



# Baptist Health

## BARIATRIC CENTER

### Bariatric Surgery Patient Binder



LITTLE ROCK

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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 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 FACS**

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.



### **Laurretta Helmich, APRN**

attended Polk Community College (Winter Haven, FL) where she obtained her Associate's Degree in Nursing. She then received her Bachelor's Degree in Nursing at Florida Southern College (Lakeland, FL). She completed her Masters in Nursing as an Adult Clinical Nurse Specialist at Florida Southern College and is certified through American Nurses Credentialing Center. Later she completed a Post Graduate, Adult Nurse Practitioner at Florida Southern College and is certified through American Academy of Nurse Practitioners.



### **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:*

## Introduction to Obesity

**41.9% of adult Americans  
over the age of 20 are  
classified as obese.  
(CDC, 2020)**

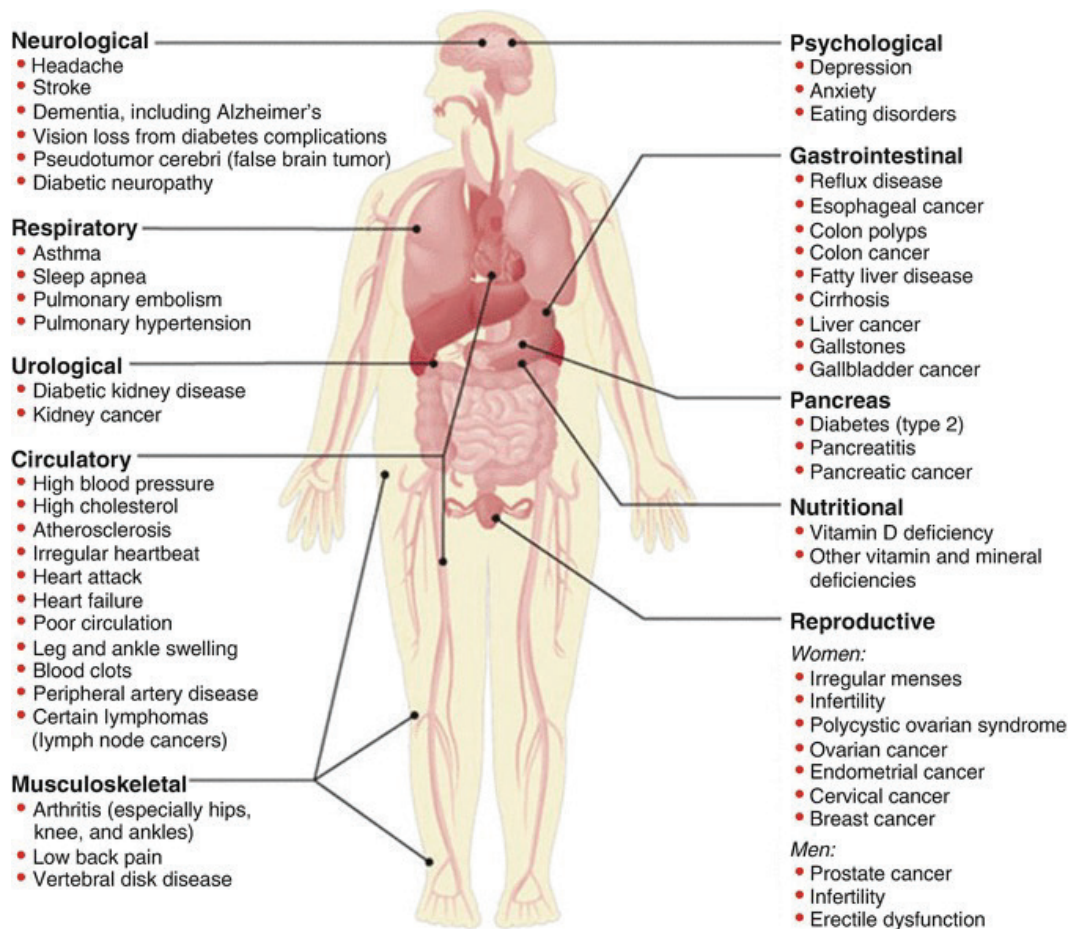
The CDC defines obesity as a weight that is higher than what is considered healthy for that individual's height. Obesity can cause damage to your body and lead to serious health risks. Obesity is a common, expensive, and serious disease (CDC, 2023).

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	WEIGHT(IN POUNDS)																																																		
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:** \_\_\_\_\_ lbs

