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# Instructions of Operative Care for Oral and Maxillofacial patients



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All information above has been reviewed by oral surgery specialists
Edited and published by the Department of Nursing,
Taichung Veterans General Hospital

## I. Pre-operative instructions





- 1. You need to be taken these exams, such as EKG, Chest X-ray, and blood sample.
- 2. If you have any allergic history, please inform us.
- 3. After you visit the anesthesiologist, please remember to fill your information in the "Anesthesia Consent Form".
- 4. You can talk to doctors about any concerns on "Surgery consent form", they will explain to you in detail.
- 5. For reducing infection in the oral cavity, please dilute 0.2% chlorhexidine mouthwash and cold water by 1:1 formula, gargle for 30 seconds, and repeat more than 4 times a day.
- 6. Please do not eat or drink anything before examination or from midnight, fluid supply would be prescribed for you.

## II. Intra-operative instructions

- Due to the policy of patient's privacy, if you don't want your name to be found, your personal information will not be shown on the computer screen outside the operation room located on the 3<sup>rd</sup> floor of the First Medical Building.
- 2. Family or friends can wait at the ward or the recovery room outside the operation room.

## III. Post-operative instructions (anesthesia recovery room period)

1. When you wake up, your families can visit you in the recovery room during the visiting hours.

2. Under surgical procedure, you may be inserted many tubes, for examples: nasal-gastric tube, nasal endotracheal tube, foley catheter or wound drain tube. In this situation, your hands may be restrained for your safety, which may make you feel uncomfortable. We will remove those tubes step by step and as soon as possible.

### IV. Precautions after surgery

#### 1. Keep the airway clear

- (1). Keep head up at least 30 degrees. To prevent distortion and compression of the vasculature of the rebuilt parts, your head should be positioned by doctor's orders.
- (2). Your oral cavity and upper airway will be swollen after surgery. Some patients may need tracheostomy or endotracheal tube to maintain the airway, and nurses can suction the sputum to keep airway clear.

#### 2. Chest care

- (1). When you are awake, you can start to take deep breath and cough training at least 6-8 times per hour.
- (2). When you feel dyspnea, please inform medical staffs immediately.

## 3. Nutrition support

- (1). If the operation involve oral cavity, your nutrition must be provided via nasal gastric tube about 7-10 days.
- (2). If you begin to eat or drink, we will consult the dietitian to teach you how to prepare your diet.
- (3). Nurses will assist and teach you the skills about the nasal-gastric feeding.

#### 4. Oral hygiene

- (1).To avoid saliva drooling and contaminating of operation sites, you can suction by yourself or ask nurses to suction.
- (2). Please dilute 0.2% chlorhexidine mouth wash with cold water by 1:1, gargle 30 seconds for more than four times per day.
- (3). For patients with oral flap, you can rinse gently to keep the mouth clean using warm saline at least four times per day. You can use the sponge toothbrush with 0.2% chlorhexidine and squeeze it. Nurses will teach and help you to use rinse and suction the sputum or saliva.
- (4). If there is bad odor, you can increase the times of mouthwash.

#### 5. Drainage tube care

- (1). You can milk the drainage tubes as often as possible to keep it patent.

  Please follow the instructions of the nurses.
- (2). Pay attention to your drainage tubes and avoid to pulling them off when you are moving from your bed.
- (3). Nurses will observe and record drainage color and volume.

#### 6. Wound care

- (1). Donor site:
  - a. You should not take off the dressings at the donor site by yourself to protect wound.
  - b. If you feel abnormal conditions on the donor site, such as pain, swelling or secretion. Please inform us to check the functions immediately.
  - c. When you take a shower or a sponge bath, donor site must be covered with plastic wrap to prevent getting wet.

#### (2). Skin graft area:

- a. Four days after surgery, doctors remove the elastic bandages and the sterile transparent film (OP-site), and cover the alginates <u>Mepilex</u> at the open wound. Please do not tear it off.
- b. If you feel uncomfortable while walking, please ask nurses to check the tightness of elastic bandage.
  - (i) If there are rash, itching or other abnormal appearances on your skin, please contact our staffs.
  - (ii) If alginate dressing is completely detached from your skin, you can use hydrate lotion to moisturize the skin graft area.

#### 7. Early ambulation

You can get out of the bed to facilitate recovery quickly. But in order to protect skin graft area, we recommend that you don't walk too much at the first day after surgery.

#### 8. Communication

If you have tracheostomy or endotracheal tube, you cannot speak. There are many ways to communicate with others, such as writing, gestures, drawing, blinking or communication cards.

#### 9. Oral rehabilitation

In order to train and restore the functions of mouth opening, we will teach you to do mouth opening exercise more than 10 times a day.

## V. Instructions after discharge

- 1. We will teach you the skills about wound care.
- 2. You need to follow up at OPD regularly. Doctors will assess your conditions and arrange the schedules of chemotherapy, radiation therapy or speech rehabilitation.
- 3. If you have any emergent conditions, such as fever, pain, swelling, wound bleeding or tracheostomy tube falling out. Please come back to hospital.

#### VI. Conclusion

After you surgery should strengthen postoperative wound care and oral hygiene, and learn oral clean early. Wounds and clean care methods to facilitate wound healing and avoid infection and deterioration.

#### Reference

# Let's take the quiz to make sure you understand

1. The ratio of mouthwash to cold water is 1:1.
○Yes ○No ○Don't know
2. Those who have surgery the next day are required to refrain from eating
and drinking after 12pm.
○Yes ○No ○Don't know
3. You can lie completely flat after surgery, and the head of the bed does no
need to be raised 30 degrees.
○Yes ○No ○Don't know
4. After extensive oral resection surgery, you will not be able to eat by
mouth for about 7-10 days, and a nasogastric tube will usually be placed
○Yes ○No ○Don't know
5. The doctor will help the doctor to replace the skin removal wound with
special dressing until the wound heals. There is no need to remove and
change the dressing every day.
○Yes ○No ○Don't know