

**MBSAQIP**

METABOLIC AND BARIATRIC SURGERY  
ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM  
ACCREDITED CENTER



Surgical treatment for weight loss.  
GEOFFREY H. WILCOX, MD, FACS



***PRE-SURGICAL  
INFORMATION  
CLASS***

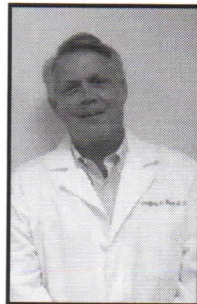
**Sleeve Gastrectomy**

**Nov 2012  
696 lbs.**

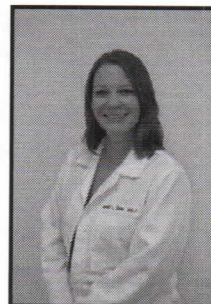
**March 2015  
324 lbs.**

[www.hopebariatrics.com](http://www.hopebariatrics.com)

412-741-8862



*Dr. Wilcox*



*Jamie Dunn, PA-C*


***WELCOME***

Thanks for being here!

You will receive all the information needed to begin the  
process for your weight loss journey.

# *BARIATRIC*

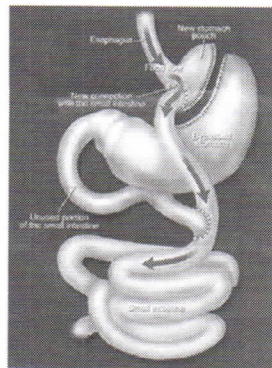
## *Checklist*

	<p>Patient: _____  <small style="display: inline-block; width: 100px; border-bottom: 1px solid black; margin: 0 5px;"></small> Last <small style="display: inline-block; width: 100px; border-bottom: 1px solid black; margin: 0 5px;"></small> First</p> <p>Insurance: _____  <small style="display: inline-block; width: 100px; border-bottom: 1px solid black; margin: 0 5px;"></small> Pre-Surgery Class</p> <p>Surgeon: _____ 1<sup>st</sup> visit _____</p> <p>Phone #: _____</p> <p style="text-align: center;">Gastric Bypass _____ Sleeve _____ Not Sure _____</p> <p style="text-align: center;"><b>Bariatric Pre-Operative Checklist</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 60%;"><i>Tests Required</i></th> <th style="text-align: left;"><i>Date Completed</i></th> </tr> </thead> <tbody> <tr> <td>Upper GI</td> <td>_____</td> </tr> <tr> <td>Nutrition Consultation</td> <td>_____</td> </tr> <tr> <td>Nutrition Quiz</td> <td>Pass _____ Fail _____</td> </tr> <tr> <td>Psychological Evaluation</td> <td>_____</td> </tr> <tr> <td>3 Month Diet Date Started: _____</td> <td>_____</td> </tr> <tr> <td>6 Month Diet Date Started: _____</td> <td>_____</td> </tr> <tr> <td>Letter of Med Necessity:</td> <td>_____</td> </tr> <tr> <td>Sleep Evaluation Study</td> <td>_____</td> </tr> <tr> <td>Pulmonary Clearance</td> <td>_____</td> </tr> <tr> <td>Pulmonary Function</td> <td>_____</td> </tr> <tr> <td>Cardiac Evaluation</td> <td>_____</td> </tr> <tr> <td>Cardiac Clearance</td> <td>_____</td> </tr> <tr> <td>TSH</td> <td>_____</td> </tr> <tr> <td>NO NICOTINE (in all forms) 1 month before surgery</td> <td>_____</td> </tr> </tbody> </table>	<i>Tests Required</i>	<i>Date Completed</i>	Upper GI	_____	Nutrition Consultation	_____	Nutrition Quiz	Pass _____ Fail _____	Psychological Evaluation	_____	3 Month Diet Date Started: _____	_____	6 Month Diet Date Started: _____	_____	Letter of Med Necessity:	_____	Sleep Evaluation Study	_____	Pulmonary Clearance	_____	Pulmonary Function	_____	Cardiac Evaluation	_____	Cardiac Clearance	_____	TSH	_____	NO NICOTINE (in all forms) 1 month before surgery	_____
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***POSSIBLE  
RISKS AND  
COMPLICATIONS  
OF  
WEIGHT LOSS SURGERY***

