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POSTOPERATIVE INSTRUCTIONS for ORTHOGNATHIC SURGERY

During Your Outpatient Hospital Stay

- You will receive a general anesthetic and be completely asleep for your procedure. It is typical to remain in the recovery room for a couple of hours before going to a hospital room or being discharged.
- Dr. Williams will see you and family members prior to surgery, immediately following surgery, and later in the evening the same day as surgery. If you are being discharged the following morning, he will round before 7:00 am for a postoperative visit and to complete discharge instructions.
- Initial recovery typically takes **two to three weeks**, with full healing over several months. Swelling, mild discomfort, and a temporary change in diet are common. Most patients return to normal activities within a few weeks. **A patient should have a caregiver for both day and night for the first several days following surgery to assist with daily tasks, nutrition, oral hygiene, and encouragement to get up and move around.**

ORTHODONTIC ELASTICS

- Dr. Williams will place orthodontic elastics, prior to hospital discharge, to guide your jaw and teeth into their new positions when you bite. Sometimes tighter elastics are applied from upper to lower jaw braces to stabilize your bite which limits your ability to open your mouth. If needed, the elastics can be removed or cut in an emergency, but this is rarely needed. Your initial diet will be limited to liquid nutrition until the elastics are released in a few days at your first post-operative office visit.
- Additionally, the surgical splint used in surgery may be left wired to your upper teeth for the first few days or longer to support jaw segments during healing and to guide teeth into their new position. Although the splint may collect food debris easily and require more attention to hygiene, you will still be able to advance your diet with the splint in place when not wearing tight elastics.

NAUSEA

- It is common to have some nausea during the postoperative period. Ask for medication or use your medication as soon as you feel nausea to relieve those symptoms before vomiting, if possible. As you continue your recovery, nutrition and oral hygiene can be instrumental in preventing nausea.

BANDAGE

- The pressure dressing (Jaw Bra) is usually applied in the recovery room or when you arrive to the hospital floor. It should be worn continuously for about 48 hours. After 48 hours, the bandage may be used as a jaw “support” as needed. Many patients find that it is useful for several days until jaw strength improves. ICE or cold packs are recommended for the first day after surgery... then, you may switch to moist heat packs or just use the bandage for swelling compression.

FACIAL SWELLING

- Swelling is quite common and may continue to slowly increase for two to three days before decreasing. Sleeping with your head elevated about 30 degrees (two pillows) helps to minimize the swelling along with wearing the Jaw Bra for compression for several days even without ice or heat. The majority of swelling resolves over the first two weeks following surgery. (Provided in COFS Recovery Bag)
- Lip rash is quite common after this type of jaw surgery, and it is recommended to use lip therapy to keep the lips moist. However, it is best to minimally cover the lip corners as heavy ointment can trap moisture from the mouth and actually worsen the rash in those areas. **(Provided in COFS Recovery Bag)**

BRUISING

- The amount of bruising is variable from one patient to the next. It may not appear immediately but if it occurs, it will typically fade over the first couple of weeks.

BLEEDING FOLLOWING SURGERY

- It is common to have some minor bleeding or drainage from the mouth (or nose if upper jaw surgery) for the first few hours after surgery. Bending over or straining in the bathroom may precipitate some bleeding from your mouth or nose for the first few days. Mild bleeding from the nose or mouth that spontaneously occurs at night several days after surgery may occur from grinding teeth or fighting orthodontic elastics during sleep.

SORE THROAT

- After surgery, you may have a sore throat which is caused by the nasal tube and its manipulation used for your anesthesia. Typically, this resolves within a couple of days and frequent sips of fluids seems to help discomfort by keeping the throat moist.

NASAL STUFFINESS

- **(Upper jaw surgery)** Just as swelling of the face develops after surgery, it is common for swelling inside the nose to develop after upper jaw surgery resulting in a stuffy nose. This can be managed with frequent saline nasal sprays and careful cleaning of nasal crusting using a cotton swab soaked in a solution of one part water and three parts hydrogen peroxide.
- You should refrain from blowing your nose for two weeks or until Dr. Williams provides instruction to resume. Afrin nasal spray can be used but should be limited to three days or a rebound congestion can develop from using the Afrin. After arriving home, a humidifier may be used if desired, but the stuffiness usually begins to improve in a few days.

