The following information is provided to refresh your memory after your consultation and before your surgery. Please read it and be certain to ask any questions which have not been answered.

The doctor has already discussed with you the type of oral surgical procedure that you will have. Treatment options have also been discussed. If you have any specific questions about the planned procedure or need to be reminded about possible alternatives, please call the office or ask before consenting to surgery.

There are many different reasons for removing wisdom teeth (third molars), including infection, pain, dental crowding, prevention of gum disease, cyst formation, and destruction of the adjacent tooth. Unless you have an active problem at the time of your consultation, the reason for removal is primarily preventive to avoid long term problems with your jaws and other teeth. If your wisdom teeth are “impacted” removal is usually recommended if you are thirty years old or less. Occasionally for patients over thirty years of age, we will recommend indefinitely postponing the removal of completely impacted third molars which appear to be disease free (for example, without periodontal pocketing or cyst formation.) The reason for this is the increase in postoperative problems (infection and delayed healing) which are seen as we get older. Usually it is better to follow these teeth with periodic x-rays and clinical examinations and only remove them if a disease process begins to occur. At this point, the benefits of removal probably outweigh potential surgical problems.

If you are going to be sedated, the medication will be administered through a vein in your arm. Remember that with the intravenous sedation techniques used in this office you may be vaguely aware of the surgical procedure being performed. You will be relaxed, even asleep, and with the use of local anesthesia should feel minimal, if any, discomfort during the procedure. We have found that most of our patients are not aware of the procedure being performed.

After your surgery, you can expect an average of two to four days of discomfort before noting gradual improvement. Each individual’s reaction to surgery varies - from mild discomfort to severe pain. If some degree of discomfort arises, take one or two Advil, Tylenol, or Aspirin and repeat every 4 hours as necessary, or take the pain medication prescribed according to the instructions on the container.

A variable amount of swelling can be expected following the surgery. This should also begin resolving after the third day. As with any surgery, there can be complications or unanticipated results that you should be aware of. The most common problem encountered following surgery is infection. This usually requires an office visit to relieve pressure and drain any pus that may have accumulated near the surgical drainage. Rarely, patients need to be admitted to the hospital for intravenous antibiotics and further surgical drainage. We realize that the surgery is in your mouth and also that maintaining your nutrition is important. Occasionally food particles or bacterial by-products can cause irritation in extraction site(s). This is frequently referred to as “dry socket.” Patients who smoke and women taking birth control pills may be at a higher risk for this to occur. Adequate treatment may require several visits to the office to inspect the extraction sites and to place small “dressings” in the sockets to minimize your discomfort. These are usually changed several times before they are finally removed. For this reason, we urge you to be available for follow-up visits for at least ten days following your surgery. Remember, if after three days you feel an increase in pain, swelling or develop a fever, contact the office as you may require attention.

Other temporary problems you may experience in the postoperative period include stiffness in the jaws, chafing around the corners of your lips, facial bruising, and oozing of blood from the extracted sites. The postoperative instructions should answer many of your questions. If not, don’t hesitate to call the office.

There is a nerve which supplies feeling to the lower lip, chin, and tongue which is frequently very close to the roots of the lower wisdom teeth. Occasionally, this nerve becomes irritated in the process of removing the tooth. When the local anesthesia wears off, you may experience a tingling or numb sensation in the lower lip, chin or tongue. Should this occur, it is usually temporary and will resolve gradually over a period of weeks or months. Rarely, it can result in a permanent alteration of sensation similar to the feeling of Novocaine, We feel that you should be aware of this before consenting to surgery.
The upper wisdom teeth are situated close to your sinuses and their removal can result in a communication between your mouth and sinus. Should this occur, it will usually close spontaneously. We may give you special instructions to follow if this is apparent at the time of surgery. If you sense a communication occurring after the surgery, please contact the office. Rarely, an additional procedure may be necessary to close the communication.

If you are given antibiotics and take birth control pills, you should be aware that the birth control pill may become ineffective and take appropriate precautions.

It is our goal to make your surgical experience as comfortable as possible. If you have any questions about any phase of your treatment, don’t hesitate to ask them on the day of your surgery or call the office prior to your appointment.

**PREOPERATIVE INSTRUCTIONS**

1. If you chose to have nitrous oxide or intravenous sedation, please **DO NOT EAT OR DRINK ANYTHING**, including water, for at least six (6) hours before your appointment. If you take medications regularly, you may take them with small sips of water.

2. Wear comfortable, loose fitting clothing with short sleeves or sleeves that can easily be rolled up above the elbows.

3. If you have intravenous sedation, **A RESPONSIBLE PERSON MUST ACCOMPANY YOU AND TAKE YOU HOME**.
   
   Your escort will need to stay in the office for your entire procedure so we may let him/her know when you will be ready to leave.

4. Your mouth and teeth should be well cleansed to help avoid infection.

5. Do not ignore a head or chest cold when oral surgery is to be performed. Please call the office if you have any symptoms as a change of appointment may be necessary.

6. If you are going to have local anesthesia ("Novocaine") only, you may eat prior to your appointment and do not need someone to accompany you to the office.