

Definition of types of jaw and mouth lesions:

Benign masses

These masses may involve the bone and sometimes cause bleeding and swelling. As their name suggests, they are benign and respond to treatment. Of course, they may recur after treatment, but they will not cause problems and will never spread or progress to the surrounding area.

Ameloblastoma

Ameloblastoma is a tumor that is associated with cysts and impacted teeth. Ameloblastoma is a benign mass and does not invade other areas, but it grows rapidly, especially if it is located next to the wisdom tooth in the lower jaw. Asymmetry, looseness, and swelling are common symptoms of this tumor.

Cancerous lesions

These lesions are intraosseous and do not originate from the mucosa. They are very rare and involve cancerous tissue in the jawbone and facial muscles or spread to the jaw and face from other areas.

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Salivary Tumors

There are 6 pairs of major salivary glands and 4,000 minor salivary glands in the oral mucosa that play the role of moisturizing the mouth.

Salivary gland tumors come in many forms, and their symptoms include unilateral swelling of the earlobe, pain, unilateral ulceration of the palate, swelling of the floor of the mouth, and swelling of the front of the jaw and neck. The tumors must be removed, and sometimes the salivary gland tumor must be removed along with it, so that this does not cause any problems for the patient in the future.

Histiocytosis

This disease is seen in children in the infantile age before and after school, in the form of a tumor in the jaw. Sometimes general symptoms appear in the form of fever, and if it is accompanied by bleeding, it may endanger the child's life. Therefore, in children, you should also pay attention to loose teeth (progressively) and abnormal swelling and bleeding.

Preoperative training:

- Training patients to fast for 8 hours before surgery
- Training not to take blood pressure, diabetes and anticoagulant medications before surgery as ordered by the doctor
- Training on removing dentures, artificial nails, chewing gum, jewelry, etc.
- Training on voiding urine before surgery
- Removing nail polish

Postoperative instructions:

- 1- Keep the gauze placed on the extracted tooth for at least half an hour with gentle pressure on the jaw.
- 2- Due to the long anesthesia time (usually 3-4 hours) and the numbness of the soft tissues around the tooth, be careful not to bite your lips, cheeks, or tongue.
- 3- Avoid rinsing your mouth on the day of surgery and avoid sucking and frequent emptying of saliva.
- 4- From the second day, gently rinse your mouth with saline solution or diluted salt water or the prescribed antiseptic solution, after each meal during waking hours, and every three hours.

5- It is normal for some bleeding to occur for several hours after oral surgery. If bleeding occurs, place a piece of sterile gauze over the area and hold it there for 30 minutes with gentle pressure from the opposing teeth. If bleeding continues, repeat this procedure and avoid changing the gauze at intervals of less than 3 minutes.

6- After surgery, a gray crust may appear on the wound inside the mouth, and the mouth will have a bad taste and odor for a few days. These conditions are normal and do not indicate the presence of infection.

7- Have a liquid or soft, lukewarm or cold diet on the first day and from the next day if you are not uncomfortable, you can use regular foods. (Chew food with the other side of the jaw) Consuming sufficient and nutritious fluids and foods is essential after surgery and has a significant impact on your healing and recovery. Be careful to avoid direct pressure of the food morsel on the sutured tissue for a week.

8- Swelling and pain are to be expected after surgery. Applying a cold compress (ice pack) outside the mouth after surgery is effective in reducing swelling.

9- Swelling is maximal within 24-48 hours after surgery and then decreases and disappears within 7-10 days.

10- Sometimes after tooth extraction, a blood clot is separated from the cavity of the extracted tooth and a condition called dry socket occurs. This condition occurs a few days after the clot comes out and is relatively painful. If this condition occurs, contact the clinic.

11- After surgery, refrain from smoking cigarettes and pipes and using straws to drink liquids for a few days.

12- It is recommended to place two pillows under you while resting.

13- Brushing your teeth is fine from the day after surgery, but be careful not to brush your teeth directly on the stitches for a week.

14- Return to the clinic one week after surgery for suture removal.

Minimum Education During Discharge:

Diet

Educate about the prescribed diet based on the condition or diagnosis.

If a diet has not been prescribed, educate the patient to consume a low-residue, high-protein, high-calorie diet.

Home Care

General Information

Provide written and verbal instructions to the patient and caregiver.

Review the doctor's explanation of the disease and the factors that contribute to its development.

Warning Signs:

In case of high fever and respiratory distress, be sure to visit the maxillofacial emergency center.

Activity

Advise the patient to avoid strenuous activity after surgery.

Encourage the patient to perform self-care activities as tolerated.

Instruct the patient to elevate their head approximately 45 degrees above the body level when resting.

Diet

Remind the patient of the prescribed diet, which includes high-calorie and protein foods (soup, natural pineapple and apple juice, and muscle water), as well as consuming soft foods along with clear liquids.

Tell the patient to avoid stimulant foods.

Help the patient and caregiver consult with a nutritionist about special diets.

Medications

Explain the purpose, amount, timing, and method of taking each prescribed medication, such as antibiotics, as well as any side effects that should be reported to the doctor or

nurse.

Antibiotics may be prescribed to control the infection. Gargling with lukewarm salt water, pain relievers to relieve fever and toothache.

Instruct the patient to avoid taking over-the-counter medications without consulting the physician.

Advise the patient to avoid taking aspirin, warfarin, and other similar medications after surgery due to the risk of bleeding.

Stress the importance of regular visits and make sure the patient has the names and phone numbers of emergency contacts.

Return to the clinic one week after surgery for suture removal.