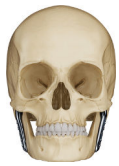
POST-OPERATIVE CARE

TMJ Replacement

Home care instructions after total temporomandibular joint replacement



Please note: These instructions are specific to patients of Northeast Facial and Oral Surgery Specialists, LLC. Every patient's post-operative care is unique. You may be given specific instructions by your surgeon that differ from what appears on this sheet. If so, follow your surgeon's instructions. This document should be used as a guide only and does not replace the medical advice of your treating provider.

JAW EXERCISES	SOFT, NO-CHEW DIET	DRESSINGS COME OFF	FIRST VISIT
5 sessions a day	6–8 weeks	2–3 days	1 week

01 What to expect after surgery

- **Plan on one night in the hospital.** The surgery is done with you fully asleep, through two skin incisions that allow the diseased joint to be removed and your custom prosthetic joint to be placed.
- **You may also have a small abdominal incision.** If tissue was taken from below the belly button, care for that site the same way you care for the incisions near your jaw.
- **Light bleeding and bruising at the incisions are normal.** Heavy bleeding is not normal — report it to us immediately.
- **Some dried blood in the ear is common.** If needed, it can be rinsed with a mix of half water and half vinegar using a dropper, up to three times a day. Your surgeon will go over this with you.
- **Bring your splint to the hospital** on the day of surgery if you have one.

02 Incision & wound care

- **Leave the dressings in place for the first two to three days.** Keep them dry until then.
- **After that, you may remove them and shower.** Clean the incisions gently with mild soap and water, then pat dry.
- **Care for the abdominal incision the same way,** if you have one.
- **Do not soak, scrub, or pick at the incisions.** No swimming or baths that submerge the wounds until your surgeon clears it.

03 Your medicines

- **Take everything exactly as prescribed on your bottles.** Doses are set for you individually — follow the label rather than any general guidance.
- **Finish the full course of antibiotic.** This is usually a seven-day course. Complete every dose even once you feel well, and call us before stopping for any reason.
- **You may also be given an anti-inflammatory** to reduce swelling and joint discomfort, and medicine for pain. Take them on schedule for the first several days rather than waiting for pain to build.
- **A muscle relaxant may be prescribed at bedtime** if you clench or grind. It can make you drowsy — do not drive after taking it.
- **Anti-nausea medicine is available if you need it.** Call us if nausea is keeping you from taking your medicines or drinking enough.

04 Jaw exercises — your most important job

- **Your jaw must move in order to heal well.** Range-of-motion exercises are critical to your long-term function. Not moving the joint greatly increases the chance of a poor result.
- **Opening will be limited for the first week or two.** Guiding elastics inside your mouth restrict how far you can open. Begin the exercise program once those elastics are removed.
- **Do the full cycle in front of a mirror.** Open your jaw in as straight a line as you can and hold 5–10 seconds, then rest 5–10 seconds. Move the jaw to the left, hold, and rest. Move to the right, hold, and rest. Then push the lower jaw forward in a straight line, hold, and rest.
- **Repeat the cycle five times to complete one session.** Do at least five sessions every day.
- **A home motion device may be recommended.** Your surgeon may ask you to use a device such as a TheraBite or EZ Flex II, and will review the exercises with you.

05 Diet — move the jaw, but do not load it

- **Stay on liquids while the guiding elastics are in place.** Once they are removed, move to a soft, no-chew diet.
- **Keep the no-chew diet for about six to eight weeks.** After that, your surgeon will guide you back toward a normal diet.
- **Good early choices include** tuna fish, ground beef or other ground meats, yogurt, applesauce, canned fruits and vegetables, eggs, tofu, soft fish, and soft bread with the crust removed.
- **Avoid anything that loads the joint.** No raw fruits and vegetables, tough meats, hard candy, chewing gum, pretzels, or chips. Chewing hard foods greatly increases the chance of a poor surgical result.
- **Remember the principle.** Movement without load helps the joint heal. Movement against resistance does the opposite.

06 Follow-up visits

- **Keep every post-operative appointment.** Your long-term outcome depends on it.
- **You will typically be seen one week after surgery,** then at three weeks and six weeks. Visits vary after that.
- **Report any problem right away** rather than waiting for your next scheduled visit.

07 Protecting your new joint long term

- **Ask about antibiotics before dental work.** Your surgeon may want you to premedicate with antibiotics before invasive dental visits for a period after your joint replacement.
- **Tell every provider that you have a prosthetic joint.** Check with your surgeon before any invasive dental or medical procedure. Bacteria from elsewhere in the body can travel and settle around a prosthetic joint.
- **Protect the joint from heavy loading.** Even after you return to a normal diet, avoid gum and very hard or chewy foods unless your surgeon says otherwise.

Additional instructions

Notes from your surgeon

⚠ When to call our office

- Fever over 101°F (38.3°C)
- A fever that lasts beyond about a week
- Heavy bleeding from any incision
- Increasing redness, swelling, warmth, or drainage at an incision, including the abdomen
- New or worsening numbness, or weakness moving your face
- Jaw opening that is getting worse instead of better
- Splint or elastics that break or come loose
- Nausea or vomiting that keeps you from taking medicines or drinking

Call our office at **973-360-1100**.

+ Call 911 for an emergency

Call 911 or go to the nearest emergency room immediately if you have any of the following:

- Trouble breathing, gasping, or noisy or labored breathing
- Lips or face turn blue or very pale
- Choking, or you cannot swallow
- Heavy bleeding that will not stop
- Chest pain, or sudden shortness of breath
- Fainting, a seizure, or new confusion
- Cannot be woken, or is very difficult to rouse
- Swelling of the face, tongue, or throat, or hives after a medicine (allergic reaction)
- Severe dehydration — dizziness or fainting, passing no urine, or extreme drowsiness
- A high fever with a stiff neck or severe drowsiness

For any other severe concern, or if you are in doubt — call 911. Do not wait to call the office in a life-threatening emergency.