Post Op Instructions After Placement of Dental Implants

Do not disturb the wound. Avoid rinsing, spitting, or touching the wound on the day of surgery. There may or may not be a metal healing abutment protruding through the gingival (gum) tissue.

Bleeding

Minimal bleeding is expected after implant surgery. Bleeding after surgery may continue for several hours. The best way to stop bleeding is to fold 2 pieces of damp gauze over the extraction site and gently bite for 30-60 minutes making sure pressure is being applied to the extraction site. Rest quietly with your head elevated. If bleeding continues, use gauze for an additional 30 minutes. Bleeding should always be evaluated by looking directly at the surgical site. Pink or blood-tinged saliva may be seen for 2-3 days following the surgery and does not indicate a problem.

Pain

You should begin taking pain medication as soon as you feel the local anesthetic wearing off. For moderate pain, 1 or 2 Tylenol or Extra Strength Tylenol may be taken every 3–4 hours. Ibuprofen (Advil or Motrin) may be taken instead of Tylenol. Ibuprofen, bought over the counter comes in 200 mg tablets: 2–3 tablets may be taken every 3–4 hours as needed for pain. For severe pain, the prescribed medication should be taken as directed. Do not take any of the above medication if you are allergic, or have been instructed by your doctor not to take it.

***NOTE: If you are taking PLAVIX or COUMADIN, do NOT take Ibuprofen or Aspirin products.**

Antibiotics

If prescribed, be sure to take antibiotics as directed to help prevent infection.

SUTURES:

Unless told otherwise, the sutures used during your procedure are dissolvable and will fall out on their own. This generally occurs in the first week after surgery, but timing varies from 4–10 days.

Diet

Drink plenty of fluids. Avoid hot liquids or food. Soft food and liquids should be eaten on the day of surgery. Return to a normal diet as soon as possible unless otherwise directed.

Will I be able to see the implant?

Depending on the location and stability of the implant being placed, Dr. Welch may opt to bury the implant under the gum tissue. In time, you will return and have the implant uncovered so the implant can be restored.

If stability is optimal, the second stage procedure can be bypassed, and an attachment is placed that protrudes through the gum tissue, which will be visible. Once the bone has healed, the restoring dentist will be able to access the implant without the need for further surgery.

Oral Hygiene

Good oral hygiene is essential to good healing. Warm salt water rinses (teaspoon of salt in a cup of warm water) or non alcohol mouth rinse should be used at least 4–5 times a day, as well, especially after meals. Brushing your teeth and the healing abutments is no problem. Be gentle initially with brushing the surgical areas.

Activity

Keep physical activities to a minimum immediately following surgery. If you are considering exercise, throbbing or bleeding may occur. If this occurs, you should discontinue exercising. Keep in mind that you are probably not taking normal nourishment. This may weaken you and further limit your ability to exercise.

Post-Op Visits

It is important to return for your post-op visit, generally scheduled 1-2 weeks after treatment. Contact our office if you have questions or problems before that time.

Wearing your temporary prosthesis

Partial dentures, flippers, or full dentures should not be used immediately after implant surgery unless specified by the doctor. This should have been discussed in the preoperative consultation, and will be covered again after your surgery. Special adjustments must be made in advance to ensure that the implants are not compromised.

When can the crown be placed?

A dental crown can be attached to a dental implant once the implant has fused to the bone. This is a process called osseointegration.

The length of time the bone must heal varies from case to case and will be discussed with Dr. Welch. The length of time needed for osseointegration is a function of the bone quality, quantity, and implant stability at the time of placement.