BARIATRIC CENTER

Bariatric Surgery Patient Binder





Table of Contents

Surgical Excellence Comes With Experience	3
Welcome	
What will YOU gain by losing?	5
Baptist Health Map and Helpful Phone Numbers	6
Meet Our Team	7
Write your questions here	8
Introduction to Obesity	9
Body Mass Index (BMI)	10
Weight Loss Surgery	11
Excess Weight Loss (EWL)	12
Roux-en -Y Gastric Bypass	13
Sleeve Gastrectomy	14
Bariatric Revision Surgery	15
Surgery Risks and Complications	
Weight Loss Surgery Considerations	17
What I Wish I Knew Before Weight Loss Surgery	18
Your Lifelong Commitment	19
Pause and Reflect	19
Preparing for Your Surgery	. 20
Social Support	21
Tracking Success	. 22
Tracker	. 23
General Nutrition Information	. 24
Nutrition - Protein	. 25
Nutrition - Carbohydrates	. 26
Nutrition - Fats	27
Serving Sizes of Different Foods	. 28
Healthy Eating Guidelines	. 29
Common Names for Sugar	. 30
Reading Nutrition Labels	
Reading Ingredient Labels	. 32
Portion Control Using Common Items	33
Template to Create a Balanced Meal Plan	34
Bariatric Pre-Op Shopping List - Recommended Items	. 35
Vitamins	. 36
Protein Shakes and Powders	. 38
Bariatric Pre-Op Phase (Liver Shrinking Phase)	. 40
Pre-Op Phase (Liver Shrinking) Meal Examples	41



Phase 1 Clear Liquids / Protein Drinks (Post-Op Days 1-3)	42
Finding it hard to drink enough water?	43
Phase 2 Full Liquids / Protein Drinks (Post-Op Days 3-14)	44
Phase 2 Sample Meal Plan	45
Phase 3 Soft Foods (Post-Op Weeks 3-4)	46
Phase 3 Sample Meal Plan	48
Phase 4 Soft /Chopped Foods (Post-Op Weeks 5-8)	49
Phase 4 Sample Meal Plan	
Lifetime Eating Phase (Post-Op Week 9+)	
Lifetime Phase Sample Meal	53
Recipes	
Going Out to Eat	67
Physical Activity	
Post-Op Physical Activity	70
Milk Jug Workout	71
Examples of Workout	74
2 Weeks Before Surgery: To Do	75
2 Days Before Surgery: To Do	76
Day of Surgery: To Do	77
Day of Surgery: Process	78
Hospital Stay	78
Expectations After Surgery?	79
Post-Op Medications	79
When to Call?	80
Nausea, Vomiting, or Food Getting Stuck	81
Constipation	82
Dumping Syndrome	83
Changes After Surgery	
Mindfulness for Eating	85
Mindfulness for Sleep	
Journaling and Self-Reflection	87
Daily Food Record	
Post-Op Map - Year 1	90
Post-Op Map - Year 2	91
Lifelong Follow-up Map	92
Risk Factors for Weight Regain After Bariatric Surgery	
References	

Baptist Health Bariatric Center-Little Rock is designated as a

a Bariatric Center of Excellence and a Metabolic and Bariatric Surgery Institute of Quality.

This designation identifies our surgical team and program as providing quality, effective care for our patients before and after surgery.





WELCOME

Thank you for choosing the Baptist Health Bariatric Center and putting your confidence in our team. We will guide you through the process, celebrate all of your successes, and support you through struggles. We will prepare you with what to expect and how to navigate the lifestyle changes.

The Baptist Health Bariatric Team knows that bariatric surgery requires education and support to be successful. This book will be your go-to guide along the way. You will want to take it with you to all of your appointments, read through it carefully, and write down any thoughts, questions, and goals you have. This book will be a valuable resource to help you become better prepared before, during, and after surgery. Our goal is to make your journey a success!

The Baptist Health Bariatric Center is committed to helping patients live a healthier, happier lifestyle through successful weight loss and long-term weight management. We are here to help you every step of the way!

The Baptist Health Bariatric Center Staff





What will **YOU** gain by losing?







Baptist Health

Baptist Health Map and Helpful Phone Numbers



Baptist Health Medical Center-Little Rock

9601 Baptist Health Drive Little Rock, AR 72205

Baptist Health Bariatric Center

Hickingbotham Outpatient Center 9500 Kanis Road, Suite 503 Little Rock, AR 72205 (501) 202-4477

Baptist Health Surgical Clinic of Central Arkansas

Hickingbotham Outpatient Center 9500 Kanis Road, Suite 501 Little Rock, AR 72205

(501) 227-9080

For questions before surgery, call (501)-202-4477.

For questions or concerns after surgery, call (501)-227-9080.



Meet Our Team









Eric Paul, MD, FACS

studied at Baylor University and graduated from the University of Arkansas at Fayetteville. He then attended medical school at the University of Arkansas for Medical Sciences. He completed his General Surgery residency at the University of Oklahoma College of Medicine in Tulsa, Oklahoma and after concluding a Fellowship in Advanced Laparoscopic Surgery and Bariatric Surgery at Emory University. He joined our team in 2010.

Tripurari Mishra, MD

attended medical school at Saint Louis University School of Medicine. He then completed his General Surgery residency at the University of Illinois Chicago Metropolitan group Hospitals. He then went on to complete a Fellowship in Minimally Invasive Surgery/Bariatric Surgery at Gundersen Lutheran Health System. Dr. Mishra is American College of Surgeons Board Certified.

Kelly Bassett APRN

attended school at Baptist Health School of Nursing where she obtained her Associate's Degree. She then received her Bachelor's Degree at Arkansas Tech University. She then went on to complete her Family Nurse Practitioner degree at Chamberlain University. Kelly is American Academy of Nurse Practitioners Certified.

Mitchell Kirby, RDN, LD

studied at Harding University for his Bachelor's Degree. He then completed his Dietetic Internship through UAMS/CAVHS, and is currently completing his Master's Degree of Clinical Nutrition through UAMS. Mitchell is a Registered Dietitian Nutritionist and Licensed Dietitian.



Write your questions here:

🗱 Baptist Health

Introduction to Obesity

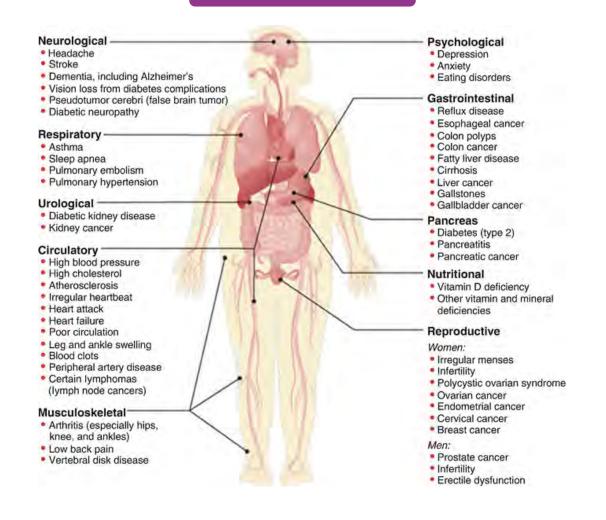
42.4% of adult Americans over the age of 20 are obese. (CDC)

Obesity is when a person carries excess weight or body fat. Obesity can cause damage to your body and lead to serious health risks. People with severe obesity are at an increased risk for more serious disease such as:

- Type 2 diabetes
- High blood pressure (hypertension)
- Coronary heart disease
- Cancer
- Stroke
- Sleep apnea and breathing problems
- Osteoarthritis (a breakdown of cartilage and bone within a joint)

In some cases, these conditions can lead to disability or early death.

How obesity affects your body:





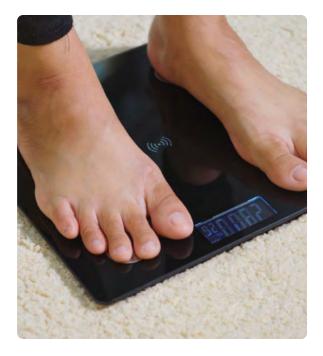
Body Mass Index (BMI)

We screen for obesity by calculating body mass index (BMI). BMI measures an individual's weight in relation to their height. Use the table below to check your BMI. Both men and women use the same chart to measure obesity and the same classifications of obesity apply to both sexes.

My Height: _____

My Weight: _____

My BMI: _____



		HEALTHY OVERWEIGHT				OBESITY					EXTREME OBESITY																					
BMI	19	20	21	22	23	23	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
HEIGHT															WEI	GHT(IN	POUN	DS)														
4'10"	91	96	100	105	110	110	119	124	129	134	138	143	146	153	158	162	167	172	177	181	186	191	196	201	205	210	215	220	224	229	234	234
4'11"	94	99	104	109	114	114	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247
5'	97	102	107	112	118	118	128	133	138	143	148	153	158	163	169	173	179	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255
5'1"	100	106	111	116	122	122	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232	238	243	248	254	259	264
5'2"	104	109	115	120	128	128	136	142	147	153	158	164	169	174	180	185	191	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273
5'3"	107	113	118	124	130	130	141	146	152	158	163	169	175	180	186	192	197	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282
5'4"	110	116	122	128	134	134	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291
5'5"	114	120	126	132	138	138	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300
5'6"	118	124	130	136	142	142	155	161	167	173	179	186	192	198	204	210	218	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309
5'7"	121	127	134	140	146	146	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319
5'8"	125	131	138	144	151	151	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328
5'9"	128	135	142	149	155	155	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338
5'10"	132	139	146	153	160	160	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292	299	306	313	320	327	334	341	348
5'11"	136	143	150	157	165	165	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301	308	315	322	329	338	343	351	358
6'	140	147	154	162	169	169	184	191	199	206	213	221	228	235	243	250	258	265	272	279	287	294	302	309	316	324	331	338	346	353	361	368
6'1"	144	151	159	166	174	174	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378
6'2"	148	155	163	171	179	179	194	202	210	218	225	233	241	249	258	264	272	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389
6'3"	152	160	168	176	184	184	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399
6'4"	156	164	172	180	189	189	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410
	REDUCED RISK INCREASED RISK																															



Weight Loss Surgery

Bariatric surgery, or weight loss surgery, is a tool to help people lose weight. When accompanied by permanent lifestyle changes, it can help individuals achieve lasting health benefits.

Bariatric Surgery Benefits:

- Long-term remission from
 Type 2 Diabetes
- Reduce weight-related medical problems such as high blood pressure, high cholesterol, and sleep apnea
- Improve infertility
- Improve mobility and decrease joint pain
- Lower risk of heart disease, cancer, and stroke

Baptist Health Bariatric Center offers the latest and safest weight loss surgery options:

- Sleeve Gastrectomy
- Roux-en-Y Gastric Bypass
- Revisional surgery



In this book, we will provide more information about each of these procedures. During the initial consultation with the physician, you and your surgeon will discuss the procedures and decide on a plan that meets your needs.



Do not compare yourself to others who have had the surgery, everyone's weight loss journey is different.



Excess Weight Loss (EWL)

As you start losing weight after surgery, we calculate the percent (%) of the excess weight you have lost. The percentage of the excess weight you lose is your EWL.

My Pre-op Weight:	Ibs
Weight for a BMI of 25 at my Height: (see the table page 14)	Ibs
Subtract the two numbers. This is your current excess weight:	Ibs

EWL (Excess Weight Loss) = (amount of weight you lose / excess weight) x 100%

EWL of 50%, maintained over five years, is considered a successful surgery.

Example 1:

Excess Weight = 150 lbs Weight loss after surgery = 75 lbs $EWL = (75/150) \times 100\% = 50\%$

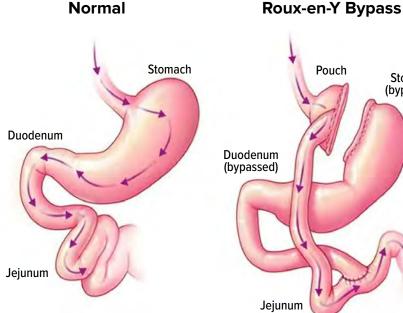
Example 2:

Excess Weight = 250 lbs Weight loss after surgery = 200 lbs EWL = (200/250) x 100% = 80%

With these calculations, you will be able to better track your progress and continue to work towards your goals.



Roux-en-Y Gastric Bypass (RNY)



Facts about a "gastric bypass"

- Oldest and most studied weight loss surgery
- Promotes weight loss in different ways

Restricts the amount of food that the stomach can hold.

Limits the calories and nutrients absorbed from the food you eat.

Changing your gut hormones, making you feel full after eating only a small amount of food.

