

PATIENT INFORMATION · SURGICAL DENTISTRY

Tooth extractions

Removing a tooth that is badly damaged, infected or causing problems, including wisdom teeth.

What is it?

An extraction removes a tooth from its socket in the jawbone. It is usually a last resort, when a tooth is too damaged or decayed to repair, is infected, or is causing other problems. Teeth may also be removed as part of orthodontic treatment, or because a wisdom tooth is impacted (stuck).

- **Simple extraction:** for a tooth that is visible and can be removed whole
- **Surgical extraction:** for a broken or impacted tooth; may involve a small incision and stitches

Who it may help

- ✓ A tooth too damaged or decayed to repair
- ✓ Impacted or problem wisdom teeth
- ✓ Teeth removed as part of another treatment plan

Suitability depends on your individual situation and is confirmed after an examination.

How it works



1 A badly damaged tooth is assessed with X-rays or a 3D scan.



2 The area is numbed, and the tooth is gently loosened.



3 The tooth is removed, and gauze helps a blood clot form in the socket.



4 The gum heals over the following weeks, and the bone fills in over the following months.

Simplified illustration, not to scale. Your own treatment may differ.

What to expect

- 1 Assessment.** Your dentist reviews your medical history and may take X-rays or a 3D scan.
- 2 Numbing.** The area is numbed with local anaesthetic.
- 3 Removal.** The tooth is loosened and removed. Sometimes it is removed in smaller pieces.
- 4 Closure.** Gauze helps a blood clot form; after a surgical extraction, stitches may be placed. We talk through options to replace the gap.

Risks to discuss with your dentist

- **Healing:** the socket takes time to heal; dry socket is a possible complication
- **Surgical risks:** bleeding, swelling, infection and, rarely, nerve or sinus problems
- **The gap:** a gap may affect your bite; implants, bridges and dentures can be discussed

Any surgical or invasive procedure carries risks. Before proceeding, you should seek a second opinion from an appropriately qualified health practitioner.

Aftercare

- ✓ **First 24 hours:** protect the clot: bite on gauze as advised; don't rinse, spit hard or use straws; use ice packs for swelling
- ✓ **Days 2 to 7:** gentle salt-water rinses after meals; soft foods, chewing on the other side; no smoking
- ✓ **Pain relief:** use pain relief as your dentist advises
- ✓ **Call us if:** pain is severe or increasing after 2 to 3 days (possible dry socket), or bleeding won't stop

General guidance only. Always follow the specific instructions your dentist gives you.

Costs & health funds

Fees depend on your treatment and are confirmed after an examination, with a written estimate before planned treatment starts. Your health fund rebate depends on your fund, level of extras cover, annual limits and waiting periods. We can claim on the spot with Tyro, so on the day you pay any gap. All health funds are welcome.

Call (08) 9330 7115 if you have heavy bleeding, pain or swelling that gets worse, fever, or anything that worries you. For trouble breathing or swallowing, call 000.

Questions to ask your dentist

- ? Can this tooth be saved instead?
- ? Will it be a simple or a surgical extraction?
- ? What are the risks for me, including dry socket?
- ? Should the gap be replaced, and what are the options?
- ? For wisdom teeth: should we monitor or remove?
- ? What will it cost, and what might my fund cover?

Before your appointment

- ✓ Have a light meal beforehand unless your dentist has told you otherwise, and plan soft foods for afterwards
- ✓ Tell us about any changes to your health or medicines, especially blood thinners
- ✓ Bring your consent form, if we gave you one to read, and your written plan or estimate

General guidance only. Always follow your dentist's specific instructions.

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