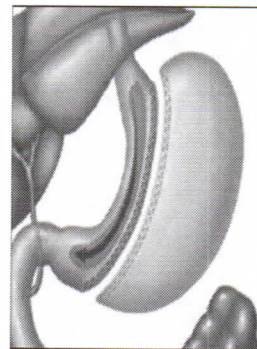
***Surgical Options***

**Gastric Bypass**



**Restrictive and  
Malabsorptive**

**Sleeve Gastrectomy**



**Restrictive and  
Altered  
Absorption**

**Normal path of digestion:**

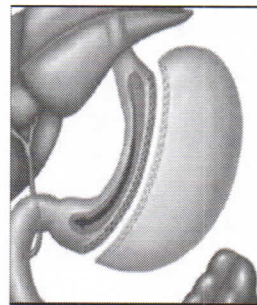
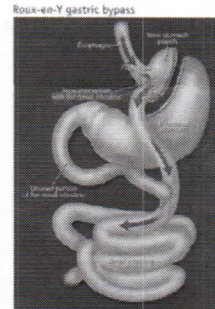
- mouth, esophagus
- football size stomach
- small intestine
- large intestine and out.

**After both surgeries,**

- egg or golf ball, about a 1/4 cup. Limiting amount of food, reducing calories and nutrients.

- **GB** bypasses the majority of stomach and upper part of small intestine, creating malabsorption.

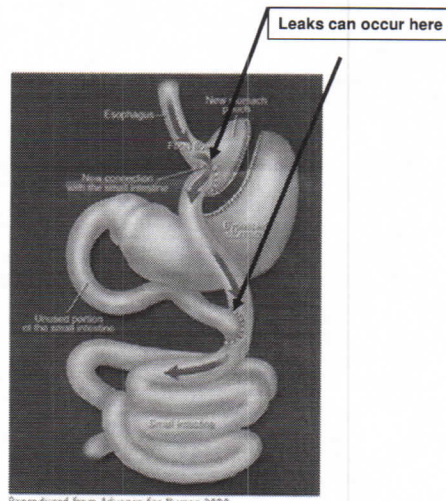
- **Sleeve** is high pressure design causes food to go through these areas rapidly...altered absorption.



## ***Gastric Bypass: The Risks***

**Early Complications**

- Anastamotic leak
- Deep Vein Thrombosis
- Infection /bleeding
- Nausea/vomiting
- Nutritional deficits

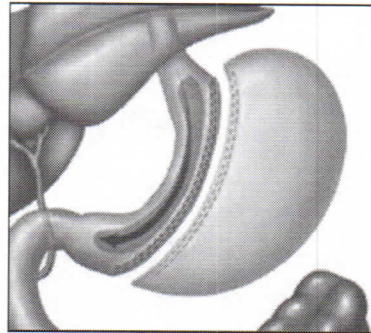




## *Sleeve Gastrectomy*

### *Risks and possible complications*

- Leak at staple line
- GERD
- DVT
- Infection/bleeding
- Nutritional Deficiencies



## ACTIVITY AFTER SURGERY

It is normal for your appetite, bowel movements, energy level and sleep patterns to change after this surgery. These things should slowly return to normal as you gradually increase activity, resting as needed. Resume normal daily activity as tolerated; if you had laparoscopic surgery you have no restrictions. If you feel able, you may walk and climb stairs.

**Do not begin to drive until you are no longer taking prescription pain medication.**

**Do not lift anything over 5 -10 pounds for at least one week and avoid strenuous activities (like pushing and pulling) that may strain incision areas.**

**Do not use hot tubs or public swimming pools until incisions are completely healed.**

**Do get up to walk every hour and use your incentive spirometer.**

**Do take a shower and wash your hair.**

**Do deep breathing exercises to help prevent blood clots and pneumonia.**

#### Follow UP Appointments

- 1-2 weeks after surgery
- 1 month, 3 months, 6 months, and annually.

**Return to work will be when you see the doctor for the first visit after surgery as long as your recovery has progressed as expected.**

## MEDICATIONS

Your medications may need to be crushed or changed to an elixir (a liquid form) after surgery. You will receive instructions regarding whether to resume taking all of the medications you took before surgery; if you have a question about whether it is safe to crush your pills, call your primary care physician (PCP) or your pharmacist.