Advantages:

- Average 60-80% of excess weight loss (individual results vary)
- Effective for GERD
- Obesity-related health conditions may begin to improve before you lose weight

Stomach (bypassed)

Disadvantages:

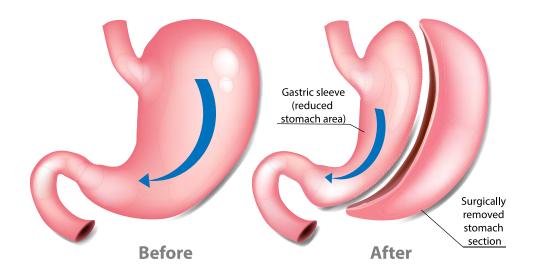
- Slightly higher complication rates than the Sleeve procedure - complications include the possibility of leaks, bleeding, blood clots, infection, and blockages
- Possible long-term micronutrient deficiencies - must take vitamins for the rest of your life
- Surgery is not easily reversible (very rarely done)

Hospital Stay: 1-2 nights

Return to work: 1-3 weeks



Sleeve Gastrectomy



Facts about a "sleeve"

- Most popular weight loss surgery
- Promotes weight loss by restricting the amount of food you can eat.

The minimally invasive procedure removes a portion of the stomach, making the stomach roughly the size and shape of a banana.

Advantages:

- Average 60-70% of excess weight loss (individual results vary)
- Short recovery time, no anastomosis
- Few long-term complications

Disadvantages:

- 10-20% of patients regain their weight
- Some patients experience relief of GERD while other may develop GERD after the sleeve

Hospital Stay: 1-2 nights

Return to work: 1-3 weeks



Bariatric Revision Surgery

Facts about Revisional Surgery:

- Patients who have experienced complications or negative effects as a result of weight-loss surgery may require additional procedures to correct the original operation.
- Promotes weight loss by restricting the amount of food you can eat. The minimally invasive procedure removes a portion of the stomach, making the stomach roughly the size and shape of a banana.

Reasons for Revisional Surgery:

- The pouch may stretch and become larger
- The outlet of the pouch may increase in diameter
- A gastrogastric fistula may form between the gastric pouch and the bypassed stomach
- The intestine may increase its absorptive abilities beyond what is expected

Other possible reasons:

- Adjustable gastric band (Lap-band) failure
- Pouch enlargement
- Sleeve failure
- Gastrogastric fistula
- Weight regain



Surgery Risks and Complications

We take all necessary precautions to prevent complications. However, all surgeries have risks. It is important to understand these risks when making a decision about surgery.

Risks for all Surgeries:

- Bleeding and Injury to Vital Organs
- Heart Attack
- Stroke
- Blood Clots and Pulmonary Embolism
- Atelectasis and Pneumonia
- Nerve injuries to arms and legs
- Death

Risks for all Bariatric Surgeries:

- Converting from a Laparoscopic to an Open Procedure
- Leaks can occur due to staple lines or due to poor healing
- Infection, Abscess, and Fistula
- Hernias can develop after any type of abdominal surgery
- Obstructions can occur due to scar tissue
- Gallstones can occur due to rapid
 weight loss
- Change in body image, depression, divorce, suicide, risk of substance abuse disorders
- Weight regain can occur if the appropriate dietary guidelines are not followed.
- Food Intolerances: red meat, milk, high fiber foods, etc.
- Improved infertility, notably in females with polycystic ovary syndrome (PCOS)
- There are additional risks that are specific to the different types of surgery.

Sleeve Complications:

- Dehydration
- Reflux, GERD
- Dumping Syndrome, see page 92
- Malnutrition, Vitamin and Nutritional
 Deficiencies
- Anemia
- Pouch Dilation
- Obstruction of Stomach Outlet

Bypass Complications:

- Dehydration
- Dumping Syndrome, see page 87
- Short Bowel Syndrome
- Malnutrition, Vitamin and Nutritional
 Deficiencies
- Hypoglycemia (low blood sugar)
- Anemia
- Osteoporosis
- Bile Reflux Gastritis
- Obstruction of Stomach Outlet
- Kidney Stones
- Symptomatic Gallstones
- Alcohol Addiction Transfer

Warning Signs of Complications:

- Pulse greater than 120 beats
 per minute
- Fever greater than 101 degrees
- Shortness of breath
- Excessive abdominal pain
- Vomiting



Weight Loss Surgery Considerations

The extensive evaluation you undergo before surgery takes these and other factors into consideration.

Your Weight Loss Goals

The percent of weight you are expected to lose and the rate at which you lose weight differs for each surgery.

Your Medical History

Your history with medical problems such as acid reflux and diabetes – and how long you've had them – can make one surgery better for you than another.

Your Risk Factors

Each weight loss procedure is associated with a different set of risks, which may vary based on your specific medical condition. During a consultation with your surgeon, they will review your medical history, discuss potential risk factors, and answer all of your questions.

After a discussion with your surgeon of the benefits, risks, as well as your goals, the two of you will decide on the most suitable procedure for you.





What I Wish I Knew Before Weight Loss Surgery



- I did not know that I would feel as good as I do now. Many patients agree that the surgery is the best thing they did for themselves.
- The importance of holding myself accountable with eating, exercise, daily vitamins, etc. You are ultimately responsible for what you put into your body. The surgery is just a tool for you to use, not a magic "Fix All."
- How long a weight loss stall lasts. Everyone will have weight loss stalls. Use this as a time to evaluate your eating habits, activity level, and other habits. A stall can be frustrating but it can also be used as a learning opportunity. Don't let a stall result in starting bad habits again.

- 4. How long it takes for my brain to see me as my current status. I still "feel" like an overweight person. Many patients say they still see themselves at their pre-surgery size.
- 5. Emotional eating and cravings don't go away. You will still have to manage emotional eating and cravings. Weight loss surgery does not affect this. It only changes how much food you can eat at one sitting.
- 6. How difficult maintaining weight loss can be. As cravings come back and you are able to tolerate more foods, the maintenance phase can be more challenging. It is important to stay connected to the support group and with follow-up appointments.
- 7. Finding other things that give you joy is a good feeling. Life without food as the focus point can be exhilarating!



Your Lifelong Commitment



Pause and Reflect

I feel most interested in the		surgery.
-------------------------------	--	----------

My Goals:



Preparing for Your Surgery

Diabetes Medication - If you take medication for your blood sugar, your medication requirements may go down in the week before surgery. Check your blood glucose so you know where your blood sugar is daily or more if they seem to be changing frequently unless you have a continuous glucose monitoring device. Develop a plan with your prescribing physician for decreasing your medication if you take insulin. Be sure you know how to rescue yourself from hypoglycemia if needed.

Hypertension Medication - If you take medication for high blood pressure, you need to be mindful that this requirement may also go down as you consume only the clear liquids before surgery. If you do not have a blood pressure machine, it is likely a family member has one. They are fairly inexpensive at discount stores or online.

Smoking - If you smoke or vape, stop. Stop smoking cigarettes and using all nicotine products (patches, gum) at least 6 weeks before surgery. Tobacco should also be avoided after surgery due to increased risk of poor wound healing.

Birth Control - Losing weight after surgery can increase a woman's fertility, making you more likely to get pregnant. However, rapid weight loss can be unsafe for a developing fetus. For this reason, pregnancy is not recommended for 18-24 months after surgery.

All women of childbearing age are recommended to use reliable birth control methods before and after surgery. Talk with your healthcare provider to discuss your options:

BEFORE SURGERY	AFTER BYPASS	AFTER SLEEVE
All methods permitted	 Oral birth control pills do not absorb properly after bypass surgery Only non-oral birth control methods permitted: IUD, condom, Nexplanon (implant), NuvaRing, Depo-Provera (injection) 	All methods permitted



Social Support





Support Group

Your success after bariatric surgery is highly important to us. We highly encourage patients to join our **Baptist Health Bariatric Support Group** page on Facebook. Support Groups allow for interaction with others who have been through the same procedure. You will be able to share what life is after surgery as well as learn what to expect from the procedure.

We also have **monthly Support Group meetings** that are led by members of our bariatric team. Our staff can offer additional information and encouragement throughout your weight loss journey. Contact our office for more information regarding upcoming meetings. Surrounding yourself with people who share your situation would help you maintain the long-term lifestyle changes required after surgery.

Family and Friends

Engaging families in behavior change may help you and your family to become healthier. Involving loved ones in your plans would help them to understand your journey and give an opportunity to grow together. Ask them to take over some household chores while you have time for self-care. Also, ask them to keep trigger foods out of the house.



Tracking Success

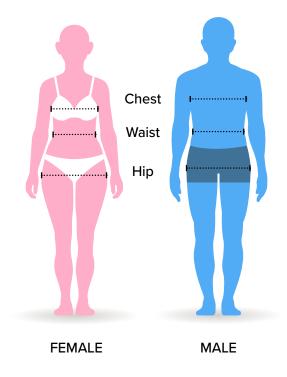
The scale does not always show the success you are achieving! Muscle weighs more than fat, so you could be gaining muscle if the number on the scale does not change as much as you are wanting.

- Start 2 weeks before surgery
- Write a diary (record all measurements, food intake, feelings, thoughts, reactions to life style changes, and people's compliments)
- Take photos at 2 weeks Pre-op and Post-op at 1, 3, 6, 9, 12, and 18 months (front, side, back) using the same "before outfit." Take photos using the same "before outfit." Then take photos wearing something that fits properly so you can see your weight loss in your clothing.

 Tape these photos to your mirror or in your closet - this will help your mind catch up with your body



Measure the chest, waist, and hips circumference



How to take your measurements:

Chest: with arms relaxed down at the sides, measure the fullest part of the chest/bust

Waist: measure around the natural waistline

Hips: measure around the fullest part of the lower body



Tracker

Before Surger	У	Date	_
Weight	Chest	Waist	Hips
1 Month After	Surgery	Date	-
Weight	Chest	Waist	Hips
3 Month After	Surgery	Date	-
Weight	Chest	Waist	Hips
6 Month After	Surgery	Date	_
Weight	Chest	Waist	Hips
9 Month After	Surgery	Date	-
Weight	Chest	Waist	Hips
12 Month After	r Surgery	Date	-
Weight	Chest	Waist	Hips
18 Months Afte	er Surgery	Date	-
Weight	Chest	Waist	Hips
24 Months Aft	er Surgery	Date	-
Weight	Chest	Waist	Hips

Everyone will have weight loss stalls.



General Nutrition Information



The key to success with bariatric surgery is learning how to eat.

It is important for you to understand a base level of nutrition knowledge so you can make your own decisions about the foods you eat as your body has healed from the surgery. **Calories** are the energy that foods provide us. If you do not burn more calories than you consume, then you gain weight. If you burn more calories than you consume, then you lose weight. There are 3 different macronutrients that provide Calories: Protein, Carbohydrates, and Fat.

Goals:

Calories: 800-1200 Calories per day after surgery Protein: 70-90 grams per day (As Tolerated) Carbohydrates: 50-70 grams daily Fat: Less than 40 grams daily Water: 64+ ounces daily



Nutrition - Protein

PROTEIN should be your top priority after surgery. With large amounts of weight loss over a short period of time, there will be a large loss of Lean Body Mass (Muscle Mass). The more protein you consume, the less Lean Body Mass you will lose. Lean Body Mass consumes a lot of energy, so the more Lean Body Mass you have, the faster your metabolism is and the greater your chance of success after surgery. **Protein** comes from animals and some plants. Protein from animals is the highest quality, contain 7 grams of protein per ounce, is faster absorbed, contains all the amino acids, and is rich in many highly bioavailable vitamins and minerals (micronutrients) (which are very important after surgery), so protein from animal sources should be the main source of your protein intake. Protein from plants is not as quickly absorbed, grams of protein varies from plant to plant, only a few sources contain all the amino acids, contain some vitamins and minerals but in less bioavailable amounts, and are usually higher in Calories.

COMPLETE PROTEIN	INCOMPLETE PROTEIN		More Protein Is per 200 Calc	per Calorie (Mor pries)	e than
Animal: BEEF PORK POULTRY	LENTILS GREEN PEAS PUMPKIN	Protein)	= Less Protein	′our Main Source per Calorie er 200 Calories)	es of
FISH EGG SHELLFISH MILK	SEEDS PEANUTS/ PEANUT BUTTER CORN	Lean Beef 33g per 150g (raw)	Chicken 33g per 150g (raw)	White Fish 30g per 150g (raw)	Tofu 12g per 100g
CHEESE (COTTAGE CHEESE)	MUSHROOMS CHIA SEEDS			MILK	
Plant: QUINOA BUCKWHEAT SOY		Tuna 19g per 95g can	Milk 10g per cup	High Protein Milk 15g per cup	Mixed Nuts 7g per 30g
TOFU QUORN		High Protein Yoghurt 15g per 170g	Cheese 9g per 35g	Eggs 8g per large egg	Legumes 7g per half cup



Nutrition - Carbohydrates

CARBOHYDRATES provide energy and some micronutrients not found in animal proteins. We break down carbohydrates into Non-Starchy Veggies, Fruits, Starchy Veggies, tarches, and Refined Carbs

Non-Starchy Veggies are lower in Calories, higher in Fiber, and are good sources of some micronutrients.

Examples: Spinach, Artichoke, Asparagus, Broccoli, Carrots, Cucumber, Onion, Okra, Mushrooms, Squash, Tomato, Peppers, Radishes

Starchy Veggies have more calories, some fiber, and may not be as good of sources for vitamins and minerals.

