

Bimaxillary surgery: before and after your operation



Information for patients

This leaflet explains what happens before and after surgery to reset both jaw bones (bimaxillary osteotomy). If you have any questions or concerns, please do not hesitate to speak to the doctors and nurses caring for you.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

If we don't ask these questions, then please ask us to check.

Ensuring your safety is our primary concern.

Contents

Section	Title	Page no.
1.	Welcome	2
2.	How to prepare for your surgery	2
3.	What to expect during your stay	5
4.	Possible problems after surgery	10
5.	Being discharged home	11
6.	Advice for carers	13
7.	Who can I contact with queries and concerns?	14
8.	Getting to King's College Hospital, Denmark Hill	14

1. Welcome

Please take some time to read this leaflet. It aims to make your stay as comfortable and safe as possible and to prepare you for your visit.

It has important information about:

- how to prepare for your surgery
- what to expect during your stay, including what happens before and after your surgery
- your discharge home
- the help you will need from your carers.

2. How to prepare for your surgery

Pre-assessment clinic

Before your operation we will ask you to come to a pre-assessment clinic so we can make sure you are suitable for surgery. You will also have some tests. These include MRSA screening and blood tests. We will also check your blood pressure, height and weight.



When to come in

The admissions officer or nurse will ask you to come to an admissions lounge on a named ward, usually at 6.30am on the morning of your operation. Please make sure you arrive promptly on the ward, at the time given to you by the admissions officer. They will confirm this with you by phone the afternoon before your operation.

If you do not arrive at the ward on time, we may cancel your operation.

What to do the day before your surgery and on the day

Do not eat anything after midnight the night before your operation. This includes chewing gum and sweets. You may then drink small amounts of water only until 5.30am.

Do not smoke on the day of your operation.

Please keep taking all your usual medications unless the nurse at your pre-assessment advises you otherwise.

These instructions aim to ensure your safety. If you do not follow them, we may have to cancel your operation.

Things to arrange

Please remember to arrange:

- a responsible adult who can take you home by taxi or car
- family or friends to support you when you go home
- a contact phone number for your relative or friend
- care for any dependents such as children, elderly or sick relatives and pets.



Things to bring with you

Please bring with you:

- any tablets, medicines or inhalers that you are taking/using
- something to help you pass the time
- glasses or contact lenses and case
- some clothes to wear during the day
- nightwear, including a dressing gown and slippers
- a towel and toiletries.

You will have a locker next to your bed for your personal things. This is small so only bring in essential items.

Valuables

Please do not bring in any valuables, jewellery, large sums of money, credit cards or mobile phones. If you cannot avoid bringing in valuables, please ask your relative or friend to look after them for you or a nurse to lock them in the ward safe.

Mobile phones

You can use your mobile phone on the ward. But please consider other patients and use it as little as possible.

Hilotherapy

Clinical trials have shown that skin cooling helps to reduce swelling, bruising and pain after surgery. The Hilotherapy® system allows cooled fluid to be delivered directly to the skin of your face via a mask that is specially designed to allow maximum coverage of soft tissues, whilst retaining the ability to talk, drink, eat and take medicines.

You will have a cooling face mask that is fitted immediately post-operatively. Tubing connects the mask to a pump that delivers temperature controlled water around the mask. This is usually set between 14 – 16°C.



You can take the Hilotherapy cooling face mask home with you and you may even want to hire the system to use at home. Your specialist nurse, surgeon and ward nurses can discuss this with you further but please see www.hilotherapyuk.com for current hiring costs and processes.

3. What to expect during your stay

Waiting time

We will tell you the expected order of the operating list when you arrive in the morning. You may have to wait some time before your operation. We will try to keep you up to date with any changes.

Privacy

You will be nursed on the ward in a room with patients of the same sex. There are curtains between the bed spaces so you will have some privacy.

Visitors

We welcome visitors as they will help to make your stay as comfortable as possible. You can have visitors from 2 – 8pm. Visiting is not allowed overnight. If you want to discuss visiting times, please ask to speak to the nurse in charge of the ward.

Other patients may want to rest or sleep, so please ask your visitors to consider them when they come in to see you. We ask you to have no more than two visitors at a time. Please check with the nurses before bringing children onto the ward.

Visitors can buy refreshments from the restaurant and café in the main hospital.



When you arrive

When you arrive on your ward, a nurse will greet you and show you to the admissions lounge. They will check and confirm your personal details taken at your pre-assessment. They will also take your pulse, blood pressure and temperature and measure your respiration rate. If you have any questions about your stay, please do not hesitate to ask.

They will fill in a checking/safety questionnaire and give you a hospital identity bracelet with your name and details on it.

If you are allergic to anything such as certain foods, types of medication or latex (rubber), please tell the nurse, who will give you a red bracelet which will alert staff to your allergy. Please wear this bracelet while you are in hospital. It is an important part of our safety procedure and helps us to make sure you are given the correct medication.

