

## HISTORY & PHYSICAL FINDINGS

- Severe throbbing pain usually starts between 3<sup>rd</sup> & 5<sup>th</sup> postoperative day , often radiates to ear.
- Complaint of Fetid Odor & Bad taste
- Poorly healed Extraction site with Exposed bone & Remnants of Disintegrated Blood clots with Necrotic tissue.
- History of Birth control pills use/Smoking

## ALVEOLAR OSTEITIS (DRY SOCKET)

## DIAGNOSTIC PROCEDURES

- Periapical radiographs (IOPAR)
- Panoramic Radiographs (OPG)

## MANAGEMENT

- Administer Local Anaesthesia if Pain is Severe
- Remove Sutures if present & Irrigate with warm Saline
- Gently remove old clot remnants & place Sedative dressing
- Prescribe Analgesics & reassess after 24 to 48 hours

1  
Patient improves , but still Symptomatic

- Remove old dressing & Irrigate
- Place new Sedative Dressing
- Continue **Analgesic** Prescription

- Treat until patient is Asymptomatic
- Instruct patient on continued wound healing.

2  
No longer painful

Instruct patient on continued wound healing

3  
Little or no improvement:

- Irrigate with warm Saline & place Sedative Dressing under LA.
- Prescribe **Chlorhexidine (0.2%)** rinses & Narcotic Analgesics.

- Treat until patient is Asymptomatic
- Instruct patient on continued wound healing.