Your PCP will monitor your medical problems as you lose weight to decide if you should stop or change any medications (like blood pressure or diabetes medications)

**Do resume C-PAP or BI-PAP if you used it prior to surgery until you have another sleep test.**

**Do not take any over-the-counter medications without talking to our doctors or nurses.**

**Do not take aspirin or ibuprofen (Advil or Motrin) or some arthritis medications.**

**Do not take any capsules or pills larger than the size of a good-n-plenty candy or pea.**

**Do not stop any medications unless instructed by your surgeon or PCP.**

## *INFORMED CONSENT*

- Please sign the Informed Consents located in the front pocket of your binder
- Be sure to leave them with me before you leave

### ***WHAT 'S NEXT?***

- Call ASAP to schedule your surgeon visit with Dr. Wilcox
- Call your PCP to begin your monthly visits
- Obtain heart or lung clearances for existing conditions
- Sleep Study if you suspect sleep apnea
- Schedule your appointments for the
  - Psychological evaluation
  - Upper GI

### ***DIETARY COMMITMENTS AND PHASES***

## **OVERVIEW COMMON NUTRITION GUIDELINES**

- How to eat properly after bariatric surgery...life long success
- Doctor Wilcox provides surgical tool to improve your health and quality of life

***BUT, ULTIMATELY IT'S UP TO YOU TO USE THE TOOL CORRECTLY!***

- Phone appointment with Denise (part 2) Completed Quiz
- Nutrition Guidelines are your BIBLE (so to speak) for LIFE to read and know well
- Can be found on [www.hopebariatrics.com](http://www.hopebariatrics.com) if you misplace them
- Stay off other websites; follow THESE guidelines for success

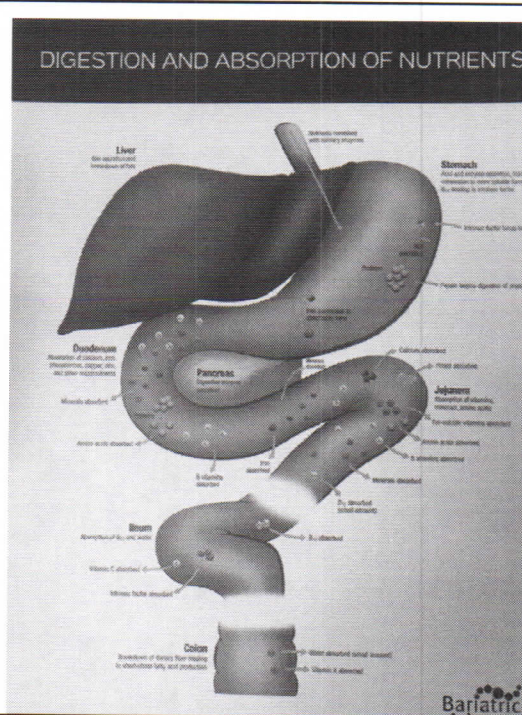
**Stomach** secretes many enzymes that assist in churning digestion and absorption of nutrients.

**Most absorption small intestine:**

- Protein, iron, folic acid, vitamin D and calcium...

**THEREFORE**

- must understand the **seriousness** of having bariatric surgery
- life long commitments and be willing to adhere to them to...
- **PREVENT** malnutrition and vitamin deficiencies.





***COMMITMENT # 1  
PROTEIN***

- Building block of our bodies, every inch needs it
- Lean protein
  - Moist poultry
  - Fish, seafood
  - Lean beef and pork
  - Some low fat dairy products: skim, super skim or 1% milk
  - Eggs and beans
  - Plain Greek yogurt or Triple Zero-Oikos

***COMMITMENT # 1  
PROTEIN***

**NOT GOOD SOURCES OF PROTEIN**

Peanut Butter (85% calories from fat)

2% milk (5 grams of fat)

Whole milk (7 grams of fat)

Almond or coconut milk sweetened and only 1 gram of protein

**SUGAR**

High sugar Yogurts (high as 30 grams of sugar)

Fancy Coffee house drinks

Enemy of the body must be limited!!!

