



PERIODONTAL POST-OPERATIVE INSTRUCTIONS

You have received periodontal therapy, which may include scaling and root planing (deep cleaning), local antimicrobial placement (Arestin), and/or periodontal irrigation. These treatments are designed to reduce bacterial infection below the gumline and help stabilize periodontal (gum) disease.

Expected Normal Responses

After treatment, it is common to experience:

- Mild to moderate gum tenderness or soreness for 24–72 hours
- Sensitivity to cold, air, or brushing
- Slight gum bleeding when brushing or flossing
- Temporary swelling or “loose” feeling of teeth due to reduced inflammation
- Small gritty sensation if Arestin was placed (do not disturb sites)

These effects typically improve within a few days to one week.

Arestin (Local Antibiotic) Instructions

If Arestin was placed:

- Do **not touch, floss, or probe the treated areas** for at least **10–14 days**
- Avoid chewing hard, crunchy, or sticky foods on treated sides for **24–48 hours**
- Do not use water flossers or oral irrigators in treated areas during the healing period unless directed
- Mild taste changes or minor particles may be noticed and are normal

Oral Hygiene Guidelines

- Continue **brushing gently twice daily** with a soft-bristled toothbrush
- Resume flossing carefully after 24–48 hours unless otherwise instructed
- Use antimicrobial rinses if prescribed or recommended
- Maintain excellent home care—this is essential for healing and long-term success

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Treatment plans and insurance estimates are provided as a courtesy and are based on information available at the time of treatment planning. All treatment plans, insurance estimates, and patient portions are estimates only and are not a guarantee of insurance coverage or payment. Any amount not paid by insurance remains the responsibility of the patient.

Irrigation / Antimicrobial Rinses

If in-office irrigation or antimicrobial rinse was used:

- Do not rinse aggressively for the first few hours after treatment
- Follow any prescribed rinse schedule exactly as directed
- Do not substitute or discontinue medicated rinses without consulting the office

Periodontal Maintenance is Mandatory

Periodontal disease is a **chronic, non-curable condition** that can only be controlled—not eliminated.

To maintain stability:

- Periodontal maintenance cleanings are typically required every **3–4 months**
- Skipping maintenance increases risk of:
 - Bone loss progression
 - Gum recession
 - Tooth mobility and possible tooth loss
 - Recurrence of infection and bleeding

Failure to maintain regular visits may result in rapid disease recurrence even after successful treatment.

When to Contact the Office

Call the office if you experience:

- Pain that worsens after 3–4 days instead of improving
- Significant swelling or pus
- Persistent bleeding
- Fever or signs of infection
- Severe tooth mobility or bite changes

Key Reminder

Deep cleaning and adjunct therapies such as Arestin and irrigation are only the first step. Long-term success depends heavily on **home care and strict periodontal maintenance compliance**.

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