Once Home from the Hospital

ACTIVITY

- The earlier you are up and about, the faster you will feel more normal and be less likely to develop complications. Make sure there is someone to assist you when getting out of bed initially. It is common to be fatigued for several days after surgery. Start as soon as reasonable with getting out of bed periodically to stretch your legs beyond trips to the bathroom. Spending as much time as possible out of bed, sitting up and moving around the house helps speed recovery to daily activities.
- On the other hand, do not overexert yourself. Lifting more than 20 pounds, swimming, contact sports, and strenuous exercise should be avoided until Dr. Williams releases you to resume.

DIFFICULTY SLEEPING

- Difficulty sleeping should be expected for the first few days following surgery, primarily due to the discomfort associated with your jaw muscles, nasal stuffiness, sleeping on your back, and because of some of the medication side-effects. This problem rarely lasts longer than a few days. A mild sleeping medication can be prescribed, if needed.

MOOD ALTERATION

- Mood alternation / depression can occur following surgery. The anesthetic, the surgery, and side effects of the prescribed medications all can contribute to creating an initial psychological “let-down” during the first week after surgery. Please notify the office of this occurrence immediately.

ORAL HYGIENE

- Oral hygiene is challenging, but especially important to manage following surgery. Use a small, soft toothbrush (**Provided in COFS Recovery Bag**) and brush the best that you can without disturbing the incisions. An irrigating syringe is extremely helpful, as well as frequent gentle mouthwashes with warm water. Avoid the use of a waterpick for at least two weeks following surgery as the lowest setting can still force open incisions.

NUTRITION

- Weight loss following surgery is normal. Your weight should stabilize after 7-10 days and should return to normal in about three weeks. Dieting is not recommended immediately following surgery because nutrition is critically important for wound healing. As a general rule regarding diet, begin with food processed in a liquid fashion. If still wearing wires or tight elastics, you may find drinking from a cup or utilizing a syringe extremely helpful when eating. If in loose elastics, you may begin to chew soft spoon foods such as soups, noodles, or mashed potatoes. Well-cooked or finely cut up soft vegetables and finely ground meats or grilled fish can be eaten as soon as you can bite AND exert pressure on your teeth without discomfort (usually 14 days). These are usually foods you could squish between thumb and finger. From there it is a slow progression, but tougher meats burgers and pizza often take 10 – 12 weeks.

OPENING AND CLOSING YOUR JAW

- The ability to close your jaw and find your new bite will be difficult for the first few days after surgery. However, within about 10 days, it may become difficult to open. Your jaw may seem stiff, and your mouth opening will be limited. This is normal and it takes several weeks to return to a presurgical range of motion.
- You will be able to return to your orthodontist to begin post-operative treatment after 8 weeks although they may want to see you sooner. Our office will coordinate those appointments with you.

NUMBNESS

- Numbness is quite normal after surgery, and you may notice tingling, itching, or even a burning sensation on your lips and around your mouth within a few days. It often takes several weeks or even months for the feeling to return to normal. On rare occasions, the altered sensation may not improve and the risk for this will be discussed before and after the procedure.

MEDICATIONS

- If medications are prescribed, prescriptions are sent electronically to the pharmacy patient selected.
- **Pain medications on an empty stomach may cause nausea.** Once home, have the patient digest liquid nutrition.
- It is best to take in nutrition at least 30 minutes prior to taking medications to minimize nausea.
- **If you are unable to take Ibuprofen (Advil[®], Motrin[®]) then start with Acetaminophen (Tylenol[®])** Most patients have lower postoperative discomfort than they expect after surgery, probably due to the initial numbness. Initial medications are often given in a liquid form for easier swallowing and if wearing tighter elastics. Prescriptions may be converted to a pill form at the first postoperative visit. Try to finish all antibiotics and if not allergic, Ibuprofen should be taken as prescribed for the first few days to reduce your pain and swelling.
- Regarding medications, take only as directed by Dr. Williams and try to minimize the use of “as needed” drugs. Do not drive until the use of pain medication is no longer needed.

CHECK TEMPERATURE

- Check your temperature daily for at least 5 days... a mild elevation is normal, but a temperature over 102 degrees is NOT normal, and you should notify Dr. Bart D. Williams at **864-458-9800**.

YOUR FIRST POST-OPERATIVE VISIT TO THE OFFICE

Your first follow up appointment will include taking postoperative x-rays and assistance with additional cleaning of your teeth and mouth. If you have any questions or if any problem occurs, please contact our office 24 hours a day at **864-458-9800**. **If after normal office hours, Dr. Williams will be paged through the Prisma answering service. Please allow time for Dr. Williams to return your call.**

I have read and understand the above postoperative instructions and have no questions.

(Guardian) Signature _____ Date _____ Parent's

