



MOUNTAIN TOP

PERIODONTICS & IMPLANTS

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Instructions for Care AFTER SINUS SURGERY

Dear Patient:

1. Do NOT rinse or forcibly spit TODAY. You may “drool” into a sink if you feel as if there is too much blood in your mouth. We want the areas to clot and the more that you rinse or spit, the less it will clot. Remember, a little blood in your mouth is normal and may look like a lot.
2. DO NOT SMOKE: Smoking decreases blood flow to the surgical sites and will decrease the success rate of surgery.
3. Apply an EXTERNAL ice pack near the surgery site. You should use an ice pack for 15 minute intervals for at least 2 days. Even if you are not overly sore, the ice will help reduce inflammation and will be beneficial for the day after surgery. The ice can help for up to a week following surgery. You should use the ice pack at least 4 times for 15 minutes each time on the day of surgery and the day after surgery (you can ice more if desired).
4. Eat only COOL, SOFT FOODS AWAY from the surgical site starting TODAY for 3 days. A HIGH PROTEIN diet is recommended for optimal healing. Protein shakes are excellent for the day of surgery and the day after surgery. High sugar foods and alcohol are detrimental to healing. Drink plenty of fluids with NO STRAW for 2 weeks. You should try to maintain a liquid to ULTRA-SOFT diet for the entire first week following surgery (“Off the Spoon diet”). Soups can be eaten, but should be cool to warm only. Temperatures of foods should be 105° F or below for the first 2 weeks. You should eat NOTHING “CRUNCHY” for three full weeks.
5. Take the MEDICATIONS as prescribed. Try not to take two medications at one given time (pain medication and antibiotics taken together can cause severe stomach irritation and/or vomiting). Please allow one hour between medications if possible. NEVER TAKE MEDICATIONS ON AN EMPTY STOMACH.
 - a. PAIN: You should have received a prescription for pain. I recommend trying 2 EVERY 2 (2 200 mg ibuprofen tablets (Advil, Motrin), wait 2 hours and then take 2 325-500 mg acetaminophen tablets (Extra-strength Tylenol)) for the first 3 days following surgery. If the pain is too persistent you should substitute the narcotic pain medication (Hydrocodone (Vicodin) or Oxycodone (Percocet)) instead of the acetaminophen, but you should try to consistently take the ibuprofen (you may take up to 800 mg every 6 hours) for the entire first week. Acetaminophen, hydrocodone, and oxycodone are pain relievers, but do NOT reduce inflammation. Most of your pain is associated with inflammation and ibuprofen or naproxen will help the most in reducing inflammation. Sometimes a steroid will be prescribed for severe swelling.
 - b. MOUTHWASH: A chlorhexidine mouthwash was likely prescribed. You should start this rinse the morning AFTER surgery and then every morning AFTER a meal and at bedtime as the last thing you do before going to bed. This mouthwash is excellent in reducing harmful bacteria in your mouth. HOWEVER, it can stain your teeth and/or tongue. If you notice severe staining, please use Listerine or Listerine Zero (alcohol-free). The stain can and will be polished off at a follow-up visit. You may use warm salt-water (1 Teaspoon salt in 8 oz water) 2-3 times during the middle of your day as well starting the day AFTER surgery.

- c. ANTIBIOTIC: Antibiotics are always prescribed for sinus surgery. Please finish.
 - d. DECONGESTANT: Please use a decongestant (Sudafed from a pharmacy) for the 1st week.
6. Brushing: You may brush your teeth beginning the day AFTER surgery, do not brush the surgical site for the first week. DO NOT USE A DENTAL IRRIGATOR, WATER FLOSSER OR WATER-PICK for 3 full weeks following surgery.
 7. Exercise: Avoid strenuous exercise or lifting weights for the 1st week after surgery. You may walk or ride a bike carefully.
 8. Follow-up: You will have 2 visits following surgery. Typically, at 2 and 6 weeks from treatment (this may be adjusted for certain surgeries). You will NOT be charged for ANY of these visits.
 9. Sutures: Normally RESORBABLE sutures are used. They will be removed at 2 weeks.
 10. Sneezing: If you must sneeze, keep your mouth open and DO NOT TRY TO STOP THE SNEEZE.
 11. Bleeding: It is very common to have some slight bleeding from your nose and/or surgical area for up to a week.
 12. DO NOT PULL YOUR LIP UP OR DOWN TO LOOK AT THE SURGICAL SITES FOR THE ENTIRE FIRST WEEK
 13. IF IN DOUBT PLEASE CONTACT US! Office: 719-594-0091. Dr. Adam Weaver Cell: 303-549-8693 Or Dr. Kearny