

Redlands Dental Surgery Center
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Postoperative nausea and vomiting: The most common problem following dental treatment under general anesthesia is postoperative nausea and vomiting (PONV). It occurs in the first 24-hours after treatment and is primarily an effect of the drugs used to keep the patient asleep. Many factors play a role in which patient experiences PONV and to what extent the patient is affected. Some of these factors are: 1) general state of health at the time of the appointment, 2) the familial tendency toward motion sickness, 3) swallowing blood (after a tooth extraction), 4) dehydration, and 5) eating or minimize PONV. Severe PONV may lead to dehydration (see below). Finally, if the PONV occurs after 24-hours or lasts longer than 24-hours then another cause such as the flu must be suspected.

Fever: Fever after treatment is almost always due to dehydration. A fever of less than 101F is best treated with hydration) encouraging your child to drink clear liquid) and either liquid Tylenol (if not allergic) or liquid Motrin (if not allergic), both of which lower fever in addition to reducing pain. Be sure to use the correct age and/or weight for specific dose that is listed on the bottle. Fevers greater than 101F need more aggressive management. Use the both methods described above, but also consider placing your child in a warm ("tepid") bath and allowing him or her to play with safe water toys. As the bath water cools the child will also cool. Fever over 102F should be reported to the phone number listed above to the doctor.

Rash: Rashes after dental treatment are fairly common. The most common cause of rash is from the placement and removal of adhesive take and monitoring pads. The areas commonly affected are: right and left chest near the neck, left side around the stomach, forehead, eyes, cheeks, and areas where the intravenous line was placed or attempted to be placed. This type of rash will disappear in a few days and is not serious. If your child develops a rash that involves either the trunk (stomach and back), the extremities (arms and legs), and/or the face and neck, then you should call the number above. The most likely cause of this type of rash is an allergy to one of the medications used during anesthesia. Treatment may consist of elixir diphenhydramine (Benadryl) for 3-4 days. If your child has trouble breathing then you should immediately call "911".

Pain and Swelling: It is common for children to experience mild to moderate pain following dental treatment, especially when extractions, pulpotomy's (baby tooth rootcanals) or stainless steel crowns are performed. Pain is best managed with liquid Tylenol (if not allergic) or liquid Motrin (if not allergic). If your child has severe pain then you will need to call the number listed above and talk to the doctor to discuss the problem your child is having.

Bleeding: A minimal amount of bleeding is expected to occur for the first 24-hours after a tooth is extracted. Often there is a slight oozing of blood, and when a small amount of blood is mixed with saliva it appears to be excessive bleeding. Excessive bleeding with result in clumps ("clots" of blood being spit out of the mouth. In case of persistent bleeding, fold two or three sterile gauze pads (the office will provide you some supply for after care) and place them over the area of bleeding. Have child bite down on the gauze to exert pressure on them to stop the bleeding. Bleeding should slow down and stop within 15 to 20 minutes. If bleeding still continues please contact our office at the above the number right away. Sometimes an extraction are will require sutures ("stitches") to be placed at the site. Do not allow the patient to pull or play with the sutures. They will dissolve on their own within 10-14 days.

Dryness of lips: For dryness of lips Vaseline may be applied to the lips.

Diet: To reduce the chance for PONV, it is recommended that the child's diet be limited to clear liquids for the first several hours after returning home. Clear liquids consists of: water, ice chips, popsicles, 7-Up, ginger ale, clear fruit juices, Gatorade, Jell-O, clear soups and broth. The first meal should be soft, require little chewing, and only be given if your asks for food and has not had nausea or vomiting with the clear liquids. Suggestions to the first meal include: Applesause, scrambled eggs, mashed potatoes, and soups. DO NOT ALLOW USE OF STRAWS FOR THE NEXT 48 HOURS. Use of straws can increase the bleeding. Try to avoid sipper cups and bottles for the first day for the same reason. Drinking from a cup or glass is fine.

Activity: Have your child rest and plan to have adult supervising his/her activities for the entire day following surgery. Resting, watching TV, reading, and being up with an adult's assistance is recommended. NO strenous playing, No sports such as swimming, baseball, soccer or playing on a playground, etc to be performed day of surgery. Patient should avoid going outside on a hot day.

Oral Hygiene: Begin brushing your child's teeth the day after surgery. It is fine for younger children to brush for themselves, but an adult should finish by thoroughly brushing the child's teeth for 3-5 minutes each day until the age of eight (8). An adult should do this since the young child lack the hand skills and motivation to clean the teeth properly. Only a small amount of toothpaste is necessary since it only servies to freshen the breath and the strong taste may result in reduced brushing time.

Numbness: You should watch your child following surgery. Child tend to sometimes accidentally bite themselves after receiving local anesthetic since they cannot feel their lips and tongue. This could result the child have pain, and swelling where the biting occurred.

Questions: If there are any questions about your child's condition, or if there is excessive pain, fever, bleeding, swelling, or any other problems, please contact Redlands Dental Surgery Center at (909)335-0474. After hours still phone office number and you will receive a phone call back to assist your questions. Thank you.