**Weight for a BMI of 25 at my Height:** \_\_\_\_\_ lbs  
(see the table page 14)

**Subtract the two numbers.**  
**This is your current excess weight:** \_\_\_\_\_ lbs

**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.**

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### **Example 1:**

Excess Weight = 150 lbs

Weight loss after surgery = 75 lbs

EWL =  $(75/150) \times 100\% = 50\%$

### **Example 2:**

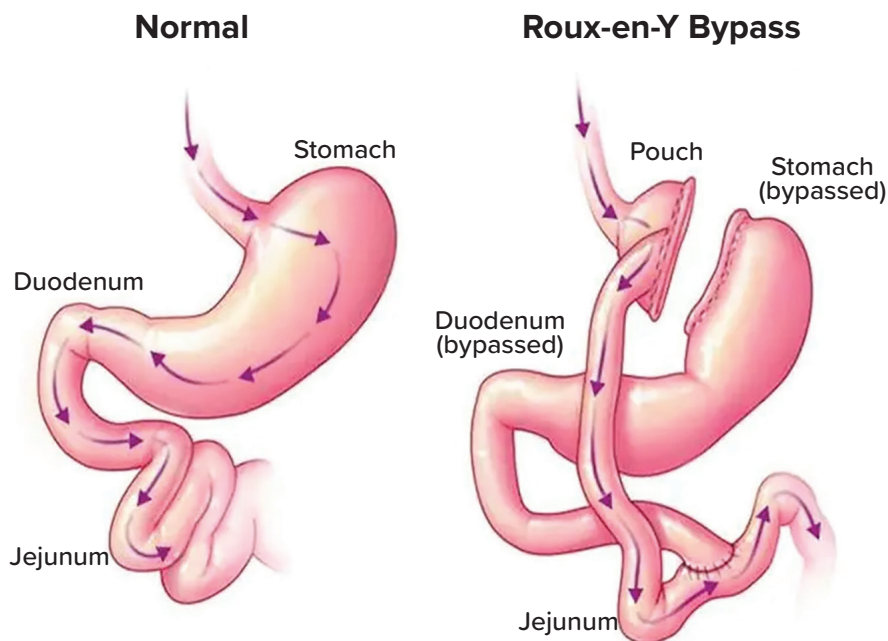
Excess Weight = 250 lbs

Weight loss after surgery = 200 lbs

EWL =  $(200/250) \times 100\% = 80\%$

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.*

*Changes 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

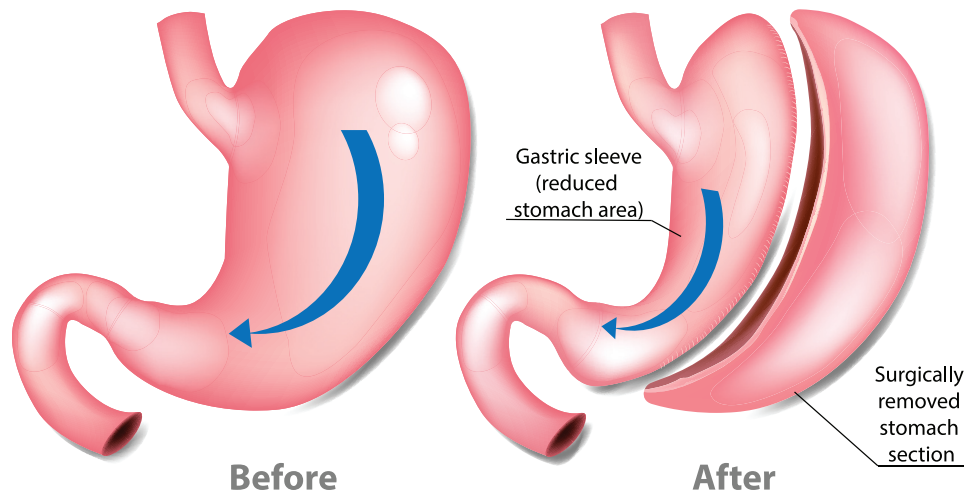
### Disadvantages:

- 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.

### Reasons for Revisional Surgery:

- The pouch may stretch and become larger
- The outlet of the pouch may increase in diameter
- A gastrogastic 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
- Gastrogastic 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:

- Increased heart rate greater than 120 beats per minute for four hours
- Fever greater than 100.4 degrees
- Shortness of breath
- Excessive abdominal pain
- Vomiting that is not controlled by nausea medication

## 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 you and your surgeon discuss the benefits and risks of surgery, 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



1. **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.
2. **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.”
3. **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 to maintain 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



1. Make good food choices
2. Physical activity
3. Take vitamins daily
4. Attend a Bariatric support group
5. Follow up annually
6. Avoid smoking
7. Avoid alcohol

## Pause and Reflect

I feel most interested in the \_\_\_\_\_ surgery.

**My Goals:**

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## 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, and in the months following surgery. Unless you have a continuous blood glucose monitoring device, check your blood glucose frequently throughout the day, and keep a blood glucose diary. Your prescribing physician will most likely utilize your blood glucose readings when developing a plan to decrease your medication, as needed. Be sure to know how to rescue yourself from hypoglycemia should your blood sugar become too low.

**Hypertension Medication** - If you take medication for high blood pressure, your medication requirements may go down in the week before surgery, and in the months following surgery. We recommend that you monitor

your blood pressure daily, and keep a blood pressure diary. Your prescribing physician will most likely utilize your blood pressure readings when developing a plan to decrease your medication, as needed.

