

**Patient
Information**

Fracture of the upper jaw

Introduction

This leaflet gives you information about a fracture of the upper jaw and answers many of the commonly asked questions. If you have any further questions, please ask a member of the medical or nursing staff or contact us on the phone number at the end of this leaflet.

The problem

Your upper jaw has been broken. The number of fractures, where they have happened and whether they need surgery (an operation) to help them heal has already been decided by the doctor who examined you. If surgery is considered necessary, it is beneficial as the fractured bones are held in the correct place while healing. This makes sure that your teeth meet together correctly and pain is minimised.

If surgery is not carried out when recommended it is likely that you will suffer significant pain and infection and the bones may not heal in the correct position. As a result, your teeth may not meet together correctly, causing pain, infection and problems when eating.

What does the operation involve?

The operation involves a general anaesthetic which means you will be asleep during the procedure.

Once you are asleep the fracture sites will be opened up. A cut will be made on the inside of your mouth through the gum above your upper teeth.

The broken bones are then put back together and held in place with small metal plates and screws. The gum is stitched back into place with dissolvable stitches that can take 2 weeks or longer to disappear.

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Department

**Oral and
Maxillofacial**

Review due

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During the same operation, it is often necessary to place wires or metal braces around your teeth so that elastic bands can be attached to them to guide your bite into the correct position. Screws inserted into the jawbone above the teeth are sometimes used instead of these wires or metal braces. Any elastic bands are not usually attached until the day after your operation so that your jaws will be able to move freely when you wake up from surgery.

Will anything else be done while I am asleep?

Occasionally, it is necessary to remove damaged or decayed teeth in and around the site of the fracture. In very difficult fractures it is sometimes necessary to make a cut on the outside of the mouth through the skin. If this is going to take place, the site and size of the cut will be discussed with you before you sign the consent form for your operation.

What can I expect after the operation?

You are likely to feel sore so regular pain relief will be arranged for you. The discomfort is usually worse for the first few days, although the soreness may take a couple of weeks to completely disappear.

It is also necessary to make sure that the fractures heal without any infection so you will also be given antibiotics through a vein in your arm while you are in hospital. You will be sent home with pain relief. You may also require antibiotics or an anti-bacterial mouthwash.

You are likely to need to stay in hospital for at least 1 night following the surgery. The following day, the position of your fractures may be checked with X-rays before you are allowed home.

Although the plates and screws hold the fractures in place it will still take about 6 weeks for your upper jaw to heal completely. During this time, you will need to eat a fairly soft diet. This will be discussed with you by the doctors, nurses and dieticians.

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It is important to keep your mouth clean and that you brush your teeth carefully and thoroughly for the first few weeks after surgery to prevent infection. It may be difficult to clean your teeth around the stitches because it will be sore.

It is best to keep the area free from food debris by gently rinsing your mouth with the mouthwash prescribed or warm salt water (dissolve a flat teaspoon of kitchen salt in a cup of warm water) starting on the day after your surgery.

If any wires, metal braces or screws are used to help guide your bite into the correct position, they will be removed in the outpatient department when your doctors are happy that your fracture has healed.

Do I need to take any time off work?

Your doctor will discuss this with you before discharge. Depending on the nature of your work, it may be necessary to take 2 or more weeks off work and to avoid strenuous exercise during this time. It is important to remember that you should not drive or operate machinery for 48 hours after your general anaesthetic.

What are the possible problems?

- Infection is uncommon because antibiotics are used initially to reduce the chances of infection.
- Bleeding from the cuts inside your mouth is unlikely to be a problem. If you do experience bleeding when you get home this can usually be stopped by applying pressure over the site for at least 10 minutes with a rolled-up handkerchief, clean tea towel or gauze swab.
- Numbness - your top lip and teeth will be numb or tingly after the operation, similar to the sensation after having an injection at the dentist. The numbness may take several weeks to disappear and, in some cases, it may be permanent.
- Occasionally teeth next to the fracture site may be damaged by the screws that are used.

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- If it has been necessary to put any plates or screws in your jaw to hold it in position, these are not normally removed unless they become infected as they tend not to cause problems. The metal that is used is titanium which does not set off metal detectors in airports etc.

Will I need further appointments?

A review appointment will be arranged before you leave the hospital. It is usual to keep a close eye on you for several weeks following treatment to make sure that your jaw heals correctly. Further follow-up appointments may be necessary to review your progress.

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

Please 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 'first 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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Feedback

We would welcome your feedback regarding your treatment. Please visit the comments section on NHS choices (www.nhs.uk).

Feedback can also be left on the Gloucestershire Hospitals twitter account: @gloshospitals

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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 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): 379-83.



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