

**Patient
Information**

Advice for patients having a tooth removed

Introduction

This leaflet gives you information about having a tooth removed and answers many of the commonly asked questions.

Why does my tooth need to be removed?

There are many reasons why a tooth needs removing, the main ones are:

- The tooth is so decayed that it is impossible to fill and needs to be extracted (removed) before it causes pain.
- There is just the root of the tooth buried in the gum and this needs to be removed before the dentist can fill the gap.
- The tooth has been treated as far as is possible (for example with a root canal filling).
- If the tooth has been giving you repeated problems.
- Orthodontic reasons.

How will my tooth be removed?

Teeth are usually removed with a local anaesthetic (injection into the gum) to numb the area. Sometimes a tooth can be extracted very simply but, on some occasions, a small cut in the gum is needed to get the tooth out. If this is necessary then a drill may also be used to free the tooth. This is very similar to the drill your dentist uses when you have a filling and will not cause any pain or discomfort during the procedure.

If your teeth are judged to be particularly difficult to remove then you may be offered sedation or possibly a general anaesthetic. This will have been discussed with you during your consultation and the appropriate advice given.

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Department

**Oral and
Maxillofacial**

Review due

March 2028

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How long will the procedure take?

We book local anaesthetic appointments for 45 minutes but this includes time to set up, for you to read and sign the consent form and to clean up afterwards, so the actual procedure is much shorter.

What should I expect after the procedure?

Discomfort

This is to be expected but is easily dealt with by taking simple pain relief such as ibuprofen and/or paracetamol taken regularly.

Always read the label for directions, especially if you take other medicines or if you have been given prescription pain relief.

Swelling and bruising

Again, this is to be expected at the operation site but is usually mild. The swelling will probably be at its most noticeable 1 to 2 days after the operation and may last for up to 2 weeks.

Jaw stiffness

There may be some restriction in opening your mouth wide. This will settle in a few days.

Stitches

These are dissolvable but may take a few weeks to disappear.

Numbness

Some lower teeth may be close to the nerves that supply sensation (but not movement) to the lower lip and tongue.

These nerves can be stretched or bruised when a tooth is removed, causing complete numbness or a tingling sensation. Usually this is temporary and will have settled by the time your mouth has healed. However, very occasionally the numbness may be permanent. You will be advised about your particular risk of this during your appointment.

**Patient
Information****Dry socket**

This complication usually happens a few days after the tooth has been removed but is not common. Dry socket is not technically an infection but is due to the loss of the blood clot from the socket. Severe pain is common.

Please contact us, or your regular dentist, as straight-forward treatment is readily available. Dry socket is a little more common in smokers, so please do not smoke for at least a week before and after treatment.

Infection

Sometimes an infection may develop in the socket, causing pain and swelling. If this happens, please phone us or your regular dentist for advice.

Bleeding

There may be a little oozing of blood for a day or so following the extraction. You will be given gauze and told to apply pressure if this happens.

Will I be given instruction after the procedure?

Full details for aftercare will be given following the procedure.

Going home

If you have had a local anaesthetic, you will be able to return home straight after your appointment.

If you have had a general anaesthetic or sedation, it is essential that someone takes you home and that there is a responsible adult to stay with you (and any children under 18 you may have) for 24 hours. For this period of time, you should not:

- Drive a car, motorbike or ride a bicycle.
- Drink alcohol.
- Operate machinery or do anything requiring skill or judgement, including cooking.
- Make important decisions or sign any documents.

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When can I return to work?

Depending on your occupation/job you may be able to return to work the same day if you have had a local anaesthetic. You may wish, however, to take the rest of the day off. You should allow 2 to 3 days off work if you have had sedation or a general anaesthetic.

Contact information

If you have any questions or concerns, please contact the Oral & Maxillofacial Surgery department.

Outpatient department

New and follow-up clinic booking enquiries

Tel: 0300 422 6940

Monday to Friday, 9:00am to 4:30pm

Minor surgery (local anaesthetic with/without sedation) booking enquiries

Tel: 0300 422 3197

Monday to Friday, 9:00am to 4:30pm

Inpatient and Day Surgery Unit booking enquiries

Tel: 0300 422 8192

Monday to Friday, 9:00am to 4:30pm

Post-operative concerns

If you have any concerns after your treatment, contact the Gloucestershire Hospitals switchboard on Tel: 0300 422 2222 and ask for the 'operator' when prompted. When the operator responds, please ask to be put through to the 'on-call doctor for Oral & Maxillofacial Surgery'.

Website

For further information, please visit the Oral & Maxillofacial Surgery webpage: www.gloshospitals.nhs.uk/glosmaxfax

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>