**Smoking** - If you smoke or vape, stop. Stop smoking cigarettes and using all nicotine products (patches, gum) at least 12 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
<ul style="list-style-type: none"> <li>All methods permitted</li> </ul>	<ul style="list-style-type: none"> <li>Oral birth control pills do not absorb properly after bypass surgery</li> <li>Only non-oral birth control methods permitted: IUD, condom, Nexplanon (implant), NuvaRing, Depo-Provera (injection)</li> </ul>	<ul style="list-style-type: none"> <li>All methods permitted</li> </ul>

## 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 like 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

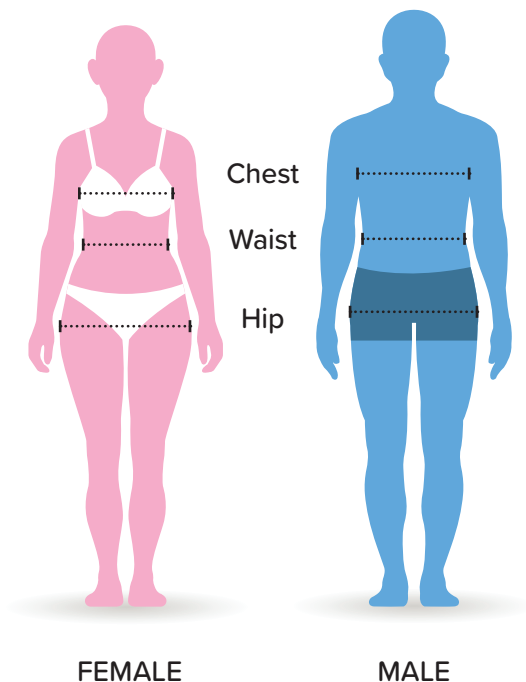
**The scale does not always show the success you are achieving!** Stalls will happen frequently within the first 6 months after surgery because your body is adapting to the rapid weight loss. While in these early stalls, your weight is staying the same, but you are likely losing inches, so having other ways to track progress is crucial.

- 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 Surgery

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 Surgery

Date \_\_\_\_\_

Weight \_\_\_\_\_ Chest \_\_\_\_\_ Waist \_\_\_\_\_ Hips \_\_\_\_\_

### 18 Months After Surgery

Date \_\_\_\_\_

Weight \_\_\_\_\_ Chest \_\_\_\_\_ Waist \_\_\_\_\_ Hips \_\_\_\_\_

### 24 Months After 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 three different macronutrients that provide calories: protein, carbohydrates, and fat.

## Goals:

**Calories:** 800-1200 Calories per day after surgery

(Do not exceed without approval from Registered Dietitian)

**Protein:** 70-90 grams per day (As Tolerated)

**Carbohydrates:** 30-40 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. Animal proteins, such as eggs, milk, and meat, are complete proteins, which means that they contain all of the essential amino acids that our bodies require. They also contain approximately 7 grams of protein per ounce, are absorbed quickly by the body, and are rich in many highly bioavailable vitamins (micronutrients). Unless otherwise contraindicated, animal proteins should be your primary source of protein intake. Plant-based proteins are not as easily digestible as animal proteins, and grams of protein vary from plant source to plant source. Only a few plant-based proteins contain all of the essential amino acids that our bodies require. As compared to animal proteins, plant-based proteins contain less vitamins and minerals, and are higher in calories per serving.

COMPLETE PROTEIN	INCOMPLETE PROTEIN	<p>Green = More Protein per Calorie (More than 15 grams per 200 Calories)</p> <p>Purple (Do Not Make Your Main Sources of Protein) = Less Protein per Calorie (Less than 15 grams per 200 Calories)</p>			
<b>Animal:</b> <b>BEEF</b> <b>PORK</b> <b>POULTRY</b> <b>FISH</b> <b>EGG</b> <b>SHELLFISH</b> <b>MILK</b> <b>CHEESE</b> <b>(COTTAGE CHEESE)</b>  <b>Plant:</b> <b>QUINOA</b> <b>BUCKWHEAT</b> <b>SOY</b> <b>TOFU</b> <b>QUORN</b>	<b>LENTILS GREEN</b> <b>PEAS PUMPKIN SEEDS</b> <b>PEANUTS/ PEANUT BUTTER</b> <b>CORN</b> <b>MUSHROOMS</b> <b>CHIA SEEDS</b>	 <b>Lean Beef</b> 33g per 150g (raw)	 <b>Chicken</b> 33g per 150g (raw)	 <b>White Fish</b> 30g per 150g (raw)	 <b>Tofu</b> 12g per 100g
		 <b>Tuna</b> 19g per 95g can	 <b>Milk</b> 10g per cup	 <b>High Protein Milk</b> 15g per cup	 <b>Mixed Nuts</b> 7g per 30g
		 <b>High Protein Yogurt</b> 15g per 170g	 <b>Cheese</b> 9g per 35g	 <b>Eggs</b> 8g per large egg	 <b>Legumes</b> 7g per half cup

## Nutrition - Carbohydrates

**CARBOHYDRATES** provide energy and some micronutrients not found in animal proteins. We break down carbohydrates into starchy vegetables, non-starchy vegetables, fruits, starches, and refined carbohydrates.

**Non-Starchy Vegetables** are lower in calories and higher in fiber than starchy vegetables, and are good sources of some micronutrients.

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

**Starchy Vegetables** contain more calories and carbohydrates than non-starchy vegetables, and contain less fiber than non-starchy vegetables. They are also good sources of some micronutrients.

**CAUTION:** These foods are high in calories, so be mindful of serving sizes when consuming. Unmonitored consumption of starchy vegetables can result in unwanted weight gain.