CAUTION: these foods are higher in calories, so be aware of the serving sizes when consuming. Unmonitored consumption of starchy veggies can result in unwanted weight gain.

Examples: Corn, Peas, Potatoes, Acorn Squash, Butternut Squash, Beans, Chickpeas, Lentils, Yams, Parsnips

Fruits will have some simple sugars, fiber, and are good sources of micronutrients. Avoid canned fruits or packaged in sugar liquids, and try to only consume Fresh, Whole Fruit. **CAUTION:** consumption of fruit after bariatric surgery can cause sugar cravings to return. If sugar cravings cause you to over consume sweets and refined carbs, it may be best to avoid fruit after surgery.

Examples: Banana, Apples, Berries, Peaches, Oranges, Melons

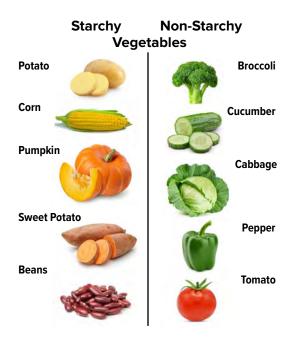
Starches are high in Calories, some vitamins and minerals, and lower in fiber. **CAUTION:** these foods are higher in Calories, so be aware of the serving sizes when consuming. Unmonitored consumption of starches can result in unwanted weight gain.

Examples: Whole Wheat Pasta, Wheat Breads, Brown Rice, Beans, Potatoes, Yams, Corn

Refined Carbs are highly processed starches and sugars, low in micronutrients, low in fiber, and high in calories.

CAUTION: these foods are higher in Calories, so be aware of the serving sizes when consuming. Unmonitored consumption of refined carbs can result in unwanted weight gain. **Strictly Limit/Eliminate from diet.**

Examples: White Bread, Pasta, White Rice, Sweets, Cakes, Pastries, Tortillas, Sugary Cereals, Candy





Nutrition - Fats

FATS provide energy, transports and helps absorb micronutrients, and produce and transport hormones. Most foods high in fat will have some combination of saturated, monounsaturated and polyunsaturated fats.

Saturated Fats are solid at room temperature, and raise both your LDL and HDL cholesterol (A ratio of LDL to HDL that is closer to 1 is a better indicator of cardiovascular health than total LDL).

Examples of High Saturated Fat Foods: **Beef** and Pork Fat, Butter, Coconut Oil, Palm Kernel Oil, Cocoa Butter, Beef Tallow, Lard, and Dairy

Monounsaturated Fats are liquid at room temperature, but begin to harden when chilled, and decrease your LDL.

Examples High Monounsaturated Fat Foods: Safflower Oil, Canola Oil, Olive Oil, Sesame Oil, Peanut Oil, Nuts, Beef Fat, Pork Fat, Chicken Fat, and Butter Polyunsaturated Fats are liquid at room temperature, but begin to harden when chilled, and can be broken down into 3 groups: Omega 3s, Omega 6s, and Omega 9s. (Omega 9s won't be discussed) Omega 3s and Omega 6s are Essential Fatty Acids, meaning they have to be consumed in the diet. We want the ratio of Omega 6s to Omega 3s to be less than 3:1 if possible. The greater the ratio, the more inflammation occurs, which will make recovery after surgery more difficult and can lead to other health complications.

Examples of foods with good Omega 6 to Omega 3 Ratios (Less than 4): **Butter**, **Cream Cheese**, **Salmon Fat**, **FlaxSeed Oil**, **Canola Oil**, **Grass Fed Beef**, **Walnuts**, **Lamb**, **Venison**, **Fish Roe**, **Oysters**, **Sardines**, **Trout**, **and Herring**

The Fish sources have the lowest ratios

Fried Foods are very high in Omega 6s and Trans Fats

Vegetable and seed oils tend to be very high in Omega 6s



🗱 Baptist Health

Serving Sizes of Different Foods

PROTEIN	Beef	3oz = about 130 Calories (Eye of Round) 23g Protein 3oz = about 220 Calories (Tri Tip) 26g Protein					
	Chicken/Turkey	3oz = about 126 Calories (3oz = about 177 Calories ("	, .				
	Fish/Shellfish		3oz = 80 Calories (Orange Roughy) 16g Protein 3oz = 200 calories (Salmon) 27g Protein				
	Pork	3oz = 120 Calories (Tender 3oz = 173 Calories (Sirloin					
	Plant-Based	2oz = 43 Calories (Tofu) 4g 2oz = 290 Calories (Pump					
NON-STARCHY VEGETABLES	¹ / ₂ Cup Cooked or 1 Cup Raw = 30 Calories, 4-6g Carbs, 3g Fiber, 0.5-2g Protein						
WHOLE FRUITS (15G CARBS)	Apple 4oz or ½ cup sliced = 65 CaloriesBanana ½ = 55 CaloriesGrapes ½ cup = 60 CaloriesPeach 1 medium = 60 CaloriesNectarine 1 medium = 60 CaloriesOrange 1 Small = 60 CaloriesStrawberries 11 medium = 66 CaloriesCherries ½ cup = 50 Calories						
STARCHY VEGGIES AND STARCHES	Grains, Unsweetened Cereals, Pasta ¼-½ cup = 80 Calories, 15-30g Carbs B eans, Lentils, Peas ¼-⅓ cup = 80 Calories, 15g Carbs Starchy Veggies ½ cup = 80 Calories, 15g Carbs						
		Sec. 1					





Healthy Eating Guidelines

Choose "Whole Foods" as the main foods you consume, and supplement with protein shakes or other foods as needed. Whole Foods means food that has minimal processing and is free from additives and artificial substances. If a food doesn't grow out of the ground in the form you consume it, or doesn't eat something else, then it is most likely not a whole food. So animal products, fruits, vegetables, tubers, nuts and legumes all count as whole foods.

Limit foods with "Added Sugars."

These foods tend to be inflammatory, worsen insulin resistance, and add excess calories.

Limit Fried Foods. These foods tend to be cooked in high Omega 6 vegetable oils, are inflammatory, and add excess calories. The oils the foods are cooked in are heated and reheated many times, which causes the oil to "oxidize" which can increase the risk for heart disease, and cancer.

Limit Flours. The foods that contain flour (bread, pasta, cake, etc) tend to be nutrient poor, and are very high in calories. They can also "gum-up" your stomach after surgery and take space away from better quality foods.

Limit Alcohol. Alcohol is absorbed into your blood much faster after surgery. Alcohol is also high in calories and low in nutrients. It is best to avoid alcohol altogether.





Common Names for Sugar

"Sugar-free" = foods with < 5g of sugar per serving

Ingredients are listed from most to least. Choose products that do not have sugar listed as the first 5 ingredients.

Sugar called by other names besides "sugar":

Corn syrup	Honey
High fructose corn syrup	Molasses
Corn sweeteners	Turbinado
Dextrose	Levulose
Fructose	Raw sugar
Glucose	Granulated sugar
Dextrose	Confectioner's sugar
Sucrose	Brown sugar

Sugar alcohols or "sugar replacers": They are commonly used in sugar-free items. Eating too much food with sugar alcohol could cause stomach cramps. **There are 2.6 calories per gram of sugar alcohol.**

Sorbytol	Lctitol
Xylitol	Erythritol
Mannitol	Isomalt
Maltitol	

Artificial sweeteners and natural sugar substitutes

Aspartame (NutraSweet, Equal)	Tagatose
Saccharin (Sweet'n Low)	Cyclamate (Sugar Twin, Sucraryl)
Sucralose (Splenda)	Truvia
Acesulfame-K	Stevia
Neotame	Monk Fruit

Baptist Health

Reading Nutrition Labels

You should understand nutrition labels so you can make smart choices about the foods you eat. Be aware of how big a serving size actually is, because it is typically smaller than how much we normally eat. It will also help you avoid nutrients of concern, like high fat and high carb foods.

8 servings per container — Serving size 2/3 cup	(55g)	
Amount per serving Calories 2	30	
	y Value*	
Total Fat 8g	10%	
Saturated Fat 1g	5%	[
<i>Trans</i> Fat 0g		
Cholesterol Omg	0%	
Sodium 160mg	7%	
Total Carbohydrate 37g	13%	
Dietary Fiber 4g	14%	
Total Sugars 12g		
Includes 10g Added Sugars	20%	
Protein 3g		
Vitamin D 2mcg	10%	
Calcium 260mg	20%	
Iron 8mg	45%	
Potassium 240mg	6%	

If you ate the whole box, you would have to multiply all the numbers on this label by 8.

Amount that 1 serving equals

The total calories per each serving size. If you do 2 servings, double the number. We want less than 300 calories per meal/snack.

The amount of fat in 1 serving. 1g fat = 9 Calories

The amount of carbs in 1 serving. 1g carbs = 4 Calories

This is the amount of fiber per serving. We want 25g or more daily.

The amount of sugar in 1 serving. Remember: added sugars raise our blood sugar, and make weight loss more difficult. Aim for less than 5g per serving.

The amount of protein in 1 serving. 1g protein = 4 Calories

Amount of different vitamins and minerals in a food and how much they contribute to your daily recommended intake



Reading Ingredient Labels

Typically found under or to the side of the Nutrition Label, the **Ingredient Label** shows all ingredients used in the food item, and lists potential allergens under the ingredient list. The list sorts ingredients from greatest quantity used to least.

Tip: Try to make sure Sugar (page 30), Vegetable or Seed Oils are not the first 5 ingredients on the list!

On this list, Sugar makes up the 1st ingredient, and Vegetable Oil is the 3rd!

INGREDIENTS: SUGAR, UNBLEACHED ENRICHED FLOUR (WHEAT FLOUR, NIACIN, REDUCED IRON, THIAMINE MONONITRATE {VITAMIN B1}, RIBOFLAVIN {VITAMIN B2}, FOLIC ACID), HIGH OLEIC CANOLA AND/OR PALM AND/OR CANOLA OIL, COCOA (PROCESSED WITH ALKALI), HIGH FRUCTOSE CORN SYRUP, LEAVENING (BAKING SODA AND/OR CALCIUM PHOSPHATE), CORNSTARCH, SALT, SOY LECITHIN, VANILLIN - AN ARTIFICIAL FLAVOR, CHOCOLATE.

CONTAINS: WHEAT, SOY,



Portion Control Using Common Items







3 ounces of meat = deck of cards

1/2 cup pasta or rice = light bulb

1 cup fruit = baseball





1 baked potato = computer mouse



1 cup yogurt = baseball

FLUID:	WEIGHT:
¼ tsp. = 1 mL	1 oz = 28 g
½ tsp. = 2 mL	4 oz = ¼ lb = 115 g
1 tsp. = 5 mL	8 oz = ½ lb = 230 g
1 Tbsp. = 3 tsp or 15 mL	12 oz = ¾ lb = 340 g
2 Tbsp. = 1fl oz. or 30 mL	16 oz = 1 lb = 454 g
¼ cup = 2 fl oz. or 60 mL	2.2 lbs = 1 kg
½ cup = 4 fl oz. or 120 ml	
³ ⁄ ₄ cup = 6 fl oz. or 180 mL	
1 cup = 8 fl oz. or 240 mL	



Template to Create a Balanced Meal Plan

For breakfast:

2-3 oz. lean protein + 1 cup non-starchy veggies OR fruit

+_____

For lunch:

2-3 oz. lean protein + 1 cup non-starchy veggies

_____+ _____+ _____+ _____

For dinner:

2-3 oz. lean protein + 1 cup non-starchy vegetables

_____+____+_____+______

Snacks:

2-3 oz. lean protein OR ½ cup non-starchy veggies OR fruit

_____+ _____+ ______+

_____+____+_____+_____



Bariatric Pre-Op Shopping List -Recommended Items

- Chewable vitamins
- Protein shakes (your taste preferences may change after surgery so you may not want to buy protein shakes by the case).
- Reusable water bottle
- Blender or Food Processor (recommended for full liquid diet)
- Salad-size plates (8-8.5 in)
- Measuring cups and spoons
- Silicone ice-cube tray (to freeze small portions of pureed food) or small food storage containers and freezer bags
- Crock-pot (to prepare softer meats like chicken breast)
- Food scale to measure food accurately
- Herb and spice blends Spices will make your protein meals more flavorful during the post-op progression. Exercise caution when using hot sauces or cayenne pepper.
 Spicy foods after surgery may not be tolerated well.





