

# Pre-Bariatric Surgery Class

## “What to expect”



# This presentation will cover what to expect:

- before your surgery
- the day of your surgery
- during your hospital stay
- after your surgery
- when you go home
- with potential Complications
- for lifelong follow up and support



St. Michael Hospital



Virginia Mason Medical Center

# Before Surgery

# Before Surgery

## Plan and prepare:

- Home
- Pre-op diet
- Post-op diet
- Family
- Medications
- Nicotine free

Pre Op diet  
(if instructed)

Medications  
change  
instructions

Phone call from  
pre-surgery team

Phone call with  
surgery check in  
time

Night  
before  
surgery  
instructions

Surgery Day!  
You must  
arrive on time.

Time for  
Surgery

# Before Surgery: Plan and Prepare

## **Make sure your house is safe:**

- Eliminate potential hazards in your home that may cause you to fall such as loose area rugs, cords, unstable furniture.
- Pain medication and recent anesthesia can cause drowsiness and you are more prone to falls.

## **Planning for the days immediately following surgery:**

- Make arrangements for child and pet care if applicable.
- Remember - You will have weight lifting restrictions for 4 weeks! Plan to have your house arranged accordingly.
- Arrange for someone to stay with you for first 24 hours after your hospital stay.
- If you live more than 2 hours from the hospital, we encourage you to stay locally for a few nights.

# Before Surgery: Plan and Prepare continued

## Pre-surgery shopping list

As you prepare for your surgery date, stock up on these items:

- Measuring cups and spoons.
- Water bottle with measurements on the side.
- Sugar-free, low-calorie, non-carbonated, and non-caffeinated beverages such as:
  - Crystal light
  - Diet Snapple
  - Herbal Tea
  - Vitamin Water Zero
  - Aquafina Splash
  - Vegetable, Beef or Chicken Broth
  - Sugar-Free Jello-O
  - Liquid water enhancer/flavorings (caffeine/sugar-free)
  - Sugar-Free sports drinks
  - Sugar-Free popsicles
  - Protein water
  - Bone Broth
- A high-protein, low-sugar shake (see page 24 in patient guide for examples).



# Before Surgery: Diet

- **Pre-Op Diet:**

- At your final pre-operative visit with your surgeon and/or nutrition team, you may be given a specific pre-op diet depending on your personal health history.
- This diet can begin as early as two weeks prior to surgery so plan ahead accordingly.
- If your surgeon does not specify a particular diet, please follow these rules:
  - Your surgeon may require a specific pre-op diet two weeks prior to surgery. You will be given specific diet instructions by your surgery team.
  - 3 days prior to surgery ensure that your meal(s) is very light and small. Use a bariatric (small) size plate.
- **Nothing** to eat after midnight the night before your surgery.

# Before Surgery: Medications

You will get a call from the presurgery team with instructions for which medications to take, adjust dosing of or stop prior to surgery. It is helpful to have a list of all your medications and supplements written down prior to this phone call.

Generally these guidelines should be followed unless told otherwise.

- Medications to stop 1 week prior to surgery: Phentermine, Herbal Supplements, NSAIDS, and Celebrex.
- Blood thinner medication adjustments will be made by physician that prescribed the medication.
- Diabetes Medications:
  - Metformin – can take the night before surgery
  - Other Diabetes Medications – per pre anesthesia appointment recommendations
  - Insulin: Pre-op RN will review with you and recommend doses
  - Lantus – per anesthesia but usually a lower dose the night before
  - Do not take any diabetic medication unless instructed by pre anesthesia



# Before Surgery: The night before

- Follow all instructions provided by your care team.
- Shower the night before surgery and use your cleansing towel/solutions. Repeat this process in the morning. Do not use the cleansing towels/solution on your face, in your hair, on genitals or on any open skin. After showering **do not** apply lotion, creams, make up or deodorant.
- Avoid shaving the night before, especially near the surgical area.
- Avoid any dark or red nail polish.
- Go to sleep on clean sheets with clean clothes on after your shower.
- Do not eat or drink after midnight.
- It's helpful to pack your bag for the hospital the night before.
  - Don't forget your ID and insurance card!
  - Bring your CPAP machine if you use one.
  - Remove piercings and leave jewelry and valuables at home.



**No Jewelry or  
Valuables**

# Day of Your Surgery

# Day of Surgery: Morning

- It is okay to brush your teeth the morning of surgery.
  - Avoid gum, mouthwash or mints.
- Avoid applying scented lotions, deodorants, hairspray, gel or makeup.
- Remember to take, or not take, your medications as discussed by your pre-surgery team.
- No eating or drinking after midnight, except:
  - Plain water is allowed 2 hours prior to your arrival time.