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

**Fruits** contain some simple sugars, fiber, and are good sources of micronutrients. Avoid canned fruits or fruits that are packaged in sugar liquids. Try to consume only 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, contain some vitamins and minerals, and typically have a low fiber content.











**CAUTION:** These foods are high in calories, so be mindful of serving sizes when consuming. Unmonitored consumption of starches can result in unwanted weight gain. Strictly limit/eliminate from diet.

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

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

**CAUTION:** These foods are high in calories, so be mindful of 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

Starchy Vegetables		Non-Starchy Vegetables	
Potato		Broccoli	
Corn		Cucumber	
Pumpkin		Cabbage	
Sweet Potato		Pepper	
Beans		Tomato	

## Nutrition - Fats

**FATS** provide energy for our bodies, allow us to store energy for future use, and help our bodies to absorb certain micronutrients. Fats are also essential in hormone balance and reproductive health. 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 diet high in saturated and trans fat is unhealthy because it tends to raise LDL cholesterol levels.

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. They also 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. They 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.



## Serving Sizes of Different Foods

<b>PROTEIN</b>	<p><b>Beef</b>      3oz = about 130 Calories (Eye of Round) 23g Protein 3oz = about 220 Calories (Tri Tip) 26g Protein</p> <p><b>Chicken/Turkey</b>      3oz = about 126 Calories (Breast) 20g Protein 3oz = about 177 Calories (Thigh) 26g protein</p> <p><b>Fish/Shellfish</b>      3oz = 80 Calories (Orange Roughy) 16g Protein 3oz = 200 calories (Salmon) 27g Protein</p> <p><b>Pork</b>      3oz = 120 Calories (Tenderloin) 22g Protein 3oz = 173 Calories (Sirloin Roast) 24g Protein</p> <p><b>Plant-Based</b>      2oz = 43 Calories (Tofu) 4g Protein 2oz = 290 Calories (Pumpkin Seeds) 20g Protein</p>		
<b>NON-STARCHY VEGETABLES</b>	<p>½ Cup Cooked or 1 Cup Raw = 30 Calories, 4-6g Carbs, 3g Fiber, 0.5-2g Protein</p>		
<b>WHOLE FRUITS (15G CARBS)</b>	<table> <tr> <td> <p><b>Apple</b> 4oz or ½ cup sliced = 65 Calories</p> <p><b>Grapes</b> ½ cup = 60 Calories</p> <p><b>Nectarine</b> 1 medium = 60 Calories</p> <p><b>Strawberries</b> 11 medium = 66 Calories</p> </td><td> <p><b>Banana</b> ½ = 55 Calories</p> <p><b>Peach</b> 1 medium = 60 Calories</p> <p><b>Orange</b> 1 Small = 60 Calories</p> <p><b>Cherries</b> ½ cup = 50 Calories</p> </td></tr> </table>	<p><b>Apple</b> 4oz or ½ cup sliced = 65 Calories</p> <p><b>Grapes</b> ½ cup = 60 Calories</p> <p><b>Nectarine</b> 1 medium = 60 Calories</p> <p><b>Strawberries</b> 11 medium = 66 Calories</p>	<p><b>Banana</b> ½ = 55 Calories</p> <p><b>Peach</b> 1 medium = 60 Calories</p> <p><b>Orange</b> 1 Small = 60 Calories</p> <p><b>Cherries</b> ½ cup = 50 Calories</p>
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<b>STARCHY VEGETABLES AND STARCHES</b>	<p><b>Grains, Unsweetened Cereals, Pasta</b> ½-1 cup = 80 Calories, 15-30g Carbs</p> <p><b>Beans, Lentils, Peas</b> ¼-1/3 cup = 80 Calories, 15g Carbs</p> <p><b>Starchy Vegetables</b> ½ cup = 80 Calories, 15g Carbs</p>		



## Healthy Eating Guidelines

**Choose “Whole Foods”** as the main foods you consume, and supplement with protein shakes or other foods as needed. Whole foods mean foods that are minimally processed, and are free from additives and artificial substances. Examples of whole foods include, but are not limited to: animal products, fruits, vegetables, tubers, nuts, and legumes.

### **Limit foods with “Added Sugars.”**

These foods are hyperpalatable, tend to be less satiating, and are easier to overconsume. This can lead to excess calorie intake and weight regain.

**Limit Fried Foods.** These foods tend to be very calorie dense, and easy to over-consume. The oils the foods are cooked in are often heated and reheated many times, causing the oil to “oxidize,” become rancid, and produce trans fats. This can increase your risk for heart disease and cancer if consumed regularly.

**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

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. If you are already intolerant of sugar alcohol, eating too much food containing it could cause stomach cramps. **There are 2.6 calories per gram of sugar alcohol.**

Sorbytol	Lactitol
Xylitol	Erythritol (0 calories per gram)
Mannitol	Isomalt
Maltitol	

Artificial sweeteners and natural sugar substitutes

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

## Reading Nutrition Labels

You should understand nutrition labels so you can make informed choices about the foods you eat. This will also help you avoid foods that are high in fat and carbohydrates. After bariatric surgery, your serving sizes will most likely be smaller than the recommended serving size listed on Nutrition Facts Labels.