Getting ready for your operation

The nurse will ask you to put some special Thrombo-Embolic Deterrent (TED) stockings on your legs before surgery. After surgery, we will put Sequential Compression Device (SCD) sleeves over the stockings. You will wear them throughout your hospital stay. You only need the sleeves until you are fully mobile after your surgery.

Wearing the stockings and sleeves has been clinically proven to reduce the risk of deep vein thrombosis (DVT), the blood clots that can form in the veins of your leg after surgery or long periods of bed rest in hospital. If a clot breaks loose, it can travel through your veins to your heart and lungs, block a major blood vessel and cause a pulmonary embolism (PE). The risk of this happening is small, especially if you get up and move about as soon as possible after your operation.



The stockings work by gently squeezing your legs, making your blood flow faster and stopping your veins from expanding. This stops blood pooling in your legs and forming a clot. The sleeves work by taking the place of the normal muscle pump action that happens when you walk.

You will also be asked to put on a cotton hospital gown with undergarments when you go for your operation.

Please let the nursing staff know if you are required by your faith to keep your head covered.

You must take off all jewellery (except wedding ring), body piercings and contact lenses before you go in for your operation. You should wear your hearing aids if you need them.

Your surgeon and anaesthetist will come to see you before surgery. They will examine you and explain your operation and the anaesthesia you are going to have.

Please feel free to ask questions at any time and tell us if you have any concerns. You are important to us and we will always make time for you.

When it is time for you to have your operation, the ward will be informed and a nurse will check your details before escorting you to the holding bay at the operating theatre. Here, the nurses will double check your personal details, and the theatre staff will take you to the anaesthetic room for your general anaesthesia. You will then be wheeled into theatre for your operation.



After your operation

You will be taken to the recovery area to wake up. Your pulse and blood pressure will be taken regularly and there will be a nurse checking your recovery.

At first you will feel drowsy. You may also feel sick and your mouth may feel sore. There may be a tube in your nose, which was placed there to help you breathe while you were asleep. This tube, and the throat pack used during surgery, may leave your throat and nose feeling sore and your nose blocked up. You will be wearing the cooling face mask.

On the ward

Once you are awake, alert and comfortable, you will be taken back to the ward by one of the ward nurses. They will look after you and monitor you closely until the following day, so you will spend most of the time resting in bed.

Straight after the operation your face will be swollen and feel tight, your jaw will be stiff and you will find that you cannot open your mouth wide. Your throat may also be uncomfortable and swallowing may be difficult. Your nurse will suction away any excess saliva in your mouth using a device similar to that used by a dentist. When you feel able, they can show you how to do this yourself. This, along with anti-sickness medication, will help reduce how sick you feel.

We will encourage you to speak, but if you cannot we will give you message and picture boards so you can tell us how you feel.



Medication

We will give you medication to reduce your pain, sickness and swelling. The discomfort is usually worst for the first few days. The pain may last a few weeks.

We will give you antibiotics through a vein (intravenously) while you are in hospital, to make sure that your operation wound heals without becoming infected. We will give you painkillers and a course of antibiotics to take home with you. If you cannot take tablets, we will prescribe you liquid medication. As some painkillers can cause constipation, we advise you to drink plenty of fluids and eat a healthy, soft diet, once you are able to.

How long will the swelling and bruising last?

Swelling and bruising is generally worst on the second or third day after surgery. You can help to reduce the swelling by taking medicine, using a cold compress such as an ice pack wrapped in a cloth or towel, and sleeping propped upright for the first few days. You may have decided to hire Hilotherapy to use at home during this time.

Most of the swelling will have gone after a fortnight, but there is often some subtle swelling that can take several months to disappear. Only you and your family are likely to notice this. At about six months after surgery you may be able to see the swelling in the morning but it will go away later in the day.

Checking your progress

On the day after your operation, we will encourage you to get up and about and do more for yourself. Your surgeon will come and see you in the morning to check your progress.



The surgical team will also discuss with you when you need to be seen in the outpatient clinic to have the position of your jaw checked and to see an orthodontist. This may mean you need to make separate journeys to different departments at King's College Hospital (Denmark Hill or Queen Mary's Sidcup), or at Guy's and St Thomas' Hospital.

What can I eat and drink?

You will not be able to eat normally straight after your operation. For the first day or two you will only be able to drink liquids and eat pureed foods. But you should very quickly be able to start eating a soft diet and then gradually build up to normal food over the next six – eight weeks.

How long will I be in hospital?

This can vary and depends on how quickly you recover. Most patients are well enough to go home after 24 hours.

How long will I need to take off work?

This varies a lot from person to person and depends on what kind of job you do. Your doctor will be able to advise you about this.

4. Possible problems after surgery?

There are potential complications with any operation but they are not common with this surgery. However, it is important that you are aware of them so you can discuss them with your doctor.

- **Bleeding** – It is normal to have some oozing from the cuts inside your mouth on the night after the operation. Lots of bleeding is very unusual but if this happens you can usually stop it by putting



pressure on the area for at least 10 minutes with a rolled-up handkerchief or swab. If you bleed excessively, you may need to have a blood transfusion or to be taken back to theatre.