Vitamins

NUTRIENTS	RECOMMENDED DOSES TO PREVENT DEFICIENCY	COMMENTS
Vitamin A	5,000-10,000 IU * 1,500-3,000 mcg	* After bypass or sleeve 10,000 IU after duodenal switch
Vitamin D3	3000 IU (75 mcg)	Total from all sources (multi-vitamins, calcium supplements)
Vitamin E	15 mg	
Vitamin B1	12 mg	After all bariatric procedures
Folate	400- 800 mcg	Women of childebearing age: 800-1000 mcg
Vitamin B 12	350-500 mcg	After all bariatric procedures
Vitamin K	90-120 mcg* 300 mcg**	 * After bypass and sleeve ** After duodenal switch
Calcium	1,200-1,500 mg* 1800- 2400 mg**	From all sources * After bypass and sleeve ** After duodenal switch
Iron	18 mg male 45- 60 mg female	After all bariatric procedures
Magnesium	Quantity contained in a multi- vitamin that "contains magnesium"	
Selenium	2 mcg/kg/day	
Zinc	8- 22 mg	16-22 mg for duodenal switch
Biotin	600-2,500 mcg	Can interfere with certain labs and alter test results. Should be stopped 48 hours before any lab tests
Copper	1-2 mg	1 mg for every 8-15 mg of zinc (sleeve/bypass) 2 mg for duodenal switch

There are a few vitamin options available and recommended for bariatric supplements that would meet all guidelines of the American Society for Metabolic and Bariatric Surgery (ASMBS).

BRAND	NAME	DAILY SERVING SIZE	MUST ALSO PURCHASE
Bariatric Advantage	Advanced EA Multivitamin	2 chewable tablets PLUS 2-3 calcium doses of 500 mg each	Calcium with vitamin D3: Calcium Chewable or Calcium Chewy Bites or Powder Mix Calcium
BariMetrs BariMetrs BariMetrs Chewable	Multivitamin with iron	2 tablets a day PLUS 2-3 tablets of calcium	Calcium
Celebrate Network Septem Muth-Canada Dissy Septem So Celebrate	Multi-Complete 45	3 capsules or 2 tablets PLUS 2-3 calcium doses of 500 mg each	Calcium PLUS 500 Chewable or Calcium Soft Chews
Celebrate	Multi-Complete Restrictive 45	1 capsule or 1 tab per day PLUS 2-3 calcium doses of 500 mg each	Calcium PLUS 500 Chewable or Calcium Soft Chews
Bariatric Fusion	Complete Chewable	4 chewable tablets per day OR 2 chewable tablet per day PLUS 3 Calcium Soft Chews and 1 Iron Soft Chew	N/A Calcium Soft Chews Iron Soft Chews

You will need to take multivitamin-mineral supplements every day for the rest of your life.



Protein Shakes and Powders

You will drink protein shakes during the pre-op and post-op phase. Start tasting various protein shakes and powders and pick the ones you like. Remember that your taste preferences may change after surgery. Protein shakes and powders should meet the following criteria:

- 20-40 grams of protein per serving
- 100-200 calories
- Less than 5 grams of carbohydrates

"Ready to drink" protein shakes options include (not limited to these):

BRAND	CALORIES	PROTEIN GRAMS	SUGAR GRAMS	FIBER GRAMS
Premier Protein	160	30	1	3
Protein 20	60	15	0	0
READY Protein Water	70	15	0	0
Bariatric Advantage Clearly Protein	80	20	0	0
Orgain Organic Protein Shake	150	26	0 Erythritol 7g	2
Healthyshot, protein and amino acid solution (for renal patients)	100	24	2	0



The protein shakes that are NOT recommended: Boost, Ensure, Glucerna, Atkins, or Special K shakes.

These shakes are low protein and high sugar or high fat.

Whey Protein Powder options (not limited to these):

BRAND	SERVING SIZE	CALORIES	PROTEIN GRAMS	SUGAR GRAMS	FIBER GRAMS
Premier Protein	1 pouch (41g)	150	30	1	1
Bariatric Advantage High Protein Meal Replacement	1 pouch (44g)	150	27	0	6
Celebrate High Protein Meal Replacement	2 scoops Or 1 single serving package	130-170	24-27	0	5-7
Bariatric Fusion Meal Replacement	2 scoops	150	27	<1	4

Egg and Plant-Based Protein Powder options (not limited to these):

BRAND	SERVING SIZE	CALORIES	PROTEIN GRAMS	SUGAR GRAMS	FIBER GRAMS
Orgain Organic Plant- Based protein Powder	2 scoops	150	21	0 Erythritol 5g	2
Naked Pea Protein	2 scoops	120	27	2	0
Wonderlife Egg Protein Powder	1 scoop	88	20	0	0





Bariatric Pre-Op Phase (Liver Shrinking Phase)

The following phase will begin up to 2 weeks prior to your surgery date as specified by your surgeon or dietitian. This phase is to help shrink your liver which may help improve the technical aspects of surgery and improve co-morbidities. This phase will also help prepare you for the post-op clear liquid and full liquid phases.

Please drink three to four 8-12 oz. protein shakes daily. Choose protein shakes that contain:

- 100-200 calories
- 20-40 grams of protein
- Less than 5 grams of carbohydrate

The protein shake options include Premier Protein, Slim Fast High Protein, Isopure Protein, Bariatric Advantage Meal Replacement, and Protein20 protein infused water. Supplement with 6 oz. per hour of sugar free clear liquids and sugar-free full liquids between the protein shakes. The total minimum daily volume of fluids is 64 oz. Limit your calorie intake to 1200 to 1500 per day. Examples of sugar-free clear and full liquids are:

- Fat free broths (chicken, beef, and vegetable)
- Flavored sugar-free Jell-O (no fruit chunks added)
- Decaffeinated and non-carbonated beverages (coffee, tea, and unsweetened juices)
- V-8 vegetable juice and tomato juice
- Sugar-free flavored waters (Crystal Light Pure Fitness, Very Fine Water, Vitamin water, Zero, Powerade Zero)
- Unsweetened popsicles
- Fat-free, strained, cream soups: Campbell Healthy Request Cream of Mushroom, Tomato soup, and Cream of Chicken
- Skim/Fat Free milk
- Sugar-free pudding
- Low calorie fruit smoothies (Ask for no sugar added if not making at home)
- Low fat plain yogurt

Starting physical activity prior to surgery

EXERSICE	TIME	FREQUENCY
Cardio exercises: Walking, Cycling, Swimming, Stair Climbing	15-30 minutes	3 times per week with 1 day of rest in between
Strength training: Weightlifting, Bodyweight Exercises, Yoga	15-30 minutes	2-3 times per week with 1 day of rest in between



Pre-Op Phase (Liver Shrinking) Meal Examples

TIME OF DAY	OPTION #1: PROTEIN SHAKE PHASE		OPTION #2: FULL LIQUID PHASE	
7am	6oz Premier Protein Shake		6oz Plain Greek Yogurt	
8am	4oz Water		4oz Water	¥
9am	4oz Water		4oz Water	Pacific
10am	6oz Premier Protein Shake		8oz Beef Bone Broth	BOTH
11am	4oz Water		4oz Water	1000
12pm	4oz Water		4oz Water	
1pm	6oz Premier Protein Shake		8oz Blended Cream of Potato Soup	Campbells
2pm	4oz Water		4oz Water	400
Зрт	4oz Water		4oz Water	
4pm	6oz Premier Protein Shake		6oz Premier Protein Shake	
5pm	4oz Water		4oz Water	
6pm	4oz Water		4oz Water	Proti-Thin
7pm	6oz Premier Protein Shake		8oz Proti-Thin: Italian Tomato Soup	Italian Tomato Soup Mix
8pm	4oz Water		4oz Water	and an excellent
9pm	4oz Water		4oz Water	
10pm	6oz Premier Protein Shake		6oz Premier Protein Shake	
Total Fluid: Total Protein: Total Carbs:	64-76oz Water 90grams Protein 15grams Carbs		60-66oz Water 74grams Protein 32grams Carbs	



Phase 1 Clear Liquids / Protein Drinks (Post-Op Days 1-3)

- Once you can tolerate ice chips you will move to clear liquids.
- Goal: 4 ounces every hour (64 ounces per day) as tolerated

If you cannot meet your fluid goals, notify your nurse

- No carbonated beverages, fruit juice, alcohol, straws, or chewing gum.
- Drink 1 ounce (1 medicine cup) every 15 minutes but if you develop nausea try 1 ounce every 30 minutes. Stop when you feel full. Signs of fullness: hiccups, runny nose, burping, sneezing, and eyes watering.
- Low/No Sugar Fluids
- Keep fluids with you at all times.

Examples of clear liquids:

Broth or bouillon, sugar free Jell-O, decaffeinated coffee/tea, protein waters, sugar free popsicles, G2, Propel, herbal tea without caffeine or sugar, sugar free Kool-Aid, Powerade Zero, Gatorade Zero, Crystal Light, Diet Snapple (caffeine free). **No acidic foods** (tomatoes, lemons, orange, lime) recommended for 4 months after surgery. (Can cause upset stomachs and heartburn)



Phase 1 Physical Activity

EXERSICE	ТІМЕ	FREQUENCY
Walk in the room or down the hallway	As tolerated	As Frequently as Possible



Finding it hard to drink enough water?

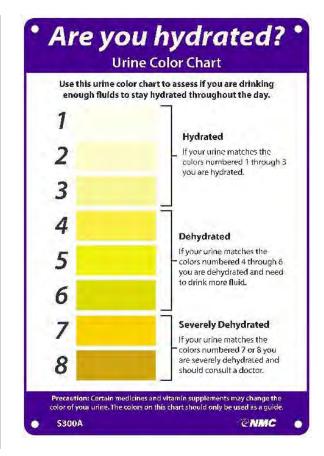
The most important things to do after surgery are to remain hydrated and walk!

Hydration:

We recommend you drink 64 ounces of fluids every day. To accomplish this, you will have to sip fluids all day long!

Symptoms of Dehydration:

- Less urine than usual or urine that is darker in color
- Dry mouth
- Dizziness and lightheaded
- Fatigue
- Headache
- Constipation
- Increased heart rate greater than 120
 beats per minute for four hours
- Systolic blood pressure (the first number) less than 90



If you start feeling any of these symptoms, call the office (501) 227-9080.

Try these tasty tips!

Add flavor with fruit

- Add lemon or lime water flavor enhancers for a tart flavor
- Add a few frozen berries such as blueberries or raspberries (Starting 4 months after surgery)
- Try strawberries and fresh mint (Starting 4 months after surgery)

 Cucumbers for some freshness - Add 6 to 8 slices of cucumber to a pitcher of water. Refrigerate, and strain before serving.

For a little spice - Add grated fresh ginger and lemon wedges.

Create ice cubes with some zest - Use a fine grater and zest your favorite citrus fruit. Add a little zest to each slot of an ice cube tray, fill with water, and freeze. Add to your water once frozen.



Phase 2 Full Liquids / Protein Drinks (Post-Op Days 3-14)

Starting on Day 3, can start adding full liquids as tolerated.

This phase adds some low-fat dairy products and pureed soups (thin, strain, or blend, no chunks)

Serving size of food:

1-2 Tbsp. of full liquids every 4 hours / clear liquids and protein shakes in between

• Start at 1 Tbsp. then increase to ½ cup as tolerated.

Note: different foods may affect how much volume is tolerated.

- Amount of liquids: 2-4 medicine cups or 2-4 oz. per hour
- Total amount of fluids: 64+ oz. (Fluid is Top Priority During This Phase, Protein Comes Second!)
- Eat very slowly and stop as you feel full
- Protein drinks count 75% towards your daily fluid goal. (A 12 ounce shake would count towards 9oz of your fluid goal)

- **IF TOLERATED,** Meet the protein goal of 70-90 grams per day by drinking 3-4 high protein low-sugar drinks per day. You may mix protein powder with water or skim milk.
- After post-op appointment start taking multivitamins (chewable, powder, or liquid) adding 1 tablet a day until reaching a full daily dose and stay on this maintenance dose for the rest of your life. (Crushing chewable vitamins and mixing with water could help with vitamin intake)

Examples of foods: fat-free plain or light vanilla Greek yogurt, Oikos Triple Zero Blended Greek yogurt, fat-free plain Icelandic yogurtskyr, sugar- free pudding, sugar-free custard, cream or strained soups (butternut squash, split pea, carrot, pumpkin, cauliflower), high protein/ low calorie shakes.