<b>Nutrition Facts</b>	
8 servings per container	
<b>Serving size</b>	<b>2/3 cup (55g)</b>
<b>Amount per serving</b>	
<b>Calories</b>	<b>230</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 8g	<b>10%</b>
Saturated Fat 1g	<b>5%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 160mg	<b>7%</b>
<b>Total Carbohydrate</b> 37g	<b>13%</b>
Dietary Fiber 4g	<b>14%</b>
Total Sugars 12g	
Includes 10g Added Sugars	<b>20%</b>
<b>Protein</b> 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 240mg	6%

\* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

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

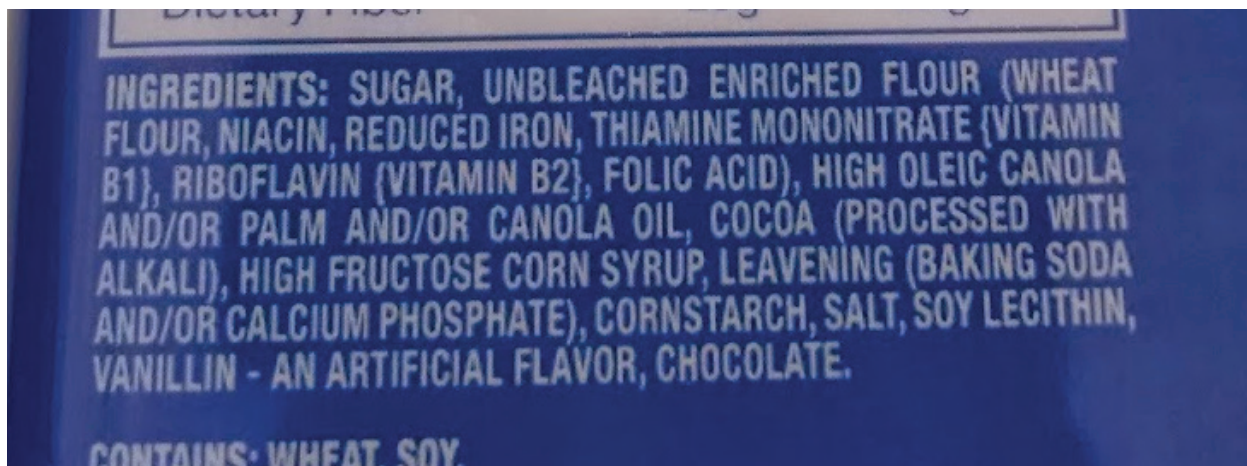
Amount of different vitamins and minerals in a food and how much they contribute to your daily recommended intake

## 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 no name for sugar (page 30) is listed in the first 5 ingredients on the list!

On this ingredient label, “Sugar” is the 1st ingredient and “High fructose corn syrup” is the 5th.



## Portion Control Using Common Items



3 ounces of meat = deck of cards



½ cup pasta or rice = light bulb



1 cup fruit = baseball



1 cup vegetables = 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. = 1 fl 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	
¾ 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 vegetables OR fruit

\_\_\_\_\_ + \_\_\_\_\_

### For lunch:

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

\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

### For dinner:

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

\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

### Snacks:

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

\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_

## Bariatric Pre-Op Shopping List - Recommended Items

- Bariatric-specific vitamins
- Protein shakes (your taste preferences may change after surgery, so you may not want to buy protein shakes in bulk).
- 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 childbearing 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 multivitamin 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 available vitamins options that are both recommended as bariatric supplements, and meet all guidelines of the American Society for Metabolic and Bariatric Surgery (ASMBS). We list them on the following pages.



Brand and Name	Note	Serving size	What to take in addition
Bariatric Advantage Chewable Advanced Mult EA	Better absorption of Vitamin D & E. Requires additional Calcium Citrate	2 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew
Bariatric Advantage Multivitamin Chewy Bite	Soft Chew (Starburst). Requires Additional Calcium Citrate and Iron	2 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew & 18-45mg Iron 1x/d
Bari Life Complete Bariatric Formula Powder	Powder that can be mixed in water and other liquids. No Additional Supplementation Required	2 scoops per day (Morning & Evening)	Meets all needs unless deficient
Bariatric Fusion Bariatric Multivitamin Soft Chew	Soft Chew (Starburst). Requires Additional Calcium Citrate and Iron	2 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew & 18-45mg Iron 1x/d
BN Healthy BN Chews	Chewable Tablet. Requires additional Calcium Citrate	2 per day	500mg Calcium 2x/d with 3 hours between MVI and each calcium chew
BN Healthy BN Caps	Capsule. Requires additional Calcium Citrate	2 per day	500mg Calcium 2x/d with 3 hours between MVI and each calcium chew
Bariatric Fusion Complete Chewable Bariatric Multivitamin	Chewable Tablet. Contains all required vitamins and minerals. No extra iron or calcium required. <b>MUST TAKE WITH FOOD</b>	4 per day	Meets all needs unless deficient. Take with food.
Barimelts Multivitamin	Melts. Requires additional Calcium Citrate and Iron	2 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew & 18-45mg Iron 1x/d
Bariatric Advantage Ultra Solo Capsule or Chewable (with Iron)	Comes in Capsule and Chewable. Requires additional Calcium Citrate. Can introduce capsule at 4 or 6 months)	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew

