

Dental Extractions Discharge Instructions

Will my pet be in pain?

Your doctor will prescribe oral pain medication for you to give at home for the next few days to help keep your pet comfortable.

Your pet may be sore the first night home and possibly over the next few days. While some degree of discomfort is expected, if you are concerned about your pet's behavior, contact your doctor as soon as possible.

What can I expect when I bring my pet home?

You will need to have someone home with your pet tonight. It is normal for your pet to be sleepy, less coordinated, whiny, or drool for 12-24 hours. Your pet should be responsive and able to walk, but will most likely want to sleep.

Do's and Don't's:

- *Do remove the bandage at either the front or hind limb as soon as you arrive home.* A bandage was placed once your pet's IV catheter was removed. Failure to remove the bandage can result in swelling of the limb and potentially serious complications.
- *Do wait at least 2 hours after getting home before feeding.* Feed your pet only $\frac{1}{4}$ to $\frac{1}{2}$ the normal amount of food and water. This will help prevent your pet from vomiting, since pets may feel nauseous after surgery or anesthesia. Tomorrow you may offer food and water as usual.
- *Do give soft food for 2 weeks, or long-term in some cases.* If you usually feed dry kibble to your pet, simply add water to the kibble, soak for 30 minutes, and then mix the kibble before offering the softened food. If you usually feed canned wet food to your pet, continue on as usual. We recommend against suddenly switching from kibble to canned or vice versa as this may result in vomiting or diarrhea from the sudden food change.
- If a cone collar has been recommended after upper canine tooth extraction(s) or other major extractions, do keep it on at all times for the full 2 weeks until the recheck exam.
- *Do watch for the following signs:*
 - Completely unresponsive/inability to stand.
 - Refusal to eat or drink for more than 12 hours.
 - Excessive swelling or bleeding. Some bleeding from the gums after extractions or even some bleeding from the nose after canine tooth extractions can be expected for up to 24 hours.
 - Pale/white mucous membranes. View the gum tissue inside the mouth to make an assessment.
 - Severe vomiting or diarrhea.

- o It is normal for your pet to not have regular bowel movements for several days after anesthesia. Do monitor to make sure there is no straining to defecate and do keep your pet hydrated by encouraging water intake (or adding water to the food) in order to help prevent constipation.
- o Some dry hacking coughing may occur up to several days after the anesthesia secondary to the intubation. If there is excessive coughing or a soft moist cough, please call us.

IF YOU NOTICE ANY OF THESE SYMPTOMS, CONTACT YOUR DOCTOR IMMEDIATELY AS THEY CAN BE SIGNS OF SERIOUS POST-OPERATIVE CONCERNS. IF OUR HOSPITAL IS NOT OPEN, CONTACT A VETERINARY EMERGENCY CENTER IMMEDIATELY.

What other complications may occur from dental extraction?

Dental extraction can be fairly simple and almost all patients lead happier and healthier lives after having diseased teeth removed. However, it is worth mentioning some of the rare but potentially serious complications associated with dental extractions.

Jaw Fractures

Severe periodontal disease can weaken the mandible (lower jaw), causing it to fracture either spontaneously or during an extraction. These fractures are most common in the area of *the lower carnassial teeth* and the *lower canine teeth*.

Further treatment will be needed if your pet's mandible fractures during extraction or is already spontaneously fractured secondary to severe bone loss. Depending on the type and location of the fracture, we may be able to stabilize the fracture at our hospital or we may need to refer your pet to the veterinary oral surgeon for more extensive care.

Oronasal and Oroantral Fistulas

Oronasal and oroantral fistulas are communications between the oral cavity and the respiratory/nasal tract. The loss of integrity of the bone in certain areas of the maxilla (upper jaw) results in the fistula.

Periodontal disease is typically responsible for these fistulas. Other causes include trauma, especially from bite wounds or dental extraction, developmental clefts, or even cancer.

If your pet has been diagnosed with an existing fistula, or if one develops post-extraction, our doctors may recommend surgical repair of the fistula in order to avoid further complications such as chronic infection and chronic sneezing or nasal discharge. Our doctors can repair minor fistulas but we may refer you to a veterinary oral surgeon if the fistula is extensive.

Retained Fractured Tooth Roots

Fractured roots can be encountered when extracting teeth due to factors such as pre-existing damage to the root structures or root anatomy. Retained root fragments can also be present with a prior tooth fracture where the gingiva or gum and bone grew over the area of the prior tooth trauma.

In certain anatomic areas, there is a possibility of pushing a fracture tooth root fragment where it might cause clinical signs or be difficult to retrieve.

If your pet develops chronic oral pain or infection and our doctors suspect retained tooth root fragments as the culprit, we may refer you to a veterinary dentist for dental x-rays and oral surgery to extract the remaining tooth root fragment if we are unable to extract the tooth roots here.

Lip Entrapment in Cats

If a cat has to lose an upper canine tooth (due to end-stage periodontal disease, tooth resorption, fracture, etc), there is a tendency for the upper lip to sink in. Then the lower canine may bite/pinch/traumatize the upper lip each time the cat closes its mouth. Most cats learn how to close their mouth without biting themselves, but a small percentage (approximately 5%) of cats do not.

For the cats with chronic lip entrapment, options at this point include referral to the veterinary dentist for a crown reduction and endodontic therapy of the lower canine, or even extraction of the lower canine.

Needing Extraction of the Opposing Tooth if there is Chronic Irritation

Rarely chronic irritation can occur at the healing extraction site due to contact with the corresponding opposing tooth. This scenario can lead to the formation of excessive and inflamed gingival tissue at the site of chronic trauma from the opposing tooth. Extraction of the opposing tooth is generally recommended to resolve the chronic trauma and resolve the chronic inflammation.

Other Complications

- Delayed wound healing
- Dehiscence (opening up of the wound at the oral surgery site)
- Infection
- Ocular swelling
- Salivary duct injury
- Damage to adjacent nerves or vessels
- Tongue swelling