



Preoperative Information for Patients Undergoing Orthognathic Surgery

This information is to prepare you for your upcoming surgery. Please review and if you have any questions call our office. 905-934-5432

1. Prior to your Hospitalization

We encourage and ask our patients undergoing this type of surgery to begin the following program four weeks prior to surgery:

- a. Being physically active prior to major surgery will help with your recovery.
- b. Vitamin C: taking a good quality vitamin C supplement (1000mg/day) will help with your post-operative healing. Start this the day before surgery and continue for 30 days postoperatively. Liquid formulas are available and will be helpful for the 2 weeks post-op when your jaw is closed with elastics
- c. Cigarette smoking may adversely affect your anaesthetic and your recovery period. It can also delay healing and increase the risk of infection. Smokers should make every effort to reduce or stop their tobacco consumption to help avoid these potential problems.

2. Day of Admission to the Hospital

On the day of admission or as an outpatient within a week of planned surgery, your physician and one of the hospital anaesthetists will complete a history and physical exam. The primary intent of this examination is to screen patients for any potentially complicating systemic diseases. Should questions arise as a result of this examination, appropriate consultation with other physicians will be made. Laboratory examinations such as blood tests and urinalysis may be done. Also, a chest x-ray and electrocardiogram may be necessary. A sample of blood may be taken for testing so that proper blood may be reserved should a transfusion be required during the procedure. This is an extremely infrequent occurrence. *Please inform us if a blood transfusion is contrary to your religious beliefs*

3. Diet

Any food that you normally eat can be blenderized or thinned in order to be eaten during the early stages of healing. The juices of fresh fruits and vegetables are good sources of fresh vitamins, minerals and fluids, and can be a major source of these nutrients once you are home.

Commercial dietary supplements (such as Carnation Instant Breakfast, EnRich, Boost, EnSure, Sustical, etc.) may also be of assistance to those individuals who find normal blenderized food difficult to consume. It is recommended, however, that a concerted effort be made to become accustomed to normal diets rather than to have to rely on commercial dietary supplements. It is important for you to consume a sufficient amount of calories and protein while you are convalescing to assist with healing. Post-operatively, you will eat more frequently (six times per day) while consuming lesser amounts.

It is not likely that your jaws will be wired shut because rigid internal fixation will have been applied. However, the teeth will be held closed with elastics for about 2 weeks. During this time you will be restricted to just liquids. Once the elastics are removed, you will be able to open your mouth; however, it is extremely important that you **DO NOT CHEW**. The healing bone will not be strong enough to support chewing forces. For weeks 2 - 6 you can advance to a puree diet. After week 6 you can then advance to mashed/soft food and gradually return to a normal diet by around week 10.

Post-op Diet Protocol

Weeks 1-3: Liquid diet (clear liquids for first few days then advance to full liquids)

Weeks 4-6: Puree diet (blenderized food thinned with juice or soup broth)

Weeks 7-10: Mashed food, soft sandwiches, well cooked pasta

Week 10: Return to normal diet

4. Anaesthesia

An anaesthesiologist will discuss with you the form of anaesthesia that will be used as well as the side effects. Please direct any questions regarding the anaesthesia to this member of the anaesthetic team. After midnight of the day prior to the procedure, you will be required to not have anything to eat or drink. This will assure an empty stomach at the time of surgery.

5. Day of Surgery

You will be admitted to the hospital on the morning of the surgery. An IV will be started for you to receive fluids. Preoperatively you may receive medication to relieve anxiety. You will also receive antibiotics and a dose of steroids to reduce post-operative swelling.

Following the surgery, most commonly patients will have all the anesthesia related tubes removed. (Endotracheal tube, nasogastric tube, bladder catheter, arterial line...etc) In some instances the anaesthesiologist may opt to have the patient fully awake before these tubes are removed. In rare instances a patient may remain intubated and sedated in the ICU for 24 hours to monitor postoperative swelling before the tubes are removed.