What will I experience following the procedure?

In many cases the jaw sections are held together during the healing period by small screws and plates to stabilize the jaw from moving. Your teeth will not be wired together. While your jaws are healing, you will be on a non-chewing diet for at least two weeks. You may be advised to supplement your diet with liquid vitamins and minerals.

You may experience nasal congestion or a sore throat due to the tube placed in your nose to assist with your breathing during the surgery. If you have had upper jaw surgery, it is important not to blow your nose for two weeks following your surgery.

Swelling generally peaks approximately 48 hours after surgery and typically remains unchanged for about one week. It usually resolves by the second to third week.

Minor bleeding and bruising may be experienced and there may be some oozing of blood from the nose.

What can I do following my surgery?

You will be given a follow-up appointment with your surgeon prior to going home.

It is important to practice good oral hygiene, with gentle tooth brushing and salt water mouth rinses.

You should be able to return to work or school within 2 weeks.

Your appearance may have changed due to the repositioning of your jaws, so be prepared for surprised reactions of family and friends.

Nasal decongestants and a humidifier in your bedroom will help to improve your ability to breathe through your nose.

When should I call the doctor?

Call the doctor if you notice:

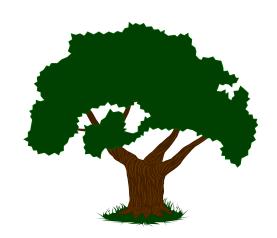
- any signs of infection such as persistent swelling/pain or pus
- excessive or prolonged bleeding
- changes in how your teeth come together

If you cannot reach your surgeon, go to the Emergency Department of the nearest hospital.

References:

- 1. Instruction for Surgery Patients Economou & Economou
- 2. A Patient's Guide to Orthognatic Surgery
- 3. MEDLINEplus Medical Encyclopedia
- 4. Dr. B. MacNicol and Dr. M. Jackson, and Dr. A. Gater





ORTHOGNATHIC SURGERY

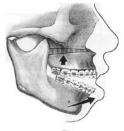
Surgery Program

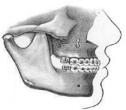
RVH-4114 Revised March 11, 2015



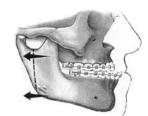
What is Orthognathic Surgery?

Reconstructive surgery of the jaw is referred to as orthognathic surgery. The objective of this surgery is to correct a wide range of minor and major facial and jaw irregularities. Benefits include an improved ability to chew, speak, breathe and improve your bite. In many cases an enhanced appearance can also result. The surgeon will reposition one or both jaws. The lower jaw (mandible) is the only mobile bone of the face (it holds the lower teeth). The term "upper jaw" (maxilla) refers to the bone that extends from the upper teeth to the other bones of the face. The mandible is connected to the temporal bone of the skull by a hinged joint located in front of the ears ("TMJ" or temporo-mandibular joint). Corrective jaw surgery moves teeth and jaws into a new position that is more balanced, functional, and healthy.



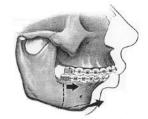


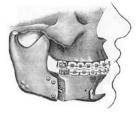
Before and after upper jaw surgery to correct an open bite. The upper jaw is held together with plates and screws.





Before and after profiles showing correction of a protruding lower jaw.





To correct a receding lower jaw, the jaw is moved forward from behind the teeth, a portion of the chin is moved forward and both areas of the jawbone are held in place using plates and less screws.

What risks are involved with jaw surgery?

As with any operation, complications are always possible. With this type of surgery complications could include:

• Loss or alteration of nerve sensation resulting in numbness or a tingling sensation in the face, jaw, teeth, or tongue may occur as the nerves are healing.

- Temporary reduced range of movement of the jaw or impaired chewing or speech function typically occurs.
- Infection is a potential risk of any surgical procedure.
- Nausea can occur following general anesthesia or from taking pain medication on an empty stomach.

How do I prepare for jaw surgery?

- Do not eat after midnight before your procedure.
- Bathe or shower the morning of your surgery.
- Brush your teeth well and rinse your mouth prior to surgery.
- Take all your routine a.m. medications at 6:00 a.m. with a sip of water unless otherwise instructed.
- If you are on diabetic or blood thinning medications, check with your doctor about stopping them.
- You must arrange for a responsible adult to accompany you home and stay with you overnight.

What hospital process can I expect?

When you arrive for your surgery, you will register with a clerk in Registration. Once you are registered, you will be asked to change into a hospital gown and housecoat.

A nurse will then check you blood pressure, pulse, height and weight. Your health history will also be reviewed. The surgeon will discuss the procedure in detail with you prior to the operation, either in the office or at the hospital, and will ask you to sign a consent form indicating that you understand and agree to proceed with the operation. If you have questions, these should be asked BEFORE coming to the hospital if possible.

You will be taken to the waiting area by the operating rooms. One family member may remain with you while you wait. At this point you will meet the anesthesiologist who will be in charge of your care during the surgery. An Operating Room nurse will also come out to meet you and accompany you to the OR.

Following the procedure you will be taken by stretcher to the Post Anesthetic Care Unit (PACU) where your blood pressure, pulse and breathing will be monitored closely. When you are awake and stable you will be transferred to the Critical Care Unit where you will stay for the first night. Your blood pressure, pulse and breathing will be monitored continuously in this area.

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