# Day of Surgery: Arrival

- Plan to check-in at the location provided to you.
  - St. Francis: East Entrance in the round about
  - St. Michaels: Mountain View Entrance by the roundabout.
  - Virginia Mason: Central Pavilion, Level 6.
- To avoid being late, allow plenty of time for:
  - Parking.
  - Walking to and finding the check in area.
  - Checking in.



## Registration Desk

## Pre-Surgery Unit

## Operating Room

## Recovery Room

## Bariatric Unit

You will be registered and admitted for your surgery.

Change into a hospital gown and get ready for surgery.

Nurses, Surgeon, and Anesthesiologist will check in with you.

Once ready you will be wheeled into the operating room.

Multiple team members will be preparing for your surgery

You'll transfer to a surgical bed

Blood pressure cuff and heart monitors will be placed.

You may not remember much after this as the medication takes effect.

Surgery generally takes between 1-4 hours depending on the procedure.

Here you'll be monitored closely until a bed becomes available on the unit

Having nausea or pain? Let your recovery room nurse know!

Visiting policies frequently change, please check in with the surgical team.

Vital signs are measured every few hours (including overnight).

Your job:  
Walk every 1-3 hours.  
Small sips every 15 min.

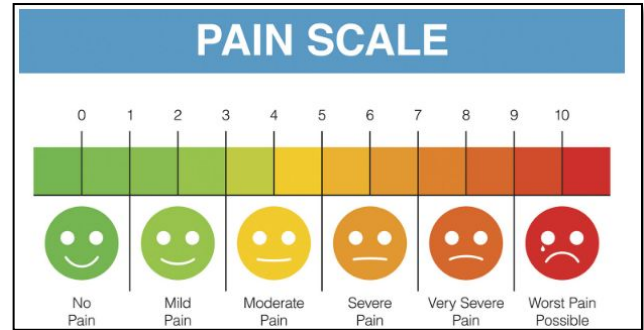
You can expect to stay 1-2 nights in the hospital.

**\*Visiting hours vary by facility but typically overnight guests are not allowed.**

# During Your Hospital Stay

# Hospital Stay: Comfort

- Your nursing team will continuously monitor your pain level, nausea and any other concerns you may have.
- Often a pain scale of 1-10 is used to track your pain.
- You will most likely be uncomfortable and will be prescribed pain medication to help with the initial pain.
- Gas pain can be worse than surgical pain.
  - walking is most effective treatment for this.
- Your surgical team will stop by to check on you.



# Hospital Stay: Diet

- Your diet will be slowly advanced per facility protocol and as you tolerate it.
- You will be started on clear liquids which may include:
  - Sugar free Jello, broth, sugar free-popsicles, water, and/or crystal light
- Staying hydrated after surgery is incredibly important and will help prevent complications and/or readmissions to the hospital.
- Your goal for discharge: You should be able to consume **AT LEAST** 48 ounces of sugar free clear liquids per day to prevent dehydration.



# Hospital Stay: Discharge Planning

- You are ready to go home when you meet this criteria:
  - Your surgery team has visited you
  - You are able to meet your fluid goals set by your team
  - Your pain is manageable and nausea is under control
  - You are able to walk around safely
  - Your nurse has reviewed discharge instructions with you
- If not previously prescribed, your discharge medications will be provided and sent to the pharmacy of your choice.

# Hospital Stay: Discharge

- Since you will not be able to drive for 24 hours after surgery you are required to have a responsible adult pick you up from the hospital, drive you home and stay with you for a minimum of 24 hours after leaving the hospital.
- You can not drive or operate heavy machinery while taking any narcotic pain medication provided to you.
- It may be helpful to have a disposal plan for your narcotics when no longer needed.
  - Never share or sell narcotics, keep them in a safe location.
  - You can visit [www.takebackyourmeds.org](http://www.takebackyourmeds.org) to find a safe disposal location.

# After Your Surgery and When You Go Home

# When you go home

- Remember to follow your specific discharge instructions provided for guidance with activity, medication, diet advancement and wound care.
  - 24 hours after surgery you can shower. Pat incisions dry (don't rub).
  - Avoid hot tubs, baths or swimming for 4 weeks or until cleared by your surgeon.
  - Lift no more than 10 pounds (slightly heavier than one gallon of milk) for the first 30 days.
- A member of your care team will follow up with you after surgery to see how you are doing.
- We ALWAYS encourage you to call your surgical team at the number provided on discharge paperwork with any concerns.