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



Brand and Name	Note	Serving size	What to take in addition
Bariatric Fusion One PER Day Bariatric Multivitamin Capsule with 45mg Iron	Capsule. Requires additional Calcium Citrate (can introduce at 4 or 6 months)	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew
Celebrate Celebrate One45 (Chewable)	Chewable. Requires additional Calcium Citrate	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew
ProCare Health Once Daily Bariatric Multivitamin Chewable 45mg Iron	Chewable. Requires additional Calcium Citrate	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew
ProCare HealthOnce Daily Bariatric Multivitamin Capsule 45 mg Iron	Capsule. Requires additional Calcium Citrate (can introduce at 4 or 6 months)	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew
Opurity Bariatric Multi Chewable with 45mg Iron	Chewable. Requires additional Calcium Citrate	1 per day	500mg Calcium 2-3x/d with 3 hours between MVI and each calcium chew

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

Calcium Brand	Servings/Day
Bariatric Fusion Calcium Citrate Soft Chew	2-3
Bariatric Advantage Calcium Citrate Chewy Bites	2-3
Celebrate Calcium Citrate Soft Chew	2-3
Caltrate 600 Soft Chews	2

## 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, powders, and bars 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
Healthshot, protein and amino acid solution (for renal patients)	100	24	2	0

Protein bars tend to be low in protein, and high in carbs and sugars, so if you are wanting to use those to help with your protein intake, aim for bars that have at least 20 grams of protein, keep the sugar below 5 grams and are 200 Calories or less.

PROTEIN BARS	CALORIES	PROTEIN GRAMS	SUGAR GRAMS	FIBER GRAMS
Quest Protein Bars	180-210	17-21	16-22	9-15
Barebells Protein Bars	190-210	20	16-20	3

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. It may also help improve any existing comorbidities. 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, and Bariatric Advantage Meal Replacement. Supplement with 6 oz. per hour of sugar free clear liquids and sugar-free full liquids between the protein shakes. Protein2O protein infused water can count toward your sugar free clear liquids. Limit your calorie intake to 800-1200 calories 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
- Unsweetened fruit 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
- Protein waters (for example: Protein2O protein infused water)

EXERCISE	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	
10am	6oz Premier Protein Shake		8oz Beef Bone Broth	
11am	4oz Water		4oz Water	
12pm	4oz Water		8oz Blended Cream of Potato Soup	
1pm	6oz Premier Protein Shake		4oz Water	
2pm	4oz Water		4oz Water	
3pm	4oz Water		6oz Premier Protein Shake	
4pm	6oz Premier Protein Shake		4oz Water	
5pm	4oz Water		4oz Water	
6pm	4oz Water		8oz Proti-Thin: Italian Tomato Soup	
7pm	6oz Premier Protein Shake		4oz Water	
8pm	4oz Water		4oz Water	
9pm	4oz Water		6oz Premier Protein Shake	
10pm	6oz Premier Protein Shake		60-66oz Water 74grams Protein 32grams Carbs	
Total Fluid:	64-76oz Water			
Total Protein:	90grams Protein			
Total Carbs:	15grams 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: **3-4 ounces of fluid 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. If you develop nausea, try 1 ounce every 30 minutes. Stop when you feel full. Signs of fullness include hiccups, runny nose, burping, sneezing, and eyes watering. Wait 30 minutes, or until signs of fullness pass, and resume sipping fluids.
- Keep fluids with you at all times. Do not leave your house without a water bottle.

- Caffeine-free fluids are preferred. If consuming caffeinated beverages, make sure you are able to reach the 64 oz daily fluid goal in addition to the caffeinated beverage.

### Examples of clear liquids:

Broth or bouillon, sugar free Jell-O, decaffeinated coffee/tea, protein waters, bone broth, 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)**

For the first 3 months following surgery, stop drinking 30 minutes before meals, and wait 30 minutes after meals before drinking any fluids.



## Phase 1 Physical Activity

EXERCISE	TIME	FREQUENCY
Walk in the room or down the hallway	As tolerated	As Frequently as Possible (at least once every hour). Your goal is to be out of the bed more often than you are in the bed.

## Finding it hard to drink enough water?

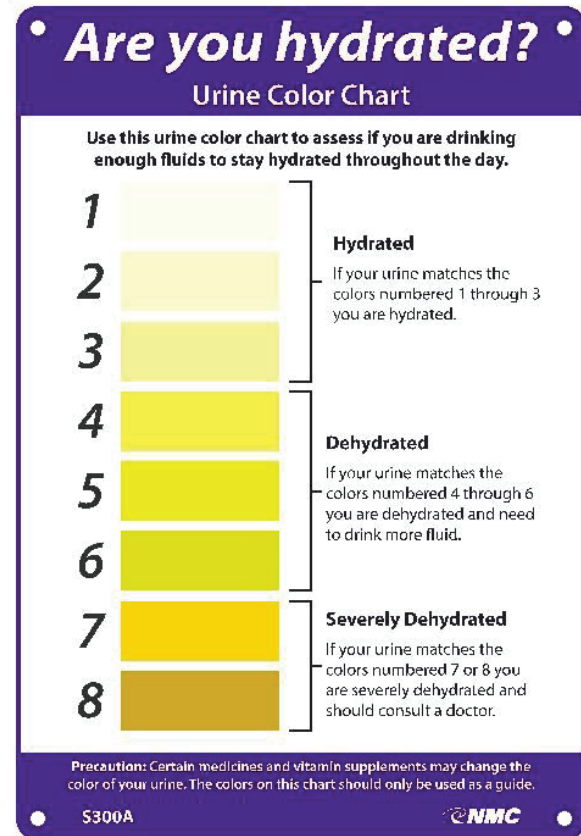
The most important things to do after surgery are to remain hydrated and walk!

