

**Introduction**

Removal of tooth from the jawbone.

**Indications**

1. Dental Decay.
2. Periodontal Disease.
3. Dental Trauma / Fractured tooth.
4. To facilitate orthodontic or rehabilitative treatments.

**Intended benefits and expected outcome**

1. Pain relief.
2. Prophylaxis / Treatment of infection.
3. Facilitation of restorative and/or rehabilitative treatments.

**The Operation****1. Simple Extraction**

A pair of forceps is used to grip the tooth firmly, loosen the tooth and remove it from the alveolar bone.

**2. Surgical Extraction**

- a Incisions are made in the overlying gums to raise a flap.
- b Bone covering the tooth is removed.
- c The tooth can then be dissected and extracted out.
- d The incisions are closed with sutures.

**Preoperative Preparation**

Patient should inform the dentist of any medical condition (e.g. diabetes mellitus, heart disease, hypertension) and any regular medication (e.g. anticoagulant), including herbs and dietary supplement.

**Postoperative Instruction**

1. May need analgesics for pain relief.
2. Mild discomfort of adjacent teeth may last for 3-4 days after extraction.
3. To prevent bleeding, swallow all saliva. Do not spit or rinse your mouth on the first day.
4. Do not touch or disturb the operation site with your tongue, finger or any other objects.
5. Avoid smoking, alcohol or hot food and beverages.
6. Avoid heavy physical duties or vigorous exercise.
7. Oozing is normal.

**Common Risks and Complications**

There are certain side effects and risks of complications. The dental team will take every measure to minimize their occurrence.

1. Pain and swelling.
2. Bruising.
3. Bleeding.
4. Post-operative wound infection could delay healing and require antibiotic treatment.
5. Root apex retained.
6. Damage of the adjacent teeth, fillings or gums.
7. Jaw joint pain - usually this is temporary.
8. Limited mouth opening.

**Uncommon Risks with Serious Consequences** (<1% risk)

1. Temporary or permanent numbness of lip / tongue / chin /cheek / teeth.
2. Maxillary sinusitis and / or oro-antral fistula may develop after upper molar extractions, these would require further treatments.
3. Bone fracture, may need further treatment.

**Consequences if Untreated**

1. Dental Decay.
2. Periodontal Disease.
3. Dental Alveolar Abscess and Infection.

**Follow Up**

See the doctor as scheduled.

- \* If you have problems after our normal dental clinic hours, you may call our Out-Patient Department (Tel No: 2711 5222) or go to A&E department of nearby hospital.
- \* Patient of "**Loving Smiles Dental Service for Intellectual Disability**" please consult attending dentist directly.

**Remarks**

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

**References**

Cleveland Clinic: "Tooth Extraction" (2021) <https://my.clevelandclinic.org/health/treatments/22120-tooth-extraction> (03-08-2023)