

MAXILLECTOMY & MANDIBULECTOMY DISCHARGE INSTRUCTIONS

Your pet underwent maxillectomy (removal of part of the upper jaw) or mandibulectomy (removal of part of the lower jaw) to remove a tumor, damaged bone, severe infection, or trauma while preserving as much normal function as possible. The remaining jaw was reconstructed so your pet can still eat and drink; however, the bite, facial symmetry, and oral anatomy are permanently changed. Animals adapt remarkably well to these procedures and typically maintain an excellent quality of life. The purpose of these instructions is to help you understand expected healing changes, long-term differences, and signs that require veterinary attention.

1. What the Surgery Changed

After a maxillectomy your pet may have a shortened or asymmetric nose, one nostril larger than the other, a sunken facial appearance on the surgical side, or drooping of the lip due to loss of support. Air and saliva may escape from the mouth while breathing and sneezing during eating is common. Nasal congestion or discharge may occur initially and, if bone near the eye was removed, the eye may appear sunken or tear overflow may occur.

After a mandibulectomy the tongue commonly protrudes permanently and drooling is expected long-term. The jaw may deviate toward the surgical side and teeth will no longer align normally. The lower lip may sag and the bite mechanics will be altered, causing messy drinking and difficulty grabbing food at first. These cosmetic and functional changes are permanent but expected and do not mean the pet is suffering.

2. What the Surgical Site Will Look Like

During healing the gums and oral mucosa will appear red to pink with mild swelling and occasional bruising. There are sutures along the gumline or palate and missing teeth in the surgical area. A visible depression in soft tissues where bone was removed is normal and gradually and partially fills with granulation tissue over two to three weeks. Mild blood-tinged saliva for up to seventy-two hours is normal. Maxillectomy patients may also have temporary nasal discharge that can initially be bloody. White or yellow film along sutures often represents normal fibrin healing tissue rather than infection. Swelling typically improves after the first week.

3. How To Check the Surgical Site

Beginning a few days after surgery, inspect the site daily by gently lifting the lip without forcing the mouth open. Use a flashlight if needed and primarily look rather than touch. You should monitor tissue color, swelling reduction, odor, bleeding, and whether the incision edges remain closed. It is normal to see puckered sutures, food debris within the site, or a soft tissue

depression where bone was removed. Do not attempt to clean or remove debris manually. Concerning findings include foul odor beyond a mild surgical smell, dark tissue, persistent bleeding, or opening of the incision.

4. What Is Normal After This Surgery

Pets often eat slower, drop food, chew on one side, paw at the face, and drool more while adapting to the new jaw mechanics. Maxillectomy patients commonly sneeze blood-tinged discharge or small blood clots initially and mandibulectomy patients frequently sleep with the tongue outside the mouth. Drinking may be messy and some animals initially scoop food from the side of the mouth. Adaptation generally occurs within two to four weeks as they relearn how to grasp and swallow food.

5. Expected Long-Term Changes

Long-term changes after maxillectomy include facial asymmetry, occasional nasal discharge, and changes in vocal sound. Some pets may have small amounts of food or water exit the nose while eating. After mandibulectomy, lifelong tongue protrusion, drooling, jaw deviation, messy drinking, and difficulty picking up objects may persist. Despite appearance differences, pets do not experience psychological distress and judge quality of life based on their comfort, not appearance.

6. Possible Complications

The most common complication is incision breakdown (dehiscence) because the mouth contains bacteria and moves constantly. Signs include a new hole forming, visible bone, worsening odor, dark or gray tissue, or food entering the nose. Infection may cause fever, lethargy, increasing swelling after several days, pain, or yellow-green discharge. Bone infection (osteomyelitis) can produce persistent pain, foul odor, and a non-healing wound.

Maxillectomy-specific complications include development of an oronasal fistula allowing food or water into the nasal passages, chronic nasal discharge, sneezing during eating, breathing obstruction from nasal collapse, and rarely eye displacement. Persistent nasal leakage may require long-term feeding adjustments such as feeding from an elevated food bowl.

Mandibulectomy-specific complications include mandibular drift where the remaining jaw shifts and teeth traumatize soft tissue, difficulty swallowing, aspiration of food or water leading to pneumonia, jaw instability especially after bilateral removal, and nerve damage causing tongue paralysis or lip numbness. Some pets may chew their lip without feeling it.

Bleeding beyond the first forty-eight hours, pooling blood in the mouth, or pale gums is abnormal and requires immediate attention. Tumor recurrence is also possible, so the surgical site and nearby lymph nodes should be monitored for new masses.

7. Warning Signs — Contact Your Vet Immediately

Contact your veterinarian if the incision opens, food exits the wound or nose persistently, foul odor develops, tissue becomes dark, swelling suddenly increases, bleeding continues, your pet refuses food for more than twenty-four hours, breathing difficulty occurs, the jaw cannot close properly, pain suddenly worsens, pus appears, fever develops, or neurological changes such as tongue paralysis are noticed. Most surgical failures occur within the first ten days, and early intervention prevents major complications.

8. Special Notes About Appearance

Although the face and mouth may look dramatically different, pets do not feel embarrassed or distressed. Neurologic adaptation occurs quickly and they return to normal behavior once comfortable. The cosmetic appearance becomes less noticeable as swelling resolves and fur regrows. These procedures rarely reduce quality of life.

9. Long-Term Outlook

Most dogs and cats resume normal activity, maintain body weight, and live comfortably after recovery. Even large jaw resections usually allow normal eating and playful behavior once healing is complete.

10. Recheck Importance

Follow-up examinations are essential because oral incisions can fail without obvious signs and tumor recurrence must be monitored. A recheck is typically scheduled around seven to fourteen days after surgery, with additional imaging or oncology consultation recommended if the removed mass was cancerous. Do not skip rechecks even if everything appears normal, as early detection of problems often prevents additional surgery.

If you are ever unsure about healing, sending a photo or contacting your veterinary surgical team promptly is encouraged.