



POST OPERATIVE MOUTH SURGERY INSTRUCTIONS

DIET: Your diet should be liquid or soft for two weeks. Try to keep the food away from the surgical site as much as possible. Nothing that requires hard chewing. Lots of cool liquids are strongly encouraged. Water, jello, clear soups, and popsicles are good, especially for the first day or two after surgery. Avoid salty, spicy (chili), or acidic (orange and many fruit juices) foods. Also avoid foods such as peanuts, potato chips, corn chips, popcorn, chili, etc., which may cause throat discomfort or scratch the mouth for at least two weeks. Milk, milk shakes, and ice cream are also good but they can increase the amount of saliva which bothers some people but is not harmful.

PAIN: Make sure you take LOTS OF COLD/COOL LIQUIDS over the first week. This helps to keep your mouth moist, decreases pain, and reduces the chance of any bleeding. DO NOT USE ANY ASPIRIN-TYPE (“NSAID”) Pain Killers for at least 2 weeks after your surgery. These “thin” the blood and increase the risk of bleeding. They include Motrin, Advil, Alleve, Ibuprofen, some Vitamins, and several others so read the label first. Tylenol (Acetaminophen) is fine to use since it is a different type of pain killer. Some people continue to have pain well past the first week after surgery. This is normal, and usually resolves around the end of the 2nd week. You may also experience sharp ear pain a few days after surgery. This is pain “referred” from the mouth and is also normal. It is NOT unusual to still have some pain even 2 weeks after surgery.

ACTIVITY: NO STENOUS PHYSICAL ACTIVITY for at least TWO WEEKS after surgery. This can lead to increased blood pressure and an increased risk of bleeding. Regular walking and light activity are fine and are encouraged.

BLEEDING: Occasional blood-streaked/tinged sputum during the first week after surgery is common. Gently gargling with ice water often helps resolve any bleeding sooner. Please call Dr. Lueg’s Office (643-9999) and go to the nearest Emergency Room for large amounts of persistent bleeding lasting longer than 30 minutes despite gargling with ice water, or any trouble breathing or any other serious concern.

OTHER: Swelling of the soft part of the roof of the mouth at the back and the little part that hangs down (the Uvula) is very common. It will not block off your breathing and will subside over the first several days. As the healing progresses, you may notice whitish, grey, or dark areas at the surgery site in your mouth. You may also have bad breath. This is normal and subsides as the mouth heals. Use good brushing away from the surgery site and rinse with salt (saline) water. Avoid using Mouth Wash or other rinses that contain alcohol or other antiseptics. Snoring may also get worse during the healing period. Due to blood swallowed during surgery, you will notice the bowel movements will be black but will soon return to normal. A sore neck may occur for a few days after surgery. If this happens, use warm compresses and Tylenol. A mild fever the first few days after surgery is not



unusual. Increasing fluid intake often helps. Please contact our office for any temperature over 101.5 degrees Fahrenheit or any persistent fever more than two days after surgery.

Please make sure you have a follow-up appointment two-weeks after your surgery, and call our office should you have any questions or concerns **643-9999**.

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