

Discharge Instructions – **Bariatric Surgery**

1. If appointment is not yet given, call your surgeon's office and schedule appointment:
Our office number is **516-482-8657**.
2. Make an appointment with primary care physician and other medical providers within 30 days to evaluate need for any continued pre-op medications. Follow up with your nutritionist within 30 days.
3. Check temperature twice daily for the first week, call if temp is 101.5°F or higher. Use incentive spirometry 4 times daily for 10 days. Report feelings of restlessness, fatigue, abdominal pain, nausea, vomiting to your surgeon's office. **If you have calf pain and swelling, shortness of breath, difficulty breathing, and/or chest pain visit the closest emergency room immediately.**
4. You may shower, but do not scrub incisions. (Notify us of redness or drainage from incisions). If any significant drainage, note color, odor and amount. Wash with soap and gently pat dry.
5. Walk daily at least every 3 hours for first week after surgery. Avoid heavy lifting (>20 lbs.) or straining for 4 weeks. When you do lift, keep your back straight and bend at the knees allowing your legs to do most of the work.
6. **Medications:** Patients may develop nausea and vomiting in the early postoperative period 1-2 weeks after surgery. Symptoms may improve if the following medications are taken as needed. It is advisable that you complete the full dose of each medication given unless otherwise specified by your doctor. **Medications taken by mouth except extended release may be crushed to make swallowing easier.** The standard bariatric discharge medications are highlighted below providing there are no contraindications for use: **You should obtain them from Vivo Pharmacy on 1st floor prior to discharge.**
 - **Levsin** - useful in patients who are having difficulty swallowing saliva (as needed, 30-day Rx) and experiencing esophageal or gastric spasm (**contraindicated in some Cardiac and Renal patients**)
 - **Prilosec** – helps decrease the amount of acid that your stomach makes and helps prevent heartburn (take daily for 12 months)
 - **Ondansetron (Zofran) ODT** – prevents nausea (as needed, 30-day prescription) (**avoid if on SSRIs and SNRIs, may cause Serotonin syndrome**)
 - **Tylenol** suspension 15ml every 6 hours as needed for pain.
 - **Lovenox** 40mg under the skin daily (sleeve and high-risk patients only)
 - **Oxycodone** may be given in limited doses only for significant pain.
7. In general, medications for diabetes, blood pressure and diuretics will be reduced after surgery. GLP-1 agonists are not restarted until approved by your surgeon.
8. If you have a bypass, do not take any anti-inflammatory pain medications unless approved by your surgeon, i.e. Ibuprofen, Advil, Motrin, Naprosyn, Aleve, etc. You may take **TYLENOL** (Acetaminophen). These medications are OK after sleeve.

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9. Take vitamin /supplements daily:
 - ❖ Multivitamin with iron, 2 tabs daily. (Chewable, liquid or pill)
 - ❖ Calcium Citrate 600 mg daily + Vitamin D 400iu 2 times a day (do not take at same time with other vitamins, begin at 3 weeks post op)
 - ❖ Vitamin B12, 1000 mcg Sublingual once per week
10. Avoid Alcohol and smoking.
11. Female patients should not become pregnant for 18 months until weight loss has stabilized.
12. If you encounter a problem, contact your surgeon or return to the Emergency Room where you had your surgery, or have the physician where you go contact your surgeon immediately if you present for treatment. There are many physicians who are unfamiliar with weight loss surgery and serious errors in treatment can occur. **DO NOT ALLOW ANYONE TO INSERT A STOMACH TUBE FOR ANY REASON WITHOUT X-RAY GUIDANCE.**
13. The post-op diet is divided into 3 categories to allow a gradual adjustment. Drink or eat slowly. Drinking or eating too fast or too much will cause nausea and or vomiting.

Continue with 60mL (two ounces) of liquid every 15 minutes as tolerated. Stop drinking when you feel full. Allow 10 to 15 minutes for your new stomach to empty. Your goal is **NO LESS THAN 60gms of protein per day. Consult with your dietician if further nutritional clarification is needed. No carbonated beverages.**

 - ❖ **Bariatric Phase I-** Full liquid diet and very thin puree – 240 ml per hour while awake. Chicken/vegetable soup, Lentil/pea soup, low fat cream soups, puddings, applesauce, yogurt, sugar free popsicles,

All items must contain less than 10gm of carbohydrate and sugar, low sodium (less than 300mg) of sodium per serving.
 - ❖ **Bariatric Phase II-** Soft and Semi-solid diet of 6 meals per day starts at week 3.
 - ❖ **Bariatric phase III-** Regular diet starts at 3 months post-op.
14. No water during meals, drink water 1 hour prior to or after meals. Drink at least 1.5 liter of non-carbonated low-calorie liquids at room temperature throughout the day to avoid dehydration. Some signs of dehydration include dry mouth and dark urine. Avoid gulping as this can cause pain and discomfort.
15. Walk daily with periods of rest for a short period of time, (20-30 minutes). Daily exercise can help you burn calories and lose extra weight. **Do not start a formal exercise program until you talk with your doctor.**
16. Feel free to contact your bariatric team with any questions.