

RICHMOND PLASTIC SURGEONS

DARRIN M. HUBERT, M.D., F.A.C.S.

POST-OPERATIVE INSTRUCTIONS FOR INTRA-ORAL INCISION

PERIDEX: This is a prescription antiseptic oral rinse (chlorhexidine gluconate) which is used while the incision(s) inside the mouth are healing. Take 15 mL by mouth, swish it around for 30 seconds, then spit it out. It is not designed to be swallowed in any significant amount. Ideally, you should not eat or drink anything for 30 minutes afterwards. Use the peridex 3-4 times daily for 1-2 weeks. Do not continue longer than 1-2 weeks unless specifically directed to do so, as it can stain the teeth blue. If this staining occurs, it can usually be removed with a dental cleaning by a dentist or dental hygienist.

DIET: You should stay on a liquid diet for two days following your surgery. This includes jello and sherbet or Italian ice. After the first two days, you can switch to a soft diet for one week. This includes anything that does not really need to be chewed such as mashed potatoes, scrambled eggs, ice cream, soft noodles, etc. Definitely avoid hard foods and candies, and anything sharp such as chips, pretzels, and the like.

TEETH BRUSHING: Do not brush your teeth on the side where your incision is (right/left, top/bottom) for two weeks.

STRAWS: Only use a straw with particular caution. If using a straw during the first two weeks, simply allow it to rest on your lips, do not place it into your mouth. A straw could disrupt the sutures as the incision heals.

SUTURES: These are dissolvable and will fall out on their own after several days. It is normal to feel the sutures if your tongue rubs against them, but you should resist the temptation to do this repeatedly. They are not harmful if swallowed.

MEDICATIONS: take as directed. Do not drive while taking narcotic pain medications. Avoid aspirin for two weeks after surgery. You may take non-steroidal anti-inflammatories (e.g. ibuprofen) starting the day of surgery. Ibuprofen can be taken instead of, or in addition to, your prescription pain medication, according to the directions on the bottle. Antibiotics may produce loose bowel movements, but if you develop significant diarrhea, especially if associated with a fever, please call the office immediately at 804-285-4115.

PHARMACY: Your prescriptions were sent electronically to the following pharmacy: _____

FOLLOW-UP APPOINTMENT:

() Your appointment is scheduled for _____.

West Creek Office of Richmond Plastic Surgeons
1630 Wilkes Ridge Parkway, Suite 201
Richmond, Virginia 23233

Midlothian Office of Richmond Plastic Surgeons
14401 Sommerville Court
Midlothian, Virginia 23113

() Please call **804-285-4115** to schedule an appointment for _____.