

April 4, 2014

The following information is intended as a **general** guideline for you to follow for your upcoming surgery. If you have any questions, or need clarification on any of the following instructions, please feel free to contact our office and speak with our Bariatric nurse at 630-933-6745.

Insurance

It is your responsibility to obtain any needed referrals from your primary care physician. *Please ensure that you do not need a referral for the surgeon, the dietitian, the nurse and exercise specialist for each and every post-op visit.*

For HMO patients, **EVERY** post-operative visit needs a referral for the **surgeon, the nurse the dietitian and the exercise specialist.**

Medication

You should review your medications and supplements, and how they are to be taken, with your primary health care provider **prior to surgery.**

Plan to discontinue birth control pills or hormone replacement therapy (if applicable). Oral hormones have been associated with a higher risk of developing embolisms and blood clots. Switch to an alternative form of birth control before surgery such as a barrier method. Oral hormone forms of birth control will not be as effective following surgery, so now is a good time to practice alternative methods. If you are taking HRT for menopausal symptom relief, you should discuss alternatives you may take with your personal health care provider. You may resume HRT when your surgeon determines you are no longer at risk for blood clots. All female patients that are premenopausal will have a pre-surgery pregnancy test. You will not be allowed to have surgery if you are pregnant.

It is recommended that you avoid pregnancy for 18 months-2 years after Bariatric surgery. Rapid weight loss is not beneficial to a growing fetus. Obesity predisposes many patients to infertility problems. As you lose weight these problems may resolve. It is **very important** that you use adequate birth control to prevent pregnancy.

Depending upon the type of surgery you had, you may not be able to take medications orally. However, alternative routes for medication can be taken. For example medication can be given in your IV, by injection or by skin patches. **Medication must be crushed, chewed, or in liquid form** for at least the first four (4) to six (6) weeks post-op, depending on the type of surgery you have.

You may return to swallowing pills whole once your diet advances to Bariatric chopped. However, all pill forms of oral medication can not be larger than a regular aspirin. Large pills must be cut to aspirin size or smaller. Time released pills, or capsules, can not be cut.

You and your primary care physician should have a plan for taking medication after surgery. You must remember to consider the size of pills whenever taking any oral medication in the future.

Lovenox

You may be started on Lovenox, a blood thinner, just before surgery. You will also be on this medication during your hospitalization and for a short time after discharge. You will receive instructions during your hospital stay regarding how to administer this medication. This medication is expensive so **please confirm approval of this medication for home use with your insurance company prior to your admission.** The number for your benefits is located on your insurance card.

Occasionally, your pharmacy may not have the prescribed dosage on hand and it may take them 24 - 48 hours to obtain the medication. In order to ensure that you do receive the prescribed dosage and that the Lovenox is readily available, we would like to have this prescription filled at the Walgreen's at Central DuPage hospital and you should ask your nurse for this prescription prior to your discharge, should you need it. You would then be able to pick up your prescription when you leave the hospital at Walgreens here in the hospital.

Pre-Operation Instructions

We want you to be in optimum health before surgery. It will make for a better surgical outcome and a better overall experience for you. Here is the information that you will need to be aware of in preparing for surgery:

1. Diet and Meal Planning

It is recommended that you practice and adhere to the post op bariatric surgery diet, which is high protein, limited carbohydrates, no sugar, and limited fat. **Review the nutrition packet you received at your initial consultation.** Slowly decrease, then eliminate, the amount of caffeine and carbonated beverages in your diet. You will not want to suffer from caffeine withdrawal during the initial liquids only phase after your surgery. It is easier to cut down caffeine intake gradually than to go "cold turkey". Practice eating slowly (about 30-45 minutes per meal) chewing completely (about 20 chews) before swallowing. **We advise advanced preparation of your pureed protein and vitamin needs, so that they are readily available to you after you get home from your surgery.** Practice sipping fluids, mostly water, throughout the day. Your fluid goal is 64 ounces (8 cups) per day. **If you have any difficulties with your diet requirements please contact the Bariatric Treatment Center Dietitian before your surgery.** You may also write down any questions that you have to discuss with the dietitian during your hospital stay.

You should plan ahead by preparing and freezing at least one week of pureed protein meals. After cooking and pureeing some of your food choices, pour them into an ice cube tray and place in the freezer. **One ice cube is the equivalent of about 1 oz. of food.** Advanced meal preparation is recommended, as you will probably not feel inclined to cook much the first week home.

Once you are on the surgery schedule, you will be receiving a pre-operative two-week eating plan which is a caloric restriction to promote weight loss prior to surgery. It is imperative that you adhere to this plan as it will:

- Help reduce the amount of fat tissue around the liver which can result in improved surgical times and an easier surgical procedure.
- May reduce the incidence of post-operative complications.

2. Two weeks before surgery

Do not take any aspirin, Motrin, Ibuprofen, Naproxen Sodium, or Advil, or excessive quantities of Vitamin E (the small amount contained in most multi-vitamins is not harmful) for **two weeks** before surgery because this can increase your risk of bleeding.

3. Several days before surgery

Now is the time to purchase the supplies and vitamins that are recommended by the bariatric team if you have not bought them already. Ensure that your medications can be crushed or are available in chewable or liquid form ahead of time, as directed by your primary care physician.

4. The Night Before Surgery

Unless otherwise specified by the hospital pre-admission department, these general guidelines should be followed.

- Do not chew gum (as you may swallow it), eat, or drink after 12:00 midnight the evening prior to your surgery.
- Leave all valuables at home.
- Do not wear any makeup, nail polish, or jewelry. If you have artificial nails, we can use your toenails to check your oxygen levels.
- Ensure that you are packed and ready to go!

5. The Day of Surgery

Dentures, hairpins, hearing aids, glasses or contacts must be removed directly prior to surgery.

What to bring to the hospital

Pack lightly. Please do not bring valuables or jewelry with you to the hospital. Please bring any personal toiletries or items you may need with you, including denture, hearing aid, eyeglasses, and contact lens cases, contact lens solutions, any preferred shampoo/conditioners, toothbrush/toothpaste, hairbrush/comb, slippers or socks, and any other personal items you feel that are necessary. You will be wearing a hospital gown during your stay and will not be able to use your own pajamas, gown or robe initially, due to the IV. **You will want to pack very loose clothing to wear home from the hospital; nothing tight around the waist, as you might have surgical staples in place.**

If you have a drink preference with a specific flavor, such as "Fruit 20", Crystal Light, or a high protein beverage and it is on the list of acceptable dietary items, you may bring them with. Keep in mind that you will not be able to drink large amounts at first.

For your safety and comfort, your post operative hospital room will be equipped with specialized Bariatric equipment for use during your hospital stay.

If you have sleep apnea and are on C-PAP or Bi-Level therapy, the machine will be provided for your use during your hospital stay. Please bring your mask and adapter.

If you have any remaining questions, please feel free to contact the Bariatric Treatment Center at 630-933-6745. Our nurse clinician and dietitian are available to answer any questions you may have.

In good health,

The Bariatric Treatment Center Team

/res

P.S. Now that your surgery has been scheduled, you will need to call **Pre-Admission** at 630/933-6121 to schedule the pre-admission testing necessary prior to your surgery date. This is different from the pre operative work up you completed for your bariatric surgery evaluation and may include additional laboratory tests.

Please note: Should you require disability forms to be filled out due to your surgery, we will be unable to complete these during clinic time. Forms will be handled when time is available in the Bariatric office.

**REMINDER: Body Fat Testing is measured at 6 months and 1 year clinic visits.
(Reference the attached sheet.)**