# When you go home

Common Issues that may arise after surgery include:

- **Shoulder Pain:** This can occur after laparoscopic surgery and should resolve within about 1 week. Treat by walking, using a heating pad on your shoulder and avoid laying flat while sleeping.
- **Port site abdominal pain** is normal and expected after surgery. To manage the pain:
  - Keep up with Tylenol
  - Use ice packs for short durations.
  - Keep a small pillow handy - use this when you cough or press it to your abdomen when you get up.
  - Wearing an abdominal binder may also be helpful

# After Discharge

- **Gas Pain** can be relieved by:
  - Walking
  - Using a gas relieving medication
  - Burping and passing flatus (gas)
- **Constipation:** This can be from a number of factors including: immobility, dehydration, medication and diet changes.
  - To relieve constipation we recommendation: more walking, increase hydrating fluids and/or addition of medications that increase bowel regularity
    - Miralax, Milk of Magnesia, and Dulcolax are all helpful.
- **Changes to routine medications:** Please reread page 12 in your Patient Guide regarding important medication considerations. Follow up with your Primary Care Provider or Pharmacist for necessary medication changes.

# After Discharge

- **Pain Medication Safety**

- Your pain may fluctuate over time and your provider will work with you on strategies to manage your pain.
- If you have not taken opioids recently, your prescription will likely be for three to seven days.
- As you heal, you will need less and less pain medication.
- Taking opioids puts you at risk of dependence, tolerance, addiction and overdosing (poisoning).
- An opioid overdose often marked by slowed breathing can cause sudden death. You may be prescribed naloxone (Narcan) that can be given in an emergency.
- Benzodiazepines, muscle relaxants and sleeping medication should be avoided while taking opioid pain medications.
- If you currently take opioid pain medication for a chronic condition it is very important to follow strict instructions on dosage to minimize potential overdose.

# Potential Complications



# Potential Complications:

## Blood clots

- Shortness of breath
- Unexplained pain, redness or swelling in one or both legs or increased pain with standing
- Pain in chest or rib cage when taking a deep breath

## Infection

- Redness, heat, increased pain, drainage or foul smelling discharge at surgical sites
- Fever >101

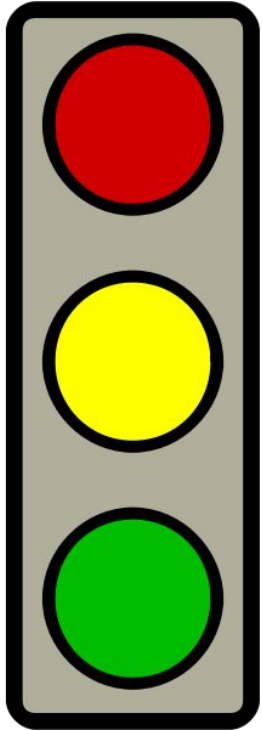
## Staple line leak

- Fever >101
- Fast heart beat
- Nausea/vomiting
- Worsening severe abdominal pain
- Unexplained feeling of impending doom

## Pneumonia

- Dry or productive cough
- Fatigue

# Potential Complications, continued:



**Red:** Emergency - Call 911 or go to nearest Emergency Room.

Chest pain, shortness of breath, “sense of doom, painful or swelling leg(s), uncontrolled - persistent and unrelenting pain.

**Yellow:** Urgent: Call your surgeon’s office or after hours phone number.

Wound infection, painful urination, fever >101, inability to consume a minimum of 48 ounces and/or dehydration symptoms. Abdominal pain not relieved by medication, ice pack, and rest.

**Green:** Non-urgent: Call your surgeon’s office during business hours or send patient portal message.

Inability to advance diet, food intolerance, vitamin and mineral questions,

# Dehydration

## Symptoms of dehydration:

- Lightheadedness or dizziness
- Headache
- Nausea and vomiting
- dry mouth and tongue
- Fatigue
- Dark colored urine
- Confusion

## Preventing dehydration?

- Consuming at least 48 ounces per day
- Increase fluids if you experience diarrhea or excessive sweating.
- If you have symptoms of dehydration start a sugar free electrolyte drink
- Prepare yourself for frequent sipping as you won't be able to consume large amounts at one time.
- After surgery it may be hard to chug or gulp. SIP! SIP! SIP!

# Lifelong follow up and support

# Lifelong follow up and support:

**We care about your progress.** Stay in touch and keep your follow up appointments so we can do our best to help your recovery go smoothly.

Your initial follow up visit is scheduled around two weeks after surgery. After that you will see your care team regularly or as needed. These visits usually are at the following intervals:

- 6 weeks
- 6 months
- Annually for life
- Or, whenever necessary.

You will be monitored for nutrition deficiencies. After all, it is easier to prevent a deficiency than to correct it.

Additionally, we want you to keep your PCP involved and informed of your progress.



# Lifelong follow up and support:

Final messages from your Virginia Mason Franciscan Health Center for Weight Management Teams.

*“Surgery is a tool for weight loss. Your job now is to commit to making the physical, mental and emotional changes necessary for long term weight loss and maintenance. “*

*“The secret to success after weight loss surgery is maintaining contact with your bariatric surgery team. Studies show support group attendance and regular follow up are key factors for losing weight and keeping it off.”*

*“We want to make sure that you STAY WELL and continue to meet your goals!!!”*

***“Focus on the journey, not the destination.”***

**You are in Excellent hands!**