

OET Case Notes

Dentistry · Intermediate · Discharge letter · to Patient

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Dentistry — Discharge Advice after Dental Implant Placement

THE CASE NOTES

Patient: Mrs Annette Powell, 51 years old; non-smoker; well-controlled type 2 diabetes (HbA1c 52)

Procedure: Single implant placed upper right premolar region (site of extracted 14); submerged healing protocol; sutures placed; healing abutment to be placed at 12 weeks

Immediate post-surgical (24 hours): Bite on gauze if any oozing; apply ice to cheek 20 minutes on/20 minutes off for 6 hours; rest with head elevated; avoid strenuous activity for 48 hours

Oral hygiene: Do not disturb the surgical site for 24 hours; from day 2 gentle salt water rinses; from day 3 very gentle toothbrushing avoiding the surgical site; use the chlorhexidine gel provided on the site twice daily for 1 week

Diet: Soft diet for 2 weeks (soup, yoghurt, mashed foods, scrambled eggs); no chewing on the surgical side; no hot drinks or spicy food for 48 hours; no drinking through a straw

Swelling and discomfort: Swelling peaks at 48–72 hours and is normal; ibuprofen 400 mg and/or paracetamol 1 g for pain; do not take ibuprofen if it causes stomach upset — paracetamol alone is fine

Healing timeline: Implant integrates with jawbone over 10–12 weeks (osseointegration); next appointment at 12 weeks for healing abutment; no crown until approximately week 16

Warning signs: Increasing pain after day 3 (not improving), persistent bleeding, fever, or implant feeling loose — contact the clinic immediately

Task: Write a discharge advice letter to Mrs Powell explaining post-surgical care, what to expect during healing, and what to do if she has concerns.

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WHAT TO INCLUDE

+ Soft diet for 2 weeks and no chewing on the surgical side

Premature loading of an unosseointegrated implant is the most common cause of early implant failure. The patient must understand the diet restriction protects the implant, not just the wound.

+ Chlorhexidine gel on the site twice daily for 1 week, starting day 2 gentle salt rinses

Peri-implant infection in the first week is preventable with the correct antiseptic protocol. The patient must know the sequence — do not disturb day 1, rinses from day 2, gel from day 2.

+ The osseointegration timeline — 10–12 weeks to the next appointment, no crown until approximately week 16

Patients frequently expect crowns immediately. Disappointment at the 12-week appointment — another stage of treatment, not the crown — is reduced by setting the correct expectations at discharge.

WHAT TO LEAVE OUT

– The diabetes management around the procedure

Well-controlled HbA1c 52 — the diabetes was managed pre-operatively and does not change the post-op instructions. One brief mention — 'your well-controlled diabetes does not affect the healing instructions below' — is enough.

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– **The implant system used, fixture dimensions, and insertion torque**

Clinical record data, not patient information. The patient needs to know what to do, not the implant specification.

CRITERION IN FOCUS · CONCISENESS & CLARITY

Post-implant discharge letters must be actionable for a patient who has just had surgery and may be managing pain. Long paragraphs of instructions are not read carefully in this state. The proficient approach is to organise by time horizon: what to do today, what to do this week, what to expect over the next 12 weeks. Each instruction is one action, one sentence.

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