- **Numbness** – Your top and bottom lip may be numb and tingly after the operation, similar to the feeling after having a painkilling injection at the dentist. This may take several months to go away; in a minority of patients, it may not disappear completely. Take extra care with hot drinks while you have numbness.
- **Infection** – The small plates and screws that hold your jaw in its new position usually stay in permanently. Rarely, they can become infected and need to be taken out. If this happens, it is not normally a problem until several months after surgery. Please avoid smoking as this greatly reduces the blood supply to your mouth and makes you heal slower. If you smoke you are also at a much higher risk of infection and other problems after surgery.
- **Adjustment of bite** – In the weeks after surgery we often need to put elastic bands on your orthodontic braces to guide your bite into its new position. Rarely, you need a second operation to reposition the fixing plates and screws if your new bite is not quite right.

5. Being discharged home

We will give you a discharge summary when we discharge you. We will also send a copy of this letter to your GP (home doctor), explaining the treatment you had at King's and the medication we have prescribed you. If you or your relatives have any questions before you leave for home, please speak to one of our nurses.



Outpatient appointment

- If you were a King's patient before your surgery, we will organise a review appointment with the Orthodontic Department before you go home.
- If you were a patient at Guy's Hospital, your review appointment will have been made for you before your operation. Please go to this. If necessary, we may review you at King's as well. We will give you this appointment before you are discharged from King's after your surgery.

Medicines

We will give you a supply of mouthwash, antibiotics and painkillers to take home with you. This will last up to seven days. After this time, your GP will prescribe any more medication you need.

Oral hygiene

To speed up your recovery and prevent infection, please brush your teeth for at least two minutes after every meal, using a mirror if possible. You may find this slightly uncomfortable but you cannot do any harm. For the first two weeks you might find it easier to use a small toothbrush with a small head such as a child's.

Use the antibacterial mouthwash we gave you after every meal, as directed. Keep your lips moist with petroleum jelly or lip balm. Please note that mouthwash does not replace brushing your teeth. Please do not smoke.

Elastic bands

Try not to remove any elastic bands that you have had put on; you can eat and brush your teeth with them in place. They can be tight at first but will loosen over time as the elastic stretches. If you need to learn how to replace them, we will teach you before you leave hospital.



Stitches

Your stitches are dissolvable. They can take up to two weeks or more to disappear.

General Information

- Having a positive mental attitude will help you recover faster.
- Maintaining your general personal hygiene will make you feel better, such as having a shower.
- Gentle exercise, such as a walk in the fresh air, will help you to recover.
- You may feel tired, so only do as much as you feel able to do.
- The plates that are used to fix your jaw are made out of titanium, which do not set off metal detectors at airports. You can still have MRI scans.
- Avoid alcohol and smoking.

6. Advice for carers

Please arrange for a responsible adult to take you home from the ward and make sure you are safe and well over the next few days.

They should be able to help you with:

- household activities such as cooking and cleaning
- washing and bathing
- getting plenty of fluids to drink
- errands.

They should also be aware of possible complications such as bleeding.

You should be feeling much better 24 – 48 hours after your discharge from hospital and will need less support and help.



7. Who can I contact if I have queries or concerns?

For advice from a nurse after your operation, please ring Coptcoat Ward. Tel: **020 3299 5363**. This ward is open 24 hours a day, seven days a week.

For advice from the Clinical Nurse Specialist (CNS) for Oral and Maxillofacial Surgery, phone the main switchboard.

Tel: **020 3299 9000** and ask them to bleep 177. The CNS is available Monday to Friday, 8am – 4pm. Outside of these times, phone switchboard on **020 3299 9000** and ask to speak to the member of staff on call for Oral and Maxillofacial Surgery.

8. Getting to King's College Hospital

We have good public transport links so please consider travelling to King's by train or bus. The hospital is about a five-minute walk from Denmark Hill railway station (which has full lift access) and a number of buses stop directly outside the hospital.

For more information about getting to King's by public transport, visit the Transport for London (TfL) website: **www.tfl.gov.uk**

Taxis

There is a taxi rank outside the main entrance and free phones to book cabs at the main Hambleden Wing entrance or the entrance to the Golden Jubilee Wing.



Parking

There is limited parking in the main hospital car park on Caldecot Road and in the local area.

There are a small number of short-term parking spaces where you can drop off and collect patients outside the Golden Jubilee Wing and the Hambleton Wing.

There are 20 marked parking spaces across the site for drivers who are registered disabled and have a valid blue badge. There is no charge for parking in these spaces.

For more information about getting to and around King's, visit our website: www.kch.nhs.uk

Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.



PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: **020 3299 3601**

Email: **kch-tr.pals@nhs.net**

You can also contact us by using our online form at

www.kch.nhs.uk/contact/pals

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND

Tel: **01689 863252**

Email: **kch-tr.palskent@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.

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