Phase 2 Physical Activity

EXERSICE	TIME	FREQUENCY	INTENSITY
Walk	20 minutes	2 times / day, every day	As tolerated
Strength exercise	Do not start until medical clearance		



Phase 2 Sample Meal Plan

Consume 12+ oz water between meals and shakes, and after last meal of the day

Meal 1:

1 Tbsp.-1/2 cup Oikos triple zero yogurt

wait 30 minutes

6 ounces protein shake

Meal 2:

1 Tbsp.-½ cup Progresso Style Black Bean and Vegetable soup (blend prior to consuming) *wait 30 minutes*

6 ounces protein shake

Meal 3:

1 Tbsp.-½ cup Campbell's Southwest Style Chicken Chili (blend prior to consuming)

wait 30 minutes

6 ounces protein shake

Meal 4:

1 Tbsp.-½ cup Healthy Request Tuscan Style Lentil soup (blend prior to consuming)

wait 30 minutes

6 ounces protein shake



Choose soups that contain these nutrients per serving:

- Less than 150 calories
- Less than 3.5 grams fat
- Less than 25 grams carbohydrate
- Greater than 3 grams fiber
- Greater than 5 grams protein

Soup examples that should not have to be blended (these contain between 7-20 grams of protein): Bariatric Pal - Chicken Bouillon, Sam's Choice - Bone Broth, Bariatric Choice -Cream of Chicken Soup

High Protein Soups that may need to be blended (these contain between 7-20grams of protein): Bariatric Pal - Bacon & Cheese Soup, Power Provisions - Chicken Vegetable Bone Broth Soup, WonderSlim Protein Soup - Chicken Vegetable Cream Soup, HeathSmart - Cream of Mushroom High Protein Soup

Phase 3 Soft Foods (Post-Op Weeks 3-4)

- Start pureed blended foods high in protein
- Goal is to add protein. Protein goal amount is 70-90 grams per day.
- Have protein at all meals and snacks
- Eat protein first; carbohydrates second.
- Drink 1-3 high protein, low-sugar drinks per day
- Use blender to mash foods, freeze in a silicone ice-cube tray
- If you experience vomiting, diarrhea, cramping, step back to Phase 2 and try to figure out the cause (eating too fast or too much, eating the wrong foods, not chewing thoroughly, drinking during the meals)

Serving size of food:

Total volume per eating period: 2-4 Tbsp.

Choose 1 per meal from the list of high protein foods:

- Plain Greek yogurt or Icelandic yogurt skyr
- Low-fat cottage cheese
- Low-fat ricotta or mozzarella cheese
- Eggs (poached or scrambled)
- Canned tuna or salmon mixed with low fat
 mayo or plain yogurt

Choose 1 per meal from the list of non-starchy vegetable group:

- Softly cooked (steamed, no seeds and skin) vegetables- carrots, beetroot, leafy green, green beans, bell peppers, asparagus, eggplant, parsnip, cucumbers, yellow turnip, and spinach
- Low salt canned vegetables

Please be very cautious with very highly fibrous foods:

- Vegetables: green peas, broccoli, turnip greens
- Lentils, black beans, split peas (these are also high calorie)

Phase 3 Physical Activity

EXERSICE	TIME	FREQUENCY	INTENSITY	STRENGTH EXERCISE
Walk	15-30 minutes	4 times per week	Increase the time by 5 minutes each session until reaching a goal of 45 minutes	May begin with doctor's approval. Add 2 days of light weights. Day 1: Upper body, 15-30 minutes Day 2: Lower body, 15-30 minutes

Create your daily menu using the following template:

Meal 1	Protein	1-2 Tbsp.
Wait 30 min	Fluid (high protein shake)	4 oz (15-20 g)
Meal 2	Protein	1-2 Tbsp.
Wait 30 min	Fluid (high protein shake)	4 oz (15-20 g)
Meal 3	Protein Non-starchy veggie	1-2 Tbsp. 1-2 Tbsp.
Wait 30 min	Fluid (high protein shake)	4 oz (15-20 g)
Meal 4	Protein Non-starchy veggie	1-2 Tbsp. 1-2 Tbsp.
Wait 30 min	Fluid (high protein shake if protein goal is not met)	4 oz (15-20 g)
Meal 5	Protein Non-starchy veggie	1-2 Tbsp. 1-2 Tbsp.
Wait 30 min	Fluid (high protein shake if protein goal is not met)	4 oz (15-20 g)
Meal 6	Protein Non-starchy veggie	1-2 Tbsp. 1-2 Tbsp.
Wait 30 min	Fluid (high protein shake if protein goal is not met)	4 oz (15-20 g)





Phase 3 Sample Meal Plan

Meal 1:

Soft Poached Egg 2 tablespoons soft cooked carrots

Meal 2:

2 tablespoons ground turkey2 tablespoons soft cooked green beans

Meal 3:

1-2 ounces deli chicken2 tablespoons cooked squash (no seeds)

Meal 4:

2 tablespoons tuna salad2 tablespoons sauteed spinach

Meal 5:

2 ounces Turkey Chili w/ beans

Meal 6:

4 ounces chocolate protein, banana smoothie

Protein Content for Different Food Groups

FOOD GROUPS	GRAMS OF PROTEIN
Protein	 Animal Source (Complete Proteins): Egg = 6 g 1 oz. Fish = 7g 1 oz. Meat = 7g 1 oz. Poultry = 7g 1 d cup Cottage Cheese = 7g 3 oz. Greek yogurt = 9g Plant Source: ¼ cup Tempeh = 7g ¼ cup Tofu = 5g ¼ cup Beans = 3.5g (avoid for first 4 months after surgery)
Vegetables	¼ cup Veggies = 0.5-1g
Fats	Nuts = 6-8g per 2 oz. (Very High Calorie, avoid for first 6 months after surgery)



Phase 4 Soft /Chopped Foods (Post-Op Weeks 5-8)

Serving size of food:

- Total volume per eating period:
 4-8 tablespoons (2-4oz)
- Add lean meats (no skin) which would be easier to tolerate. Use cooking techniques like crock-pot, slow cooker, foil-cooking, and cooking with a small amount of healthy polyunsaturated fats-oils.
- The protein goal: 70-90 grams per day.

Important: Aim to get most of your protein from food sources instead of high protein drinks.

- Introduce one food a day and chew thoroughly.
- Increase protein content in foods by adding Greek yogurt or 1 scoop of protein powder to foods like pudding, pureed vegetable soups, cutlets, salmon patties, etc.

- Hydration goal: at least 64 oz. per day of sugar free, non-carbonated, caffeine-free drinks.
- Continue chewing 20-30 times per bite
- Avoid bread, white rice, tortillas, and pasta for 12 months, and strictly limit these foods for lifetime.
- Red meat, dry chicken breast, turkey, fibrous fruits and vegetables could be difficult to digest. Ground meats are better tolerated. In general, red meat is NOT recommended for 4 months after surgery. Continue soft vegetables.



Phase 4 Physical Activity

EXERSICE	TIME	FREQUENCY	INTENSITY	STRENGTH EXERCISE
Walk or start other cardio exercises, with doctor's approval, such as swimming, aerobics, stair climbing, rowing	30-45 minutes	5-6 times per week	Increase the time by 5 minutes each session until reaching a goal of 45 minutes	Add a 3rd day of light weights. Alternate upper body and lower body each day, 15-30 minutes as tolerated.



Create your daily menu using the following template:

Meal 1	Protein Non-starchy veggie
Wait 30 min	Fluid
Meal 2	Protein Non-starchy veggie
Wait 30 min	Fluid
Meal 3	Protein Non-starchy veggie
Wait 30 min	Fluid
Meal 4	Protein Non-starchy veggie
Wait 30 min	Fluid (high protein shake if protein goal is not met)
Meal 5	Protein Non-starchy veggie
Wait 30 min	Fluid (high protein shake if protein goal is not met)
Meal 6	Protein Non-starchy veggie
Wait 30 min	Fluid (high protein shake if protein goal is not met)













Phase 4 Sample Meal Plan

Meal 1:

1 Poached Egg 2 Tablespoons Salsa

Meal 2:

Chicken Salad Green Beans

Meal 3:

Shaved Deli Meat Roasted Carrots

Meal 4:

Ham Salad Spinach

Meal 5:

Baked Salmon Baked Asparagus

Meal 6:

Turkey Chili with peppers and carrots









Lifetime Eating Phase (Post-Op Week 9+)

- You may now add raw vegetables and other meats.
- Add new food gradually according to how well you tolerate it.
- Introduce one new food at a time to rule out intolerances.
- Have at least 3 meals/snacks daily, and supplement with protein shakes as needed.

Protein (70-90 Grams/day):

Meat, Poultry, Fish, Egg, Dairy, Beans, Tofu, Tempeh

Non-Starchy Veggies

Carrots, Green Beans, Asparagus, Broccoli, Peppers, Squash, Etc.

Fruits and Starchy Veggies

Protein should be top priority, consumed first, and be 1/2 your plate.

Non-Starchy Veggies should be consumed second and be 1/3 - 1/2 of your plate.

Fruits/Starchy Veggies/

Other Foods should be less than 1/6 of your plate and ONLY consumed if still hungry.

Order of Importance:

- 1. Protein
- 2. Non-Starchy Veggies
- 3. Fruits
- 4. Starchy Veggies
- 5. Grains & Other Foods



Lifetime Phase Sample Meal

Combine 2-3 oz of lean protein and $\frac{1}{2}$ cup of non-starchy veggies. Examples of meals:

ТІМЕ	MEAL PLAN #1		MEAL PLAN #2	
7am	2 Egg, 1 oz. Bell Pepper and 1oz Onion Omelette		8 oz. Chocolate Banana Strawberry Protein Smoothie	
8am	6 oz. Water		6 oz. Water	
9am	6 oz. Water		6 oz. Water	
10am	6 oz. Greek Yogurt	100 A	2 Pc. String Cheese	
11am	6 oz. Water		6 oz. Water	
12pm	6 oz. Water		6 oz. Water	
1pm	3 oz. Grilled Chicken 4 oz. Salad		1 cup Wendy's Chili	
2pm	6 oz. Water	21-655	6 oz. Water	
Зрт	6 oz. Water		6 oz. Water	COODER WEINING
4pm	2 oz Deli Ham, 1oz Swiss Cheese and Tomato Lettuce Wrap		P3 Turkey Ham and Cheese	P3 Partale
5pm	6 oz. Water		6 oz. Water	TURKEY
6pm	6 oz. Water	1 and	6 oz. Water	CHEDDAR
7pm	3 oz. Grilled Salmon ½ cup Steamed Asparagus	2000	3 oz. Baked Pork Loin ½ c Cooked Broccoli	
8pm	6 oz. Water		6 oz. Water	
9pm	6 oz. Water		6 oz. Water	
10pm	Premier Protein Shake		Premier Protein Shake	
Calories Fluid Protein Carbs Fat	1012 Calories 66-74 oz. Fluid 125g Protein 32g Carbs 50g Fat	Permits Protein Protein Protein	991 Calories 78-84 oz. Fluid 121g Protein 57g Carbs 32g Fat	Premiles Premier Protein Big

Protein:

Beef, Chicken, Turkey, Salmon, Tuna, Tilapia, Halibut, Shrimp, Scallops, Clams, Crab Meat, Veal, Pork, Lamb, Ham, Eggs, Cottage cheese, String cheese, Yogurts, Cow's milk, Cheese, Tofu, Edamame, Tempeh.

Non-Starchy Vegetables:

Broccoli, Spinach, Zucchini, Cauliflower, Cabbage, Asparagus, Green Beans, Eggplant, Kale, Lettuce, Cucumber, Tomato, Bell Pepper, Onion, Celery, Squash, Mushrooms, Turnips, Parsnips.

Complex Carbohydrates:

Beans, Lentils, Potato, Sweet potato, Peas, Chickpeas, Yams, Butternut Squash, Fruit, Oatmeal, Quinoa, Millet, Buckwheat, Brown Rice, Teff, Barley.

Foods to Avoid:

Sweets, fried food, bread, pasta, tough meat, processed foods, rice.





Phase 5 Physical Activity

EXERCISE	TIME	FREQUENCY	INTENSITY	STRENGTH EXERCISE
Walk or start other cardio exercises pending surgeon approval: swimming, rowing, aerobics.	15-30 minutes	3-5 times per week	Increase the time by 5 minutes each ses- sion until reaching a goal of 45 minutes	May begin with doctor's approval. Add 3 days of light weights. Day 1: Upper body, 15-30 minutes Day 2: Lower body, 15-30 minutes



Peaches and Cream Protein Shake



280 Calories24 g Protein45 g Carbohydrates1 g Fat

INGREDIENTS

- 1 cup skim Fairlife milk with 1 scoops vanilla protein powder OR
- 1 bottle ready- to -drink protein drink (vanilla or peaches and cream flavor would be best)
- 1 cup fresh or frozen peaches
- $1\frac{1}{2}$ tsp vanilla extract
- 2 handfuls spinach
- Ice

- 1. Place all ingredients into the blender and blend until smooth.
- 2. If consistency appears to be too thick or is hard to blend, add a tablespoon of water at a time until desired consistency is achieved.

Bariatric Surgery Patient Binder

RECIPES

Egg Muffins



- 8 Servings 287 Calories 18 g Protein 5 g Carbohydrates
- 20 g Fat

QUICK TIPS

You can try all types of veggies and herbs in your egg muffins. Spinach, red and green bell peppers, purple onions, mushrooms, tomatoes, jalapenos, salsa, and cilantro are all great options.