(more on this on phone call)

***COMMITMENT # 1  
PROTEIN***

**HOW MUCH PROTEIN DO WE NEED?**

***WOMEN***

**60-70** grams per day

***MEN***

**80** grams per day

***COMMITMENT # 2  
VITAMIN AND MINERALS***

- Vitamins for life
- Cannot get what you need in the small amount of food
- GB doesn't absorb well
- Deficiencies will result if you don't take your vitamins

**Recommendations**

- Bariatric formulated designed to meet specific needs
- Chewable and dissolvable making them easier to digest and absorb
- \$65 a month initially and then \$50/month for LIFE!!!
- Bariatric Advantage

***THIS IS NOT OPTIONAL!!***

### ***COMMITMENT # 3 HYDRATION***

- Body works best when well hydrated
- Dehydration risk after surgery
- Tolerate only small sips especially in the beginning, medicine cup every 15 minutes is all you can get in
- 48-64 ounces a day is your goal of appropriate fluids: water, sugar free drinks, low fat

#### ***AVOID***

- Caffeine (dehydrates the body)
- Carbonation (bubbles cause pain)
- Straws (air causes gas)
- Empty calorie fluids: high sugar and fat (dumping syndrome), alcohol

### ***BIGGEST CHANGE***

- **No eating and drinking together**
- #1 reason for weight regain after surgery
- Both surgeries have a narrowing for a reason
  - Well chewed food goes slowly into new stomach and when it hits the narrowing it signals the brain it's full
  - Stop eating at this point
  - Food slowly goes through the narrowing keeping you full and satisfied
  - Fluids flush the food through too quickly causing hunger

#### ***ASMBS Guidelines***

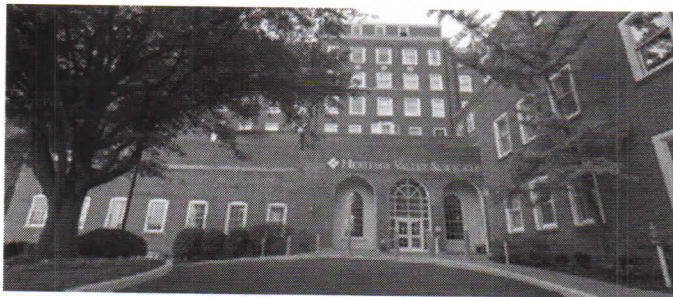
- No liquids **30 minutes prior** to meals to allow time for stomach emptying so you have the most space possible for food
- No drinking with the meal (unless you're choking)
- No drinking **1 hour after** your last bite of food.

**CARDINAL RULE FOR LIFE!!**

## ***THINGS TO REMEMBER***

- After surgery can only eat a tablespoon or two for a meal; you won't need fluids
- Eat 3-4 meals/day and no more 30 minutes at one time
- Eat slowly, chew very thoroughly
- Keep foods moist and tender
- Stop eating first sign of fullness
- Overeating and eating too quickly can cause dumping and vomiting
- Don't microwave meat...it cooks inside out, tough to digest
- Eat in the order food is most important: **PROTEIN, VEGETABLES, FRUITS, WHOLE GRAIN CARBOHYDRATES**

## ***HOSPITAL STAY AND AFTER***



*720 Blackburn Rd. Sewickley, PA 15143*



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
2	3	4	5 SURGERY	6 PO DAY 1	7 DISCHARGE PHASE 1	8 PHASE 1 PROTEIN SHAKES
9 PHASE 1	10 PHASE 1	11 PHASE 1	12 PHASE 1	13 PHASE 1	14 PHASE 2 NO VITAMINS	15 PHASE 2
16 PHASE 2	17 PHASE 2	18 PHASE 2	19 PHASE 2	20 PHASE 2 1 <sup>st</sup> PO VISIT, VITAMINS BEGIN	21 PHASE 2	22 PHASE 2
23 PHASE 2	24 PHASE 2	25 PHASE 2	26 PHASE 2	27 PHASE 2	28 PHASE 3	29 PHASE 3
30 PHASE 3	31 PHASE 3					

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1 PHASE 3	2 PHASE 3	3 PHASE 3	4 PHASE 3	5 PHASE 3
6 PHASE 3	7 PHASE 3	8 PHASE 3	9 PHASE 3	10 PHASE 3	11 PHASE 3	12 PHASE 3
13 PHASE 3	14 PHASE 3	15 PHASE 3	16 PHASE 3	17 PHASE 3	18 PHASE 4 BEGINS	19
20	21	22	23	24	25	26