### 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:

- Urinating less frequently than usual
- Urine that is darker in color than usual (for example, 4-8 on the “Are you hydrated?” chart )
- Dry mouth
- Dizziness and lightheadedness
- 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. If using fresh-squeezed, strain out pulp or seeds first.\*
- Add a few frozen berries such as blueberries or raspberries.\*
- Try strawberries and fresh mint.\*

- 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.\*

*\*Starting 4 months after surgery*

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

Starting on Day 3, you can start adding full liquids as tolerated as you transition out of Phase 1. This phase adds some low-fat dairy products and pureed soups (thin, blended to a sippable consistency, strained through a fine mesh strainer, and no chunks).

For the first 3 months following surgery, stop drinking 30 minutes before meals, and wait 30 minutes after meals before drinking any fluids.

### 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

- You can count 75% of the total volume of your protein shakes toward your daily fluid goal. For example, if you drink an 11 oz protein shake, you can count 8 oz of that protein shake toward 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 bariatric-specific multivitamins (chewable, powder, or liquid) by adding 1 tablet a day until reaching a full daily dose. Stay on this maintenance dose for the rest of your life. (Crushing chewable vitamins and mixing them 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 yogurt-skyr, 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

EXERCISE	TIME	FREQUENCY	INTENSITY
Walk	20 minutes	2 times / day, every day	As tolerated
Walk	3-5 minutes	Once every hour	Light
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.

After blending soup, use a fine mesh strainer to strain out any remaining chunks.

### Meal 1:

1 Tbsp.-½ 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 to sippable consistency prior to consuming)

*wait 30 minutes*

6 ounces protein shake

### Meal 3:

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

*wait 30 minutes*

6 ounces protein shake

### Meal 4:

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

*wait 30 minutes*



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, HealthSmart - Cream of Mushroom High Protein Soup

## Phase 3 Soft Foods (Post-Op Days 15-28/Weeks 3-4)

- Ground meats may be introduced at this point, but may not be tolerated well. Start small to test tolerance. Avoid chopped and shredded meats until Phase 4. Meats such as canned tuna, canned salmon, and canned chicken are acceptable in this phase, but might require yogurt or light mayonnaise for added moisture.
- Nut Butters can be introduced at this point, but be mindful of serving sizes as 2 Tbsp. has 200 calories.
- 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, or cramping, step back to Phase 2 and try to figure out the cause. These symptoms could be caused by eating too fast or too much at once, eating the wrong foods, not chewing thoroughly, or drinking during meals.
- For the first 3 months following surgery, stop drinking 30 minutes before meals, and wait 30 minutes after meals before

drinking any fluids.

### 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

EXERCISE	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
Walk	3-5 minutes	Once every hour	Light	



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

*Note: Sip fluids continuously between meals*





## Phase 3 Sample Meal Plan

### Meal 1:

Soft Poached Egg  
2 tablespoons soft cooked carrots

### Meal 2:

2 tablespoons ground turkey  
2 tablespoons soft cooked green beans

### Meal 3:

One salmon packet (may need to be mixed with 1 Tbsp. greek yogurt or light mayonnaise to tolerance, to add moisture)  
2 Tbsp. cooked squash (no seeds)

### Meal 4:

2 tablespoons tuna salad  
2 tablespoons sautéed 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	<p>Animal Source (Complete Proteins):</p> <ul style="list-style-type: none"> <li>• Egg = 6 g</li> <li>• 1 oz. Fish = 7g</li> <li>• 1 oz. Meat = 7g</li> <li>• 1 oz. Poultry = 7g</li> <li>• ¼ cup Cottage Cheese = 7g</li> <li>• 3 oz. Greek yogurt = 9g</li> </ul> <p>Plant Source:</p> <ul style="list-style-type: none"> <li>• ¼ cup Tempeh = 7g</li> <li>• ¼ cup Tofu = 5g</li> <li>• ¼ cup Beans = 3.5g (avoid for first 4 months after surgery)</li> </ul>
Vegetables	¼ cup Vegetables = 0.5-1g
Fats	<p>Nuts = 6-8g per 2 oz. (Very High Calorie, avoid for first 6 months after surgery)</p>

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

### Serving size of food:

- Total volume per eating period:  
4-8 tablespoons (2-4oz)
- You may introduce lean meats in this phase, including shaved deli meats. You may continue ground meat as tolerated. Avoid skin on meat. All meats should be moist, and avoid dry meats such as baked, grilled, or air fried meats. 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.