INGREDIENTS

- 1 cup ham, turkey bacon, or turkey or chicken sausage (cooked and chopped)
- 2 green onions (chopped)
- 1 can of Rotel (drained)
- 10 large eggs
- 6 ounces cheddar cheese or monterey jack cheese (shredded)
- 1/2 tsp. garlic powder
- ¹⁄₄ tsp. cayenne
- 1/4 tsp. black pepper
- ½ tsp salt
- ¼ cup milk

- In a large bowl, combine eggs, milk, salt, pepper, garlic powder and cayenne. Whisk together until combined.
- 2. Spray a 12-count muffin pan with non-stick cooking spray, being careful to completely coat so eggs don't stick. Fill each muffin cup with meat, onions, a teaspoon of Rotel, and cheese. Carefully pour eggs into the muffin cups until half full. Let the eggs settle, and then add a little more until muffin cups are almost full. Once the cups are filled, take a fork and lightly stir each cup to mix everything together.
- 3. Bake at 375[°] F for 20-25 minutes, depending on oven. Remove from oven and let sit in the muffin pan for a few minutes.
- 4. Run a sharp knife around the edge of the muffin cups and carefully remove muffins from the pan.



Seasoned Sauce

This is good to mix with meat to give it more flavor.



4 Servings

34 Calories

- 3 g Protein
- 5 g Carbohydrates
- 0 g Fat

INGREDIENTS

- 1/2 c. nonfat plain greek yogurt
- Add your favorite seasoning such as Italian, taco, or fajita mix
- May add a little broth to thin it if needed

DIRECTIONS

Stir all ingredients together

Ranch Dip

This dip is great with raw vegetables such as carrots or broccoli.



4 Servings

- 33 Calories
- 4 g Protein
- 2 g Carbohydrates
- 0 g Fat

INGREDIENTS

- 1 small carton of greek nonfat plain yogurt.
- Add in 2-3 tsp. of dry ranch seasoning packet.

DIRECTIONS

Stir all ingredients together

Tzatziki Sauce

Good to use as a meat sauce or as a vegetable dip in the later phases. Can also eat with Whisps Cheese Crisps



4 Servings

- 59 Calories
- 8 g Protein
- 7 g Carbohydrates
- 0 g Fat

INGREDIENTS

- 1 cup nonfat plain greek yogurt
- 1 cucumber
- 2-3 cloves garlic
- Juice from 1 lemon
- 1 Tbsp. dill weed

DIRECTIONS

Scoop out seeds of the cucumber and then shred. Once shredded, pat dry to remove the excess water from the cucumber. Combine all ingredients in a food processor or blender. Blend until smooth. Enjoy on meat or as a dip for veggies in the later phases.

RECIPES

Turkey Meatballs



339 Calories 33 g Protein 9 g Carbohydrates 17 g Fat

QUICK TIPS

Serving Size: 2 meatballs and 1 tsp. of Everything Sauce Number of Servings: 8 Prep Time: 20 minutes Cook Time: 30 minutes

INGREDIENTS (MEATBALLS)

- 1 lb. 90% lean ground turkey
- 1 large egg
- 1 small zucchini, grated
- 1 small onion, finely diced
- 1 c. soy or tofu (optional)
- 1/4 tsp. salt
- ¹⁄₄ tsp. pepper
- ¹⁄₂ tsp. garlic powder
- 1 tsp. smoked paprika
- 1/3 c. real bacon bits
- 1/2 c. low-fat shredded cheddar cheese

INGREDIENTS (EVERYTHING SAUCE)

- ¹/₂ c. low-sugar ketchup
- ¹/₄ c. yellow mustard
- 1/4 c. low-fat mayo
- 2 tbsp. no-sugar added relish

- 1. In a large mixing bowl, combine turkey, egg, zucchini, onion, and textured vegetable protein. Mix well.
- 2. Add spices, bacon bits, and half the cheddar cheese. Mix again.
- 3. Line a cookie sheet with parchment paper. Using a tablespoon measure, scoop out heaping spoonfuls and shape into balls with your hands (mixture may be very soft) and place on a lined cookie sheet.
- Bake in the oven at 375 F for 30 minutes, or until done through. Sprinkle remaining cheese on top. Top with Everything Sauce or use it as a dipper.

RECIPES

Mediterranean-Style Homemade Vegetable Soup



DIRECTIONS

- 1. In a large pot, heat 1 tablespoon of olive oil on medium-high. Add the mushrooms and zucchini and cook for 3-4 minutes, stirring regularly.
- 2. Remove the mushrooms and zucchini from the pot.
- 3. Add another tablespoon of olive oil and add the chopped parsley stems (stems only).
- 4. Add the onions, garlic, celery, carrots, and potatoes. Stir in the spices, salt and pepper.
- 5. Cook everything on medium-high heat for 5-7 minutes, stirring regularly, until the vegetables have softened.
- 6. Add the tomatoes, bay leaves, and broth.
- 7. Bring to a boil then reduce heat down to medium. Cover and cook for 15 minutes.
- 8. Uncover and add the chickpeas and the sautéed mushrooms and zucchini.
- 9. Cook for just a few more minutes until everything is warmed through. Stir in the parsley leaves, lime zest, and lime juice.

8 Servings
316 Calories
22 g Protein
38 g Carbs
8 g Fat

INGREDIENTS

- 2 Tbsp. olive oil
- 8 oz. sliced baby bella mushrooms
- 2 medium-size zucchini, sliced into half-moons
- 1 bunch flat leaf parsley, washed, dried, stems and leaves separated, then each chopped
- 1 medium-size yellow or red onion, chopped
- 2 garlic cloves, chopped
- 2 celery ribs, chopped
- 2 carrots, peeled, chopped
- 2 golden potatoes, peeled, diced
- 1 tsp. ground coriander
- 1/2 tsp. turmeric powder
- 1/2 tsp. sweet paprika
- 1/2 tsp. thyme
- Salt and pepper
- 132-oz. can whole peeled tomatoes
- 2 bay leaves
- 6 c. or use low-sodium chicken broth or vegetable broth
- 2 15-oz. cans chickpeas, rinsed and drained
- Zest and juice of 1 lime

Bariatric Surgery Patient Binder

RECIPES

Roasted Cauliflower Soup



DIRECTIONS

- 1. Preheat the oven to 425 F.
- 2. Arrange the cauliflower florets on a large baking sheet sprayed with cooking spray; use two baking sheets if you need to. Sprinkle cauliflower with salt and pepper and drizzle with olive oil.
- 3. Roast for 45 minutes, turning over midway through.
- 4. Meanwhile, heat 2 tablespoons of olive oil in a large soup pot.
- 5. Add onion to heated oil and sauté until translucent.
- 6. Add chopped garlic, turmeric, cumin and paprika. Stir together for a few seconds until fragrant.
- 7. Add 3/4 the amount of roasted cauliflower, reserve the rest for later.
- 8. Stir to coat cauliflower well with the spices then add vegetable broth, water, and chickpeas. Bring to a simmer on medium-high heat.
- 9. Cover and cook for five minutes or until cauliflower softens as it absorbs

- 6 servings 310 Calories 14 g Protein 42 g Carbohydrate
- 11 g Fat

INGREDIENTS

- 2 heads of cauliflower, cut into florets
- olive oil
- Salt and pepper
- 1 small sweet onion, chopped
- 5 garlic cloves, chopped
- 1/4 teaspoons ground turmeric
- 2 teaspoons ground cumin
- 2 1/2 teaspoons ground paprika
- 4 cups low-sodium vegetable broth
- 1 cup water
- 1 can reduced sodium chickpeas, drained and rinsed
- 2 1/2 cups fat-free half and half
- Juice from 1/2 lemon
- 1 cup chopped fresh dill



Pan Seared Salmon with Mediterranean Kale and Quinoa



DIRECTIONS

- 1. Preheat a large heavy skillet over medium heat for 3 minutes.
- 2. Coat salmon with olive oil. Place in a skillet, and increase heat to high.
- 3. Cook for 3 minutes. Sprinkle with capers, and salt and pepper.
- 4. Turn salmon over, and cook for 5 minutes, or until browned. Salmon is done when it flakes easily with a fork.
- 5. Transfer salmon to individual plates, and garnish with lemon slices.
- 6. Cook quinoa per package directions.
- 7. Steam kale in a microwave or in a steamer basket on stovetop until just tender, about 7 to 10 minutes, depending on thickness.
- 8. Whisk together the lemon juice, olive oil, garlic, soy sauce, salt, and black pepper in a large bowl.
- 9. Toss steamed kale into dressing until well coated. Serve salmon fillet with kale and quinoa.

8 Servings 29 g Protein 25 g Carbohydrate 14 g Fat

INGREDIENTS FOR SALMON

- 4 (6 ounce) fillets salmon
- 2 tablespoons olive oil
- 2 tablespoons capers
- 1/8 teaspoon salt
- 1/8 teaspoon ground black pepper
- 1 cup quinoa
- 2 cups water or vegetable broth

INGREDIENTS FOR MEDITERRANEAN KALE:

- 12 cups chopped kale
- 2 tablespoons lemon juice
- 1 tablespoon olive oil
- 1 tablespoon minced garlic
- 1 teaspoon soy sauce

Bariatric Surgery Patient Binder

RECIPES

Chicken Sausage Skillet



3 Servings 292 Calories 21 g Protein 27 g Carbohydrate 12 g Fat

INGREDIENTS

- 1 package chicken apple sausage
- 6 oz brussel sprouts
- 6 oz broccoli
- 12 oz cauliflower rice
- 2 Tbsp minced garlic
- Sriracha
- Juice from 1/2 lemon
- 1 cup chopped fresh dill

- 1. Dice up sausage. Cook in pan on medium heat.
- 2. Add broccoli and brussel sprouts. Once vegetables have softened, add garlic.
- 3. Steam cauliflower rice. Once done, top with chicken and vegetables.
- 4. Top with sriracha. (optional)



Garlic Mashed Cauliflower



3 Servings 84 Calories 7 g Protein 15 g Carbohydrate 0 g Fat

INGREDIENTS

- 1 head of cauliflower
- garlic
- salt and pepper
- bone broth
- Tony Chachere's (optional)

- 1. Chop one large head of cauliflower into two inch pieces.
- 2. Place in a microwave safe bowl , cover with plastic wrap and microwave for 10 minutes.
- 3. Place in a blender or food processor and process until thick and creamy.
- 4. Add in minced garlic, kosher salt and black pepper for seasonings.
- Bone broth can also be added if more liquid is needed. Tony Chachere's is also nice to add for a little kick of spice.



Buffalo Chicken Zucchini Boats



- 6 Servings
- 241 Calories
- 19 g Protein
- 9 g Carbohydrate
- 15 g Fat

INGREDIENTS

- 4 zucchinis
- 1 tablespoon of olive oil
- 1/2 cup onion
- 2 cloves of garlic
- 1 lb ground chicken
- 1/2 cup buffalo sauce
- 1/2 cup of pepper jack cheese

- 1. Preheat oven to 400 F
- 2. Cut off the ends of the zucchini and slice in half lengthwise
- 3. Use a spoon to hollow out the zucchini, leaving around 1/4 inch at the bottom and sides
- 4. Place the zucchini on a large baking sheet lined with parchment paper, set aside
- 5. Add the olive oil to a large skillet, add the onion, garlic and chicken- cook 5 minutes
- 6. Add the buffalo sauce and cook for an extra 2-3 minutes. Remove from heat and spoon into the hollowed zucchini
- 7. Place in the oven for minutes, remove from the oven and top with pepper jack cheese- place back in the oven for 7 minutes
- 8. Remove from the oven and top with fresh cilantro or green onions if desired



Cauliflower Crust Supreme Pizza



8 Servings
227 Calories
17 g Protein
8 g Carbohydrat
I4 α Fat

INGREDIENTS

- 1 cauliflower pizza crust
- pizza sauce (Ragu with no added sugar) or pesto
- veggies for toppings: mushrooms, spinach, olives, tomatoes, bell pepper
- meats for toppings: pepperoni, lean hamburger beef (90/10)
- choice of cheese: mozarella, parmesan

- 1. Add sauce to the cauliflower crust and top with your favorite meat, veggie and cheese toppings.
- 2. Place in the oven and follow the instructions on the back of the cauliflower pizza crust



Banana "Gelato"

Try this guilt-free version instead: frozen blended bananas. Whipping frozen bananas in a blender turns them into a thick, rich, custardy treat.





INGREDIENTS

• 2 ripened bananas

- 1. Peel and slice a couple of ripened bananas.
- 2. Place them on a cookie sheet in a single layer and freeze for two hours.
- 3. Blend the fruit in a food processor or blender, scraping the mixture off the sides when it sticks, until it has a smooth, custardy consistency.
- 4. Serve immediately. Experiment with different flavors by adding in peanut butter, hazelnut butter or fresh berries. Eat it plain or spread over graham crackers for an open-faced ice cream sandwich.



Going Out to Eat

Food is used to celebrate special occasions and special moments with family. It is also used as a social activity. After surgery, it may be difficult to attend social functions. Rest assured, eventually you will be able to attend social gatherings, parties, and be able to enjoy it!

If you are concerned about over consuming at an event, plan your other meals out accordingly. You can be very strict with your other meals so you have more calories remaining for the event.