## ***PHASE 1***

- 2 night stay, advanced to **Phase 1** when tolerating liquids
  - Low sugar, low fat, caffeine and carbonation free
  - Sugar free jello and popsicles
  - Low sodium broth
  - Flavored waters
  - Low acid low sugar 100% fruit juice (no sugar added) diluted with water equal parts (2 oz juice, 2 oz water) **PHASE 1 ONLY!**
    - Apple, cranberry, grape and cherry

**SIP ALL DAY TO STAY WELL HYDRATED**

- Day 4 after surgery **WHEY PROTEIN ISOLATE** (hospital doesn't carry protein)

## ***PHASE 1***

### **WHEY PROTEIN ISOLATE**

- Complete protein, digest and absorbs best
- Other protein supplements full of fillers
- Read labels carefully: Whey Protein Isolate first ingredient and low fat and sugar
- Avoid Body Fortress and Premier Protein
- Whey Protein Isolate can be mixed with 1%, skim or super skim milk

### **GOAL**

Drinking continuously with one serving of whey protein isolate and all the other clear liquids to get close to **64** ounces a day.

## ***PHASE 2***

***Lasts 2 weeks  
40 grams protein***

### **Begins One Week after Discharge**

- Pureed foods that you don't have to chew
- Avoid baby food meat
- Try one food item at a time
- Start tracking protein.....40 grams....go to page 24..Foods high in protein with amount per serving
  - May include a protein supplement
  - Vegetables, mild only non gassy
  - Fruit without added sugar (applesauce can be high in sugar)
  - Yogurt, smooth only, no fruit pieces
  - Can add SF flavorings to enhance taste: Torino or Davinci Gourmet

**VITAMINS BEGIN AFTER YOUR FIRST VISIT WITH THE DOCTOR**

***SCHEDULE for VITAMINS and MINERALS  
GASTRIC BYPASS AND SLEEVE***

***Recommendations of Nutritional Supplements Include***

- ***Multi Vitamin—2 times the RDI, Adult complete multi-vitamins a day in divided doses (chewable post-op) breakfast and dinner***
- ***Calcium – 1500 mg of calcium citrate in divided doses of 500 mg or less reduces the risk of kidney stones (use of calcium carbonate not recommended)***
- ***B12—500 mcg daily or 1000 mcg sublingually, nerve health, 3 times per week or 1000 mcg daily (crystalline high dose found in Bariatric Advantage Advance EA, Multi only) or monthly injection (high levels non toxic)***

***Recommendations of Nutritional  
Supplements Include (cont)***

- ***Iron– 45 mg elemental iron daily (avoid ferrous sulfate) taken 2 hours separately from calcium. Calcium decreases iron absorption 63% (anemia is #1 post op deficiency)***
- ***Vitamin D-3– 5000 IU daily (total) or 5000 IU twice a week (multiple vitamins and calcium supplements typically contain Vitamin D, READ LABELS! Decreases likelihood cancer, heart disease, diabetes, high blood pressure, early dementia, etc!)***

***PHASE 3***

***Lasts 3 weeks***

***50 grams protein women***

***60 grams protein men***

- Soft bland foods
- Nothing spicy, hard to digest
- Mild easily digestible foods
- Moist chicken and fish
- No seeds or nuts
- No raw, gassy vegetables
- No fresh fruit skins

***PHASE 4***

***FOREVER PHASE***

***60-70 grams protein women***

***80 grams protein men***

- Regular consistency foods
- Low fat
- Low sugar
- No carbonation
- No caffeine for 6 months, after two 8 ounce cups per day



### ***IN SUMMARY***

- Make healthy choices at meals focusing on adequate protein, veggies, fruits, occasional whole grain carbs
- Eat slowly and chew well
- Stop eating at first sign of fullness
- Don't eat and drink together
- Avoid dry, tough micro waved foods
- Take vitamins and minerals as recommended for life!
- Move around often, pace when you can, sitting is killing us and increase activity as able
- Exercise several times per week
- Sleep 7 hours night to control appetite hormones
- Attend a support group
- Call us! We're here to support you throughout your life! Not just to do the surgery.

***THANK YOU!***