# DENTAL EXTRACTION

*Important post-operative care & aftercare instructions*

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**THE MOST IMPORTANT THING**

Protect the blood clot that forms in the socket. It helps stop bleeding and supports healing. For the first 24 hours, avoid disturbing the area by rinsing forcefully, spitting repeatedly, smoking/vaping, drinking alcohol, using a straw or touching the socket.

## WHAT TO EXPECT AFTER A DENTAL EXTRACTION

- If you have been given gauze, bite down with firm, continuous pressure for 30—60 minutes. Sit upright and avoid repeatedly lifting the gauze to check the area.
- Pink saliva or slight oozing can occur during the first day. If bleeding is heavy or does not settle after repeated firm pressure, contact the practice or seek urgent dental care.
- 3 hours after the extraction, the local anaesthetic wears off, some bleeding may occur again, if this does occur, bite on a piece of gauze for another 30minutes.

## FOR THE FIRST 24 HOURS AFTER YOUR EXTRACTION

- Do not rinse, spit repeatedly, use a straw, suck at the socket or poke it with your tongue, fingers or other objects.
- Avoid smoking and vaping for at least 72 hours; ideally avoid them for 1–2 weeks while healing. The longer you avoid them, the better. Avoid alcohol for at least 24 hours and while taking medicines that interact with alcohol.
- Avoid strenuous exercise for 24 hours. Rest, keep your head slightly elevated when lying down and avoid bending or lifting heavily if bleeding is ongoing.
- Avoid very hot foods and drinks while numb or during the early healing period. Do not chew your lip, cheek or tongue while the local anaesthetic is still active.
- Avoid blowing your nose. If you need to sneeze, keep your mouth open and do not pinch your nose or hold the sneeze in. Avoid creating pressure between your mouth and sinuses for the period advised by your dentist, usually around 10–14 days. These precautions help protect the healing area and reduce the risk of an opening developing or reopening between the mouth and sinus

## INSTRUCTIONS FOR SELF-CARE: EATING & SWELLING

- Wait until the numbness has worn off before eating. Choose soft, cool or lukewarm foods for the first day, and chew on the opposite side where possible.
- For swelling, use a cold pack wrapped in a cloth on the outside of the face for 5—10 minutes at a time, with breaks between applications during the first day. Do not place ice directly on the skin.
- Some soreness, mild bleeding and swelling are common. Swelling can increase over the first 48–72 hours before it begins to settle.

## FROM 24 HOURS ONWARDS

- Brush your teeth gently as usual, taking care around the extraction site. Do not scrub directly inside the socket.

- After the first 24 hours, gently rinse after meals with warm salt water (½ teaspoon of salt in a glass of lukewarm water). Let it move around the mouth gently, then allow it to fall out; do not swish or spit forcefully.
- Food may collect near the socket. Do not dig it out with fingers, toothpicks or other objects. Gentle rinsing is usually enough. Follow any extra instructions given by your dentist.
- Take prescribed medicines exactly as directed. For pain relief, use only medicines that are suitable for you and follow your dentist/pharmacist's advice and the product label. Do not place tablets directly on the socket.
- Avoid smoking/vaping while the site heals and continue choosing foods that do not irritate the area. Gradually return to your usual diet as comfort allows.
- **It is common to experience more discomfort 72 hours after the extraction. This is when the swelling is expected to set in and usually subsides 1 week after the extraction.**

### CONTACT THE PRACTICE PROMPTLY IF

You have pain that becomes significantly worse after initially improving; severe throbbing pain 2–5 days after extraction; increasing swelling; fever; pus; a persistent unpleasant taste or smell; or bleeding that will not stop with firm pressure. These may need review.

### SEEK EMERGENCY HELP

- Call 000 immediately if you have difficulty breathing or swallowing, or rapidly spreading swelling affecting your throat, neck or floor of your mouth.
- Seek urgent medical attention if you experience heavy or uncontrolled bleeding that does not stop despite applying firm, continuous pressure with clean gauze.
- Contact your dentist promptly if you develop severe or worsening pain, increasing swelling, fever, pus or feel generally unwell. If the practice is closed, seek advice from an after-hours dentist or urgent medical service rather than waiting until we reopen.
- If you are experiencing a life-threatening emergency, call 000.

## DRY SOCKET INFECTION

A dry socket can occur when the blood clot that normally forms in the extraction site is lost, breaks down too early or fails to remain in place. This clot is important because it protects the underlying bone and nerves while the area heals.
Dry socket typically develops 2–5 days after an extraction and may cause:

- Severe, throbbing pain that develops or worsens a week after treatment.
- Pain that may spread towards the ear, temple or jaw.
- An unpleasant taste or smell in the mouth.
- An extraction site that appears empty or has visible bone.

**How can you help prevent it?**

During the first 24 hours, avoid smoking, drinking through a straw, vigorous rinsing, excessive spitting and activities that may disturb the blood clot. Follow your personalised post-operative instructions carefully.

**What should you do if you suspect dry socket?**

Contact the practice promptly if you experience severe or worsening pain, particularly if it develops a few days after your extraction. Dry socket can be assessed and treated by a dental professional, who may gently clean the area and provide a soothing dressing to help relieve discomfort.

# WHAT ARE YOUR OPTIONS?

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*If you are considering replacing the tooth that has been removed, there are several options to discuss with your dental team.*

## DOES EVERY TOOTH NEED TO BE REPLACED?

Not always. For example, wisdom teeth usually do not need replacement. For other teeth, the decision depends on the tooth's position, chewing function, your bite, the health of neighbouring teeth, your overall dental health and your preferences. Your dental team can explain whether replacement is recommended in your situation.

### Dental Implant and Crown



**May suit:** Replacing one missing tooth when the bone, gums and general health are suitable.

**Advantages:** A fixed tooth that does not rely on neighbouring teeth for support.

**Consider:** Requires surgery and healing time; bone volume, gum health, medical factors, maintenance and cost need assessment.

### Dental Bridge (Fixed)



**May suit:** Replacing one tooth or a short gap when the neighbouring teeth are suitable to support a bridge.

**Advantages:** Fixed in place and does not need to be removed for cleaning or eating.

**Consider:** Conventional bridges often require reshaping the supporting teeth. Cleaning under the replacement tooth needs special care.

### Single-Tooth Denture



**May suit:** Replacing one missing tooth when a removable option is preferred or a temporary solution is needed.

**Advantages:** Usually less invasive than a fixed bridge or implant and can be used while planning longer-term treatment.

**Consider:** Must be removed for cleaning and may feel less stable; fit may need adjustment as the socket heals.

## Partial Denture for Multiple Teeth



**May suit:** Replacing several missing teeth, particularly when there are multiple gaps or a fixed option is not suitable.

**Advantages:** Can replace several teeth with one removable appliance; available in different designs and materials.

**Consider:** Needs daily cleaning and regular review; comfort, stability and support depend on the design and remaining teeth.

## Clear Essix Retainer with a Tooth



**May suit:** A temporary cosmetic option, often for a visible front tooth while the site heals or future treatment is planned.

**Advantages:** Clear and removable, with no surgery required to wear it.

**Consider:** Usually not designed for chewing; it is removed for meals and may not suit every bite or extraction site.

## WHICH OPTION IS RIGHT FOR ME?

The best option depends on the tooth removed, the condition of your surrounding teeth and gums, bone levels, your bite, medical history, time, maintenance needs and budget. You do not need to decide immediately unless your dentist advises that timing is important. Ask us to explain the benefits, limitations, costs and expected timeframes for options suitable for you.