



LCIAD Information sheet: 04

Post-operative instructions for periodontal or general dental surgery

A digital copy of this document is also available on our website <https://www.lciad.co.uk/patient-dental-information-sheets/>

This information sheet contains generic information and must be read in conjunction with your personalised treatment plan, which gives specific advice.

1. General information

The surgery site will normally be sutured so that there is minimal space left for much bleeding to occur. However, a clot will still need to develop under the gum and trouble-free healing is dependent on this initially fragile clot remaining undisturbed as much as possible. Most surgery sites heal with minimal trouble. Please keep turbulence in your mouth to a minimum for 24 hours after the surgery. For at least 8 hours after the surgery, do not rinse, eat, gargle or touch the wound with your fingers or tongue. You may brush your other teeth normally that evening keeping away from any sutured wounds but be aware that some bleeding may follow.

2. Painkillers

You will benefit from taking an anti-inflammatory painkiller regularly as prescribed below. If you are unable to take non-steroidal anti-inflammatory drugs for medical reasons (e.g. stomach or oesophageal ulcer or asthma), please take 1g of Paracetamol every 6 hours. You should not need to take this medication for more than 4-5 days. **Please inform your surgeon if pain increases after 4 days as it may indicate that an infection, delayed healing or graft failure has occurred and requires attention at the surgery.**

3. Numbness and local anaesthetic

The effect of the local anaesthetic will normally wear off after 2-6 hours depending on the site anaesthetised and the amount used. Occasionally it may persist for longer.

Take great care not to bite or otherwise traumatise the numb site during this time. Do not attempt to drink hot fluids for at least 8 hours. The application of heat on the day of extraction will both encourage further bleeding and swelling and can locally scald the site without you being aware of it.

Please let your surgeon know the same evening on their mobile number if numbness persists for over 8 hours without diminishing.



4. Bleeding

We will check that any bleeding has stopped before you leave the surgery. Be aware that movement, exertion, eating or drinking may re-start bleeding. (A small volume of blood will be present as natural washout from the socket with your saliva flow). You will be provided with sterile gauze when you leave the surgery. Please roll this into a tight bundle to use as a compress, moisten under a tap, wring out any excess water then place over the extraction site and bite down firmly for at least 10 minutes by the clock. Ensure that the gauze is applying pressure to the wound and is not merely trapped between your other teeth. If there is further bleeding, repeat with a new pack. ***If you feel that the wound is bleeding beyond your control or persisting into the night, please call your surgeon on their mobile outside surgery hours if necessary.***

5. Swelling

There will be a variable amount of swelling depending on how much the soft tissues have needed to be manipulated during the procedure. Moderate swelling and skin bruising are normal and relatively common. Swelling can be minimised by applying a cold pack which we will supply for you and keeping the head elevated during the night on an extra pillow or two. **Please inform your surgeon on the surgery number during surgery hours or on the mobile number below outside surgery hours if the swelling is particularly painful or has not started to subside by the end of the fourth day following surgery.** This may indicate that there is an infection that requires attention.

6. Aftercare

The following day (or at least 8 hours after bleeding has stopped), start to carry out gentle **hot** salt-water mouth rinses every 3-4 hours. The objective is the application of salt and heat to the surgery site and not to create turbulence. Please make a hot salt solution by boiling water as if making tea or coffee in a mug and mixing in a heaped tablespoon full of salt and mixing thoroughly. When the solution is cool enough to take into your mouth without scalding, please take a small amount into your mouth and hold the hot salty water over the surgery site until it cools. Repeat several times with the same solution until completed and repeat this procedure 2-3 hourly during the day.

7. Antiseptics and antibiotics

An antiseptic mouthwash containing chlorhexidine such as Corsodyl or Curasept will also be of help in limiting any infection. Antibiotics are not normally required after a straightforward gum or general dental surgery, though a covering antibiotic will normally have been given to you prior to surgery. Additional antibiotics may be given if the surgery was extensive or grafting materials have been used in the site. It is important that you take and complete the antibiotic course(s) as prescribed below. I would recommend daily supplements of "friendly bacteria" by having a pot of bio-



yoghurt or a proprietary probiotic drink to replenish gut bacteria. These can be obtained from reputable health food shops.

Please inform your surgeon immediately if you have any kind of skin rash or swelling, persistent abdominal pain, vomiting, or bloody stools with any of these antibiotics on the surgery number during surgery hours or on their mobile number outside surgery hours.

Please do not drink alcohol during your course of antibiotics, since there may be a specific reaction of Metronidazole (Disulfiram-like Antabuse reaction) with alcohol that may make you feel very ill.

Please also remember that a course of antibiotics may reduce the efficacy of the contraceptive pill. Please use an additional form of contraception during and for 3 days after the course of antibiotics.

8. Oral hygiene procedures

Please do not brush around the surgical area for 3 weeks after the surgery (up to suture removal and one week afterwards). You may brush other teeth as normal. During this period (commencing the day of the surgery) it is recommended to use Curasept or Corsodyl mouthwash (0.2% chlorhexidine) 2-3 times per day and hold in contact with the tissues in the surgical wound or areas for 1 minute, without swishing or causing turbulence. Excessively vigorous rinsing may dislodge the blood clot and cause postsurgical bleeding which may impair healing and cause inconvenience.

- **Week 3 – One week after suture removal**, you may resume brushing with an ultrasoft-bristle toothbrush in an upward direction from the soft tissues towards the tooth crown (single strokes upwards). Please continue to use the hot salty water 4 times a day and antiseptic mouthwashes twice daily (morning and evening).
- **Week 7** – You may progress to normal manual or electric toothbrush and resume interdental hygiene with dental spongy floss (Oral B Superfloss or Periofloss which we will supply as appropriate). Please continue with the mouthwash once a day (last thing in the evening). A dental hygienist follow up will normally be arranged.
- **Week 12** – Re-assessment where we will review oral hygiene instructions and ideal cleaning aids for your case.

9. Physical activity

It is recommended that you do not plan any strenuous activity, swimming or playing a wind instrument for at least 14 days after implant placement and that you avoid excessive alcohol intake. Please avoid alcohol if antibiotics have been prescribed.



10. Suture removal

Sutures will usually need to be removed after 14 days even if they are dissolvable. An appointment will be arranged for you before you leave the surgery. If sutures are left in for too long, then they themselves may become a focus for future infection.

11. Further site-specific instructions

You may be given specific further instructions based on your individual circumstances in your dental report and treatment plan which you should also follow.

Painkillers and dosage	Frequency	Duration	Notes	Given
Voltaren (Voltarol) Retard (diclofenac sodium) 100mg anti-inflammatory	24 hourly	4 -5 days	Do not take together with other anti-inflammatory medication.	
Nurofen (Ibuprofen 400mg – anti-inflammatory	6 hourly	6 days	Do not take together with other anti-inflammatory medication.	
Paracetamol 500mg x 2	6 hourly	6 days	Take with Voltaren or Nurofen.	
Antibiotics				
Amoxicillin 500mg	8 hourly	7 days		
Metronidazole 400mg	8 hourly	7 days	NO ALCOHOL	
Clindamycin 150mg	6 hourly	7 days		
Azithromycin 500mg	24 hourly	6 days	With food	
Other				
Corsodyl 0.2% or Curasept 0.2% chlorhexidine antiseptic mouthwash.	12 hourly	1 week	Last thing at night and 30 minutes after brushing after breakfast	
Hot salty water gentle mouthwashes	2-3 hourly	1 week	Keep turbulence to minimum	

MOBILE NUMBER: I would be grateful if this number is reserved for genuine emergencies only.
07747 798 083

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