while napping. When awake, activities should be relaxing and safe, i.e. reading, playing board games, watching movies, playing video games, etc. Your child should be able to return to normal activities the day following treatment.

Swelling and Pain. Mild swelling, discomfort and low-grade fever are normal occurrences following care in the operating room. Your child might also experience a sore throat or sore nose. Once sufficient time has passed since the surgery, it is acceptable to provide your child with OTC analgesics (Ibuprofen or Tylenol) according to dosing instructions on the label to reduce pain. Coordinate the timing of the first dose of OTC meds with the Anesthesiologist.

Dental Fillings. Teeth may often be sensitive to hot, cold and pressure for a few days to weeks.

Dental Crowns. The area surrounding the teeth with newly placed crowns might be sensitive to chewing and brushing the first few days. The gum tissue surrounding the tooth may initially bleed slightly or develop bruising. This is normal and should resolve over time. To help accelerate the healing process is to be sure to help keep the areas gently brushed clean twice daily.

Dental Extractions. Most pediatric tooth extractions are routine and therefore do not require pain medication or antibiotics. Usually sutures (“stitches”) are not required. When needed, we place resorbable sutures that will dissolve on their own over the next 7 to 10 days.

Space Maintainers. Occasionally, when a posterior baby tooth is extracted a space maintainer is cemented onto an adjacent tooth to prevent space loss. In those instances, a soft diet is recommended the next 24 hours.

Local Anesthetic. If a local anesthetic was used, please make sure to monitor your child closely for several hours to make sure they do not bite, scratch, or injure their lips, tongue, or cheek.

Below is a series of images demonstrating the appearance of a bite trauma sustained on the day of treatment. The injured site typically appears to get worse for the first several days followed by drastic improvements after approximately one week.



Brushing Teeth. No need to brush teeth tonight. A protective (and very sticky) varnish was applied to the teeth after all treatment was completed. Beginning tomorrow morning please return to normal brushing and flossing habits, making sure to be gentle when cleaning around restored teeth. Because of a potential for soreness, your child might try to avoid brushing in these areas, which could have the undesired effect of prolonging the healing process. Initially, your child will likely require your help.

If at any time you become concerned with the course of your child's recovery or have questions concerning their treatment, do not hesitate to contact us or to take your child immediately to the hospital.

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