

Managing and Controlling Post-Extraction Complications



Written by:
Paul Sauchelli,
DMD, JD
DentistCare
Practice Management
Consultant

Many common post-extraction complications can be controlled and/or avoided by providing your patients with clear postoperative care instructions following a procedure. When post-treatment complications turn into acute emergencies, patients are likely to assume the treating dentist has done something wrong; they may challenge the treatment with the threat of a lawsuit.

Below are important instructions to provide to your patients following an extraction procedure; the information will help prevent misinterpretation of common treatment complications.

Local Anesthesia

Advise your patients that the feeling of numbness should begin to wear off in 30 minutes, but can last up to four hours after anesthesia is administered. Until that time, patients, especially children, should avoid all hot foods or liquids and foods that require chewing. This will help prevent accidental burning or biting of their lips, cheeks, inside of their mouth, or tongue until normal feeling has returned. Instruct your patients to call your office with any concerns about prolonged numbness. Your patients may also have been given other sedative medications; discuss any potential side effects with them.

Gauze

Instruct your patients to fold the gauze into a small pack and place over the extraction site. Tell them to maintain firm biting pressure on the pack for at least 30 minutes, but one to two hours is ideal. They should refresh the gauze pack every 15-30 minutes. Suggest that it may aid in clotting if they dip the gauze in a strong but cool tea solution before biting on it.

Bleeding

Explain to your patients that it is normal for the extraction site to bleed slightly or ooze blood for 12 to 24 hours following surgery.

Ice Pack

Encourage your patients to apply ice packs to the outside of their face over their extraction site for the first 2-8 hours after surgery. (They should use a cloth to protect the skin from direct contact with ice). Tell them to hold the ice pack in place for 15 minutes or so, then remove it for 15 minutes. This may help reduce discomfort and swelling.

Medications

Have your patients follow label instructions on all prescription and over the counter medications, including pain medications and antibiotics. Over the counter medication(s) often provide excellent pain relief. However, instruct your patients not to take aspirin products for pain due to the possible increase in bleeding potential—especially if they are already taking prescription blood thinners. Avoid prescribing highly addictive narcotics and tell your patients not to exceed the manufacturer or doctor recommended dosage of any medication. If they experience any untoward side effects from a medication, tell them to discontinue their use and call the office. Direct your patients to seek immediate medical care for serious side effects or allergic reactions.

Diet

Advise your patients to adhere to a liquid or soft diet for the first 12-24 hours and consume plenty of fluids for 1-2 days after surgery. Tell them to avoid using a straw as it may dislodge the blood clot forming in the extraction site. Smoking or consuming alcoholic beverages within 24 hours post-surgery will interfere with healing.

Oral Hygiene

Good oral hygiene after an extraction is essential. Instruct your patients to continue their routine oral hygiene practices; caution them to avoid bumping or brushing the extraction site and vigorously rinsing or swishing their mouth for the first 24 hours post-surgery.

Activity

For the first 48 hours your patients should rest and relax as best as they can, possibly limiting physical activity depending on the severity of the surgery. After 48 hours, they may resume activity as tolerated.

Sutures/Stitches

Tell your patients that sutures will resorb or fall out on their own. It is normal for a suture to come out on the day of surgery. If bleeding occurs because a suture falls out, they should bite on gauze to apply pressure as described earlier. If the suture does not resorb or fall out in due course, advise the patient to call the office.

Possible Complications

Explain that there may be complications and review with your patients what they should do if they occur. These should also have been covered in your informed consent conversation.

- Dry Socket—The symptoms associated with dry socket are constant moderate-to-severe pain, bad taste, putrid odor, and poor clot formation at the surgical site. Tell your patients to call your office immediately if they think they have these symptoms.
- Fever—Instruct your patients to monitor their temperature for the first 24-48 hours and report any elevated temperature to the office.
- Swelling/pain—Tell your patients to expect some swelling, bruising, and discomfort during the first 24-48
 hours. This includes difficulty opening their mouth and associated jaw pain. Emphatically advise them that
 if there are any concerns that their pain, swelling, or difficulty opening their mouth is excessive or rapidly
 worsening—or they are having difficulty breathing or swallowing—to go to the emergency room for
 immediate medical attention.

Advise your patients that while you have attempted to cover all the most foreseeable complications, unforeseeable problems can arise after any surgical procedure. Some may require additional therapy or emergency medical attention. If they have questions or concerns about something they are experiencing following an extraction procedure, advise them to call the office. Always provide specific instructions for after-hours calls and emphasize the option to go to an emergency room.

Note in the chart that you have reviewed these important points with your patients. Provide them with a written copy of your instructions and others you deem appropriate for their reference. Call them the day of and day after the procedure to evaluate their progress and potentially intercept any escalating complications. Make sure they have an appointment to return to your office in a week or 10 days for you to examine the surgical site.

Conversation with your patients as outlined above will help them avoid misinterpretation of common treatment complications. Remind them to seek immediate medical attention for any life-threatening escalation of common complications which may occur.

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