Tips for parties:

- Use a small plate
- Eat before you go
- Focus on socializing rather than eating.
 Walk around and mingle
- Keep a glass of water in one hand and a napkin in the other. This will stop you from mindlessly eating.
- Offer to bring a dish. Make a healthy appetizer, side salad, or low calorie dessert for everyone to enjoy.
- Eat slowly

Tips for eating at a restaurant:

- Share a meal with someone
- Order an appetizer as your main meal
- Ask for half of the meal to be put in the takeout container
- Put your fork down between bites
- Ask the server not to bring a bread basket
- Review the menu ahead of time to make sure there are healthy, balanced options
- Avoid breaded, battered, or fried foods
- Ask for dressings and sauces on the side





Some restaurants are an easier option than others.

Breakfast

- Starbucks Egg Bites
- Tropical Smoothie Fruit Smoothies (Ask for No Sugar Added)
- Panera Bread Egg White Wrap
- Cracker barrel- 2 eggs, 2 sausage patties, ½ piece of country ham- top eggs with salsa if desired.
- IHOP- egg white omelet, 2 eggs,
 2 sausage patties or turkey bacon

Fast Food

- Try soups and chili
- Try salads choose low-fat/low-calorie dressing or bring your own dressing from home

Chinese

- Choose steamed options
- Avoid all sauces as they are usually high in sugar and fat

Mexican

 Try fajitas but only eat the meat and vegetables. Avoid the tortillas and use salsa instead of sour cream and guacamole.

Italian

- Try just the meatballs
- Salads without the croutons

Steak House

- Steak may be hard to digest. You may try ordering the most tender cut such as filet mignon.
- Try having chicken or fish

Snacks on the go

- Chick-Fil-A Grilled Nuggets and Side Salad (Be aware of Calories in Dressing and Sauce) 25g Protein, 140 Calories
- Taco Bell Power Bowl "Fresco Style" (no rice) 11g Protein, 310 Calories
- Wendy's Black Bean Chili 23g Protein, 250 Calories
- Chipotle Half Burrito Bowl w/ Meat, Black Beans, Veggies, Tomato Salsa, Cheese and Lettuce 19.5g Protein, 230 Calories
- Popeye's Blackened Chicken Tenders 26g Protein, 170 Calories

Restaurant meals are typically higher in fat, sugar and calories than meals you make at home. Many high fat or sugary foods may cause dumping. Avoiding new foods at a restaurant or party can help prevent getting sick while you are out.



Physical Activity





Physical activity is encouraged and can help maintain weight loss long-term, improve your mood, sleep, and build lean muscle mass. Strength training will help build muscle, improve bone health and cause the greatest increase in your metabolism, and aerobic (cardio) exercise will help burn calories.

Recommendations:

- Increase daily activity
- Start slowly and gradually progress
- If your BMI > 35, avoid activities that would create stress on the joints such as jogging and jumping
- Do aerobic (cardio) of low to moderate intensity
- Aim to incorporate strength training 3 times or more per week
- Emphasize duration over intensity

Cardiovascular exercise (cardio): walking, swimming, water aerobics, water walking, dancing, aerobics classes, biking, stationary bike, elliptical trainer, rowing machine

Strength exercise: free weights (dumbbells), resistance bands, medicine balls, circuit machines, and yoga strength training

Lifestyle activities: march in place during TV commercials, mow the grass, rake the leaves, wash your car, wash the dishes by hand, clean the house, park further away, walk extra laps when shopping at the mall

Work activities: walk during your lunch break, keep a resistance band in your office, stand up while you're talking on the phone, take the stairs instead of the elevator

Consistency is key



Post-Op Physical Activity

A combination of two types of exercises, cardiovascular and strength training, are the most effective in toning and long-term weight management.

Day after surgery:

Once you get into your room after surgery, give yourself one hour and then start small with walking around the room.

Walk every hour while you are awake.

If you will be in your car for more than 1 hour on the way home from the hospital it is very important to make sure to stop and walk for several minutes to help reduce your risk of blood clots.

First month after surgery: walk for 3 minutes 5 times per day. For instance, if you are already doing 1 minute every hour, increase in increments of 15 seconds every few days.

Try not to sit for more than an hour without getting up and walking around.

Second month: 5 minutes 5 times per day or perform 1 bout of 25 minutes and add weekly in 3-5 minute increments.

Start with low to moderate intensity aerobic exercising such as walking. Walk three times a week for 20 minutes each time. You may also walk in a swimming pool three times per week for 20 minutes each time. Water eliminates gravity and, therefore, takes pressure off the joints. Progress slowly by adding five minutes to your activity weekly. The goal is to reach 150 minutes of moderate exercise per week: 30-40 minutes 5-6 times a week.

When cleared for full activity by your surgeon: begin doing strength training at least 3 times a week and continue cardio at least 5 times a week.

> Lunges, squats, and lifting weights are all great for strength training and building muscle mass. Sit ups, crunches, planks and other core exercises are beneficial as well for tightening and strengthening the mid section.



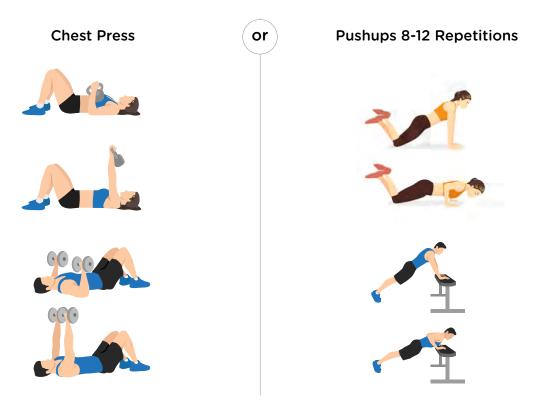




Milk Jug Workout

Do these exercises standing if possible.

Fill jugs with water, sand, coins, or gravel to whatever weight is difficult but doable for the number of repetitions given. (Can use Dumbbells if Available)



Bent Over Rows 8-12 Repetitions Each Arm (Can lean on couch or counter with off hand)



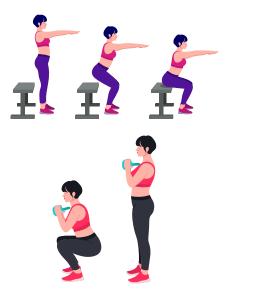




Milk Jug Workout cont.

Jug Squats, Bodyweight Squats or Sit to Stand Squats in Chair 8-12 Repetitions (Do sit to stand squats for first few workout cycles until you can tolerate added weight)

Hold the milk jug in front of your chest with both hands, your elbows close together and your hands cupping the jug. In this position, your forearms will look like a goblet. Stand with your feet hip-width apart, toes pointed slightly out from parallel. Push your hips back



to initiate the squat. Bend your knees to descend until your thighs are at least parallel to the floor or touch the seat, keeping your chest up and your weight on your heels. Keep the weight of your body in your heels and press back to standing. Repeat.

Overhead Press 8-12 Repetitions (you don't have to squat for this exercise)



Jug Hammer Curls 8-12 Repetitions Each Side





Milk Jug Workout cont.

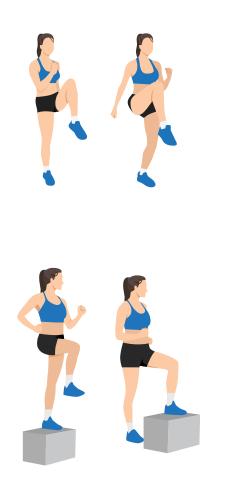
Stair Step Ups or Knee Drives 8-12 Repetitions Each Side (Can hold jug or do just body weight)

Use one step: Step up with your right foot, up with your left foot, down with your left foot, down with your right foot, up with your left foot, up with your right foot, down with your right foot, down with your left foot = 1 Repetition on each side.

Hip Bridges 8-12 Repetitions









Examples of Workout

Cardiovascular Workout

3-5 times per week (150 minutes)

- 1 minute of work followed by 2 minutes rest, repeat 5 rounds. Add a "round" each week up to 8 rounds
- 2 minutes of work followed by 2 minutes rest, repeat 5 rounds. Add a "round" each week up to 5 rounds
- 3 minutes work followed by 1 minute rest: repeat 5 rounds. Add a "round" each week up to 8 rounds
- Rest in Cardio refers to decreasing the intensity of your activity but still being active. Rest in Strength Training refers to doing no activity.

At Gym - Full Body Workout

If new to strength training, begin with 1 set of a difficult but doable weight, then gradually increase to 3-4 sets of each exercise.

Take 1-2 minutes between sets.

- Leg Press 8-12 repetitions
- Chest Press Machine/Bench Press 8-12
 repetitions
- Lat Pulls 8-12 repetitions
- Sit to Stands or Squats (with or without weight) 8-12 repetitions
- Shoulder Press Machine/Incline Press 8-12
 repetitions
- Seated Rows 8-12 repetitions
- Dumbbell Side Raises 8-12 repetitions





When you sweat, you need to drink more water.



2 Weeks Before Surgery: To Do

Medical To-Do List:

- Contact your prescribing physicians to see what medicines need to be adjusted after surgery.
- Call the clinic ASAP if you develop:
 - A cold Persistent cough Fever Any other changes in your condition
- Find someone to drive you to the hospital before and back home after surgery.
 Patients typically stay one night in the hospital for the gastric sleeve and gastric bypass.
- Do not use Jardiance for one week prior to surgery. Discontinue the use of Adipex 2 weeks before surgery.
- If you are requesting time off after surgery/ FMLA, submit all FMLA forms to Deanna at fax (501) 227-0490. Please allow a minimum of 5 days to complete. There is a fee for this service and forms will not be released without payment.

Pause and Reflect

Right now, I feel _____

_____ about having surgery.

Some things that feel challenging are:

Some ways that I can work on these challenges

are: _____





2 Days Before Surgery: To Do

Begin bathing with Hibiclens daily.

Pack your bag for the hospital:

- Photo identification card, insurance card
- This binder
- Toiletries toothbrush, toothpaste, soap, brush, lotion, deodorant
- Bathrobe and/or comfortable, loose fitting clothes (you will need to walk in the hallway while in the hospital)

- No-slip shoes or house shoes that are easy to slide on/off
- Cell phone and charger
- CPAP machine, if you have one
- Containers for eyeglasses, contact lenses, hearing aids, dentures, etc.
- Comfortable, loose fitting clothes to wear home
- Lip balm



The hospital will not be responsible for:

- Jewelry
- Purses
- Cash
- Valuables









Day of Surgery: To Do

Remember, do not eat solid food after 7:00 pm the night before surgery and do not eat or drink anything after midnight.

Surgery is scheduled for

_ (date/time)

- Wear comfortable clothes
- Do not apply powders, perfumes, lotions
- Do not wear jewelry
- Remove artificial nails and dark nail polish

Two hours before surgery time, check in at the admissions department in the lobby of Baptist Health Medical Center.





Day of Surgery: Process

Pre-op:

- You will change into a hospital gown.
- The nurse from the operating room will meet with you and discuss what to expect.
- The anesthesiologist will meet with you to discuss the plan for anesthesia.
- An IV (intravenous) infusion will be started to provide you with fluids. The IV will also be used for anesthesia and medication administration.

Operating Room:

- Pressure pads and warm blankets are available for your comfort. Let your team know if you are not comfortable.
- You will not be left alone.

Hospital Stay

Surgery Floor:

- When you arrive at the surgery floor we will continue to provide intravenous fluids and ice chips for hydration, nausea medication and pain/discomfort medications.
- You will be up and ambulating in your room and the halls shortly after arriving on the floor. If you have gas pain after surgery, this is the best way to get rid of it.

Post-Anesthesia Care Unit (PACU):

- After surgery, you will be transferred to the PACU where you will stay while recovering from the anesthesia.
- When you come out of surgery, the post-operative care unit will continue to give pain medicine as well as nausea medication.
- The nurse will call the waiting room and let your family know when you arrive in the PACU.
- The nurse will contact your family and let them know when you are ready to be transferred to your room.

 We will monitor your blood glucose, as well as your blood pressure while you are in the hospital. Most patients follow up with the provider prescribing the medication to manage the medication doses needed after surgery. Discuss with your provider before surgery to develop a plan for follow-up after surgery.



Expectations After Surgery?

Walk - One of the most important things you can do after surgery is walk. It is your responsibility to do this. The importance of walking after surgery decreases your chance of developing blood clots in your legs which can be fatal.

- Once you get into your hospital room after surgery, give yourself one hour and then start small with walking around the room.
- Walk every hour while you are awake.
- Try not to sit for more than an hour without getting up and walking around. Continue this for 4 weeks after surgery.

Physical Activity - should start light daily physical activity immediately. Avoid any strenuous activity for 4-6 weeks.

No lifting, pushing, or pulling over 20 pounds for the first 2 weeks. No lifting over 30 pounds weeks 3 and 4.

Post-Op Medications

You will be given prescriptions for pain medication, stomach ulcers (omeprazole) and nausea (Zofran). You will need to take omeprazole every day for 1 month following surgery. Use the other medications as needed.

Medications do not need to be crushed. Large pills should be split in half. Over time, you will be able to take large pills. Capsules and extended release medications should be avoided. Your primary care physician can help you find alternatives for after surgery. **Showering** - You may shower after surgery. The glue on your incisions is water-proof. However, do not let the spray hit directly on the incision site. Do not soak in a tub, swimming pool, lake, etc. until the skin glue has fallen off and your incisions are closed. You do not need to apply anything to the incisions. *Please call the office if any of the incisions look infected (draining pus, redness around the incision, or fever over* 101 degrees.

Driving - No driving while taking pain medication.

Nutrition Choices - Postoperative phases should be followed closely to allow the surgical areas to heal properly.

> Mpossible Machievable Mable

Do NOT take any aspirin, BC or Goody Powders, NSAIDS (Celebrex, Naproxen, Toradol, Mobic, Diclofenac, Motrin, Ibuprofen or Aleve). These medications can help promote the formation of ulcers. If your cardiologist wants you to take Aspirin, please discuss this with your surgeon.



When to Call?

cal 911 or go to the closest ER if you develop difficulty breathing, shortness of breath or chest pain.

If you develop any of the following symptoms within 6 weeks after surgery, call the office at (501) 227-9080:

- Fever greater than 101 degrees F
- Continuous heart rate of greater than 120 beats per minute for four hours
- Worsening abdominal pain that is not relieved by pain medication
- Nausea that lasts for more than four hours
- Increased shortness of breath
- Swelling of the legs
- Constant vomiting
- Inability to meet daily fluid intake requirements
- Dizziness that does not go away
- Changes at the incision site, such as:
 - Bleeding Redness Burning Swelling Tenderness Warmth Drainage of pus





Nausea, Vomiting, or Food Getting Stuck

Nausea and vomiting are **NOT** expected consequences from surgery.

If it does occur, here are some common examples:

WHY DOES THIS HAPPEN?	WHAT CAN YOU DO?
Eating too much	Measure your food
Eating too fast	Put your fork down between bites Time your meals
Not chewing enough	Chew your food 20 to 30 times for each bite
Eating foods that are too dry or tough	Use a slow cooker, add a sauce to soften your food
Taking bites that are too large	Cut food into the size of a teaspoon or smaller
Eating and drinking at the same time	Do not drink during a meal and wait 30 minutes after a meal
Swallowing air	Do not drink carbonated beverages
Dehydration	Keep track of how much you drink in your food journal







Constipation

Constipation is **very common** after surgery. Signs of constipation:

- Less frequent bowel movements
- Hard, dry stools
- Difficulty or straining during a bowel movement
- Nausea, bloating, abdominal cramping
- Decreased appetite

Absence of a regular bowel movement is not in and of itself a bad thing. However, if you are experiencing fewer bowel movements with these other symptoms, follow the steps below to treat constipation. Steps to treat constipation:

- Hydrate! Remember hydration is the most important thing after surgery. Make sure you are drinking plenty of liquids 64 ounces per day.
- 2. Walking even just walking around the house will help. You should try to move at least once every hour.
- Start taking Docusate (Colace) on post-op day and continue for 7 days. If no bowel movement by day 4-5, Miralax can be added once-twice daily.

Flatulence:

Avoid gulping, straws, chewing gum, and carbonated beverages. If you experience uncomfortable gas or bloating, slow down your eating. You may also try Gas-X chewables.







Dumping Syndrome

Dumping is a side effect that can occur when a patient eats trigger foods that are:

- High in fat
- High in sugar
- Larger than the new stomach pouch can hold

EARLY DUMPING SYNDROME 10 - 30 MINUTES AFTER EATING	LATE DUMPING SYNDROME 1-3 HOURS AFTER EATING
 Symptoms: Bloating and Abdominal Cramps Nausea, Vomiting, Diarrhea Rapid heartbeat & sweating Dizziness or fainting 	Symptoms: • Hunger • Confusion • Fatigue • Tremors & fainting

Causes:

- Undigested food moves too quickly from the stomach to the small intestine
- The small intestine absorbs the food too quickly

Prevention:

- Eat 5-6 smaller meals throughout the day
- Avoid sugary foods like soda, candy, and baked goods
- Eat protein-containing food on your plate first, followed by other foods on your plate
- Increase your fiber intake
- Have fluids 30 minutes after meals
- Cut your food into tiny pieces and chew completely

Take notes of what caused your dumping episode:

- 1. What you ate _____
- 2. How much you ate _____
- 3. How long after eating did you feel symptoms
- 4. What symptoms _____
- These notes can help you learn how to prevent dumping episodes in the future.
 Dumping syndrome is almost always preventable!



Changes After Surgery

The "Honeymoon Period" - this is a time period after surgery of rapid weight loss and weight loss often feels effortless. This time period can vary widely among different individuals. Everyone's body is different so don't compare your timeline to someone else's!

Hair Loss - this can occur with a very low-calorie eating style. The way you will eat after surgery will be a low-calorie eating style. Hair loss does not happen to everyone, and is almost always temporary.

To reduce hair loss:

- Eat adequate protein daily
- Take vitamins daily
- Take biotin 3000- 5000 mcg daily (optional)
- Avoid coloring or perming your hair
- May use product like Nioxin or Paul Mitchell's Tea Tree Oil to reduce hair loss

Excess Skin - the amount of excess skin after surgery varies. Everyone's body is different. It depends on the amount of weight loss, genetics, and overall muscle tone.

Keep skin folds clean to prevent skin infections. If infections occur, be sure to see your primary care provider for evaluation.

Plastic surgery to remove excess skin on areas like the abdomen are sometimes covered by insurance plans. We recommend waiting 12-18 months after surgery before considering these procedures.





Mindfulness for Eating

Practice mindful eating. Take at least 30 minutes to finish a meal. Take small bites and chew 25-30 times before swallowing, intentionally directing attention toward eating, including noticing the taste, texture, smell, and appearance of food, the pace of eating, and the process of chewing and swallowing. Eat at the table, with family and friends if possible. Avoid watching TV, being on your phone/computer/ or driving while you eat. You won't hear your body's cues if you are multitasking while eating. Put your utensils down on the table between bites. Eat planned snacks instead of grazing.

When you start to eat, make a mental note of your hunger level.

- Ideally it should be at level 3 or 4. If you are at a level lower than 3, you are over hungry and at risk of overeating.
- Fullness can vary from the absence of hunger to suffering from eating too much food. Ideally you should stop eating when you reach a level 5 or 6.
- Spend time practicing using this scale. Use it to shift eating behavior.

Do you notice a runny nose, hiccups, or sneezing while eating? This is a NEW cue that your body is giving you to know that you are getting close to being full. At this point, this is not a sign to take a break and then finish. Use the Hunger-Fullness scale to build awareness of hunger and satiety cues. This rating system is purely subjective.





Mindfulness for Sleep

Adults need 7-9 hours of sleep on average.



- Take a break from electronic devices
 1-2 hours before bed.
- Avoid caffeine and large meals prior to bedtime
- Keep your bedroom tidy and cool. Ideal temperature is 60-67 degrees F.
- Take a warm bath or shower.
- Try a wind-down activity such as writing down things you have accomplished that day. Now would be a good time to complete your daily food diary.
- Relying on sleep apps is not ideal.
- Distract yourself with pleasant thoughts.
 For instance, close your eyes and picture a nice beach. It all will transfer into sleep dreaming content.



- Finally, the next morning, wake up with intention. Integrating these steps into your morning routine can support you in being more mindful, connected, and resilient throughout the day:
 - Choose a gentle and soothing alarm or music on the radio.
 - Hydration with water prior to a cup of coffee.
 - Observe nature. Start your day by going outside or simply look through the window. Admire the sky, the trees, and notice the birds' chirping. You will be able to start your day with a richer perspective and sense of interconnectedness.

🗱 Baptist Health

Journaling and Self-Reflection



Reflective journaling is the practice of documenting both your experiences and interpretation of the experiences. This self-reflection can lift your mood and improve problem-solving ability. Start by recording daily meals, water intake, exercise and movement, and supplement intake. You might also list interesting insights you've had, for instance, a new recipe you enjoyed or foods that were not tolerated well, something that made you laugh throughout the day, or describe something your friend or family member did that you admired. It can help reduce stress and calm at night. Journaling about negative thoughts, feelings, and experiences would also help to overcome them. However, please remember that it will help only if you view these experiences as growth, change,

or closure. Take time to be introspective, to see how you feel deep down about the experience, what emotions this experience brings up, and what can be learned from the experience. The important step is what you will do next time when a similar experience comes up. Having written down what you will do makes it more likely you will follow through when the time comes. The questions to ask during writing are:

- What happened?
- How did the experience unfold?
- How did I deal with experience?
- Why did I make a particular decision?
- What could I have done during the experience?
- What would I do differently next time?

Overall, keeping a journal and re-reading it periodically will help you identify patterns in your behavior and observe how you grow over time. The greatest benefit of reflective journaling is to create the mindset of constant self-improvement and, therefore, a more and more fulfilling life. When it comes to weight, consistent behaviour is the key to supporting healthy habits. Journaling is a way to make sure that you are staying on track.



There are many options for journaling and tracking:

- Standard notebook
- Special Food diaries
- Phone Apps

Baritastic	Fooducate
free, designed for bariatric patients to track nutrition, physical activity, and water intake daily; gives recipe suggestions	mostly free, allows you to scan barcodes at the grocery store and retrieve nutritional information.
MyFitnessPal	Nike+ Training Club
free, food, and exercise tracking	to track physical activity
×	NTC THE THE REAL OF THE REAL OF THE PARTY OF
Waterlogged	Body Space
free, water intake tracking, reminds to drink water throughout the day	To track physical activity
waterlogged drink more water	



Daily Food Record

Please list all food/beverages/water/medications/supplements. If tracking daily intake using an app causes anxiety or stress, a physical record may be a better alternative. Bring this to your appointment with the dietitian.

ТІМЕ	DESCRIPTION	AMOUNT	NOTES



Post-Op Map - Year 1

(There may be additional appointments based on individual needs)

You will need to follow up with the Baptist Bariatric Health Center for the rest of your life. Maintaining communication with us from here on out will only positively impact your success in reaching your lifetime weight loss goals. We want you to know that we will always be here for you.

3 weeks after surgery	
O Surgeon Appointment	Date & Time:
6 weeks after surgery	
o weeks alter surgery	
O 6 week Dietitian Class	Date & Time:
3 months after surgery	
5,	
Clinic Appointment	Date & Time:
6 months after surgery	
Clinic Appointment	Date & Time:
9 months after surgery	
O Dietitian Appointment	Date & Time:
O Clinic Appointment	Date & Time:
12 months after surgery	
O Clinic Appointment	Date & Time:
O Psychology Appointment	Date & Time:

Attending a monthly support group is an important component of the post-op pathway.



Post-Op Map - Year 2

(There may be additional appointments based on individual needs)

You will need to follow up with the Baptist Health Bariatric Center for the rest of your life. Maintaining communication with us from here on out will only positively impact your success in reaching your lifetime weight loss goals. We want you to know that we will always be here for you.

18 months after surgery

Clinic Appointment	Date & Time:	
2 years after surgery		
Clinic Appointment	Date & Time:	

Studies have shown your discipline to follow-up, your compliance with the phases of eating, and your motivation for physical activity AFTER the first year will be critical to your long term success.



Lifelong Follow-Up Map

3 years after surgery	
O Clinic Appointment	Date & Time:
4 years after surgery	
O Clinic Appointment	Date & Time:
5 years after surgery	
O Clinic Appointment	Date & Time:
6 years after surgery	
O Clinic Appointment	Date & Time:
7 years after surgery	
O Clinic Appointment	Date & Time:
8 years after surgery	
O Clinic Appointment	Date & Time:
9 years after surgery	
O Clinic Appointment	Date & Time:
10 years after surgery	
Clinic Appointment	Date & Time:



Risk Factors for Weight Regain After Bariatric Surgery

- Unrealistic expectations of surgical outcomes - the "magic bullet" theory
- Lack of commitment to necessary lifestyle change: meal planning, food selection, physical activity, support groups
- Nonadherence to nutrition recommendations, mindless eating, grazing, skipping meals, night eating, and/or consistent dietary indiscretions
- Lack of physical activity; sedentary lifestyle
- Lack of postoperative follow-up with physician and dietitian
- Untreated behavioral health conditions
- Inadequate family support or disapproval
 of surgery

Weight loss is challenging. Set up your environment for success.

- Remove tempting foods where you spend the most of your time (home, office, etc)
- If you live with others, create a space at home with your food that will support you.
- Keep healthy food ready and available.
 Have fruit and vegetables on the middle shelf in the refrigerator or in a fruit basket on the counter.
- If you get stuck or need a reboot, we are always available to schedule an appointment for you to visit with our dietitian.





Strive for progress, not perfection. Do not get discouraged by small setbacks.



References

- American Society for Metabolic and Bariatric Surgery. (n.d.). Retrieved November 10, 2021, from https://asmbs.org/.
- Centers for Disease Control and Prevention (CDC). (n.d.). Retrieved November 10, 2021, from https://www.cdc.gov/.
- United States Department of Agriculture (USDA). (n.d.). Retrieved November 10, 2021, from https://www.usda.gov/.