- For the first 3 months following surgery, stop drinking 30 minutes before meals, and wait 30 minutes after meals before drinking any fluids.
- 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

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



*Note: Sip fluids continuously between meals*



## 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

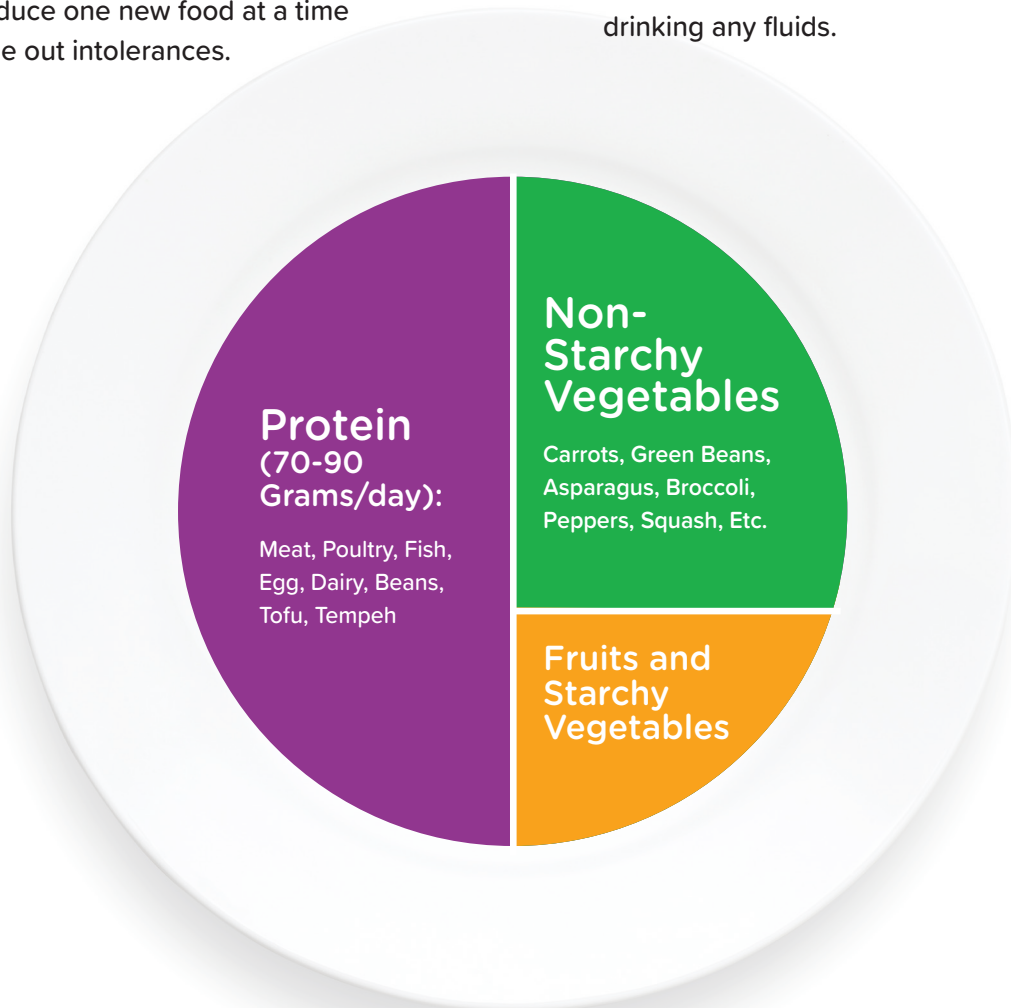
### Meal 6:

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.
- For the first 3 months following surgery, stop drinking 30 minutes before meals, and wait 30 minutes after meals before drinking any fluids.



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

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

**Fruits/Starchy Vegetables/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 Vegetables
3. Fruits
4. Starchy Vegetables
5. Grains & Other Foods

## Lifetime Phase Sample Meal

Combine 2-3 oz of lean protein and ½ cup of non-starchy vegetables. Examples of meals:

TIME	MEAL PLAN #1		MEAL PLAN #2	
7am	2 Egg, 1 oz. Bell Pepper and 1oz Onion Omelette		Chocolate Blueberry Smoothie	
8am	6 oz. Water		6 oz. Water	
9am	6 oz. Water		6 oz. Water	
10am	6 oz. Greek Yogurt		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		6 oz. Water	
3pm	6 oz. Water		6 oz. Water	
4pm	2 oz Deli Ham, 1oz Swiss Cheese and Tomato Lettuce Wrap		P3 Turkey Ham and Cheese	
5pm	6 oz. Water		6 oz. Water	
6pm	6 oz. Water		6 oz. Water	
7pm	3 oz. Grilled Salmon ½ cup Steamed Asparagus		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		931 Calories 78-84 oz. Fluid 121g Protein 42 Carbs 32g Fat	

### 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 session until reaching a goal of 45 minutes	<p>May begin with doctor's approval. Add 3 days of light weights.</p> <p>Day 1: Upper body, 15-30 minutes</p> <p>Day 2: Lower body, 15-30 minutes</p>



## RECIPES

### Peaches and Cream Protein Shake



220 Calories

24 g Protein

30 g Carbohydrates

1 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)
- ½ cup fresh or frozen peaches
- 1 ½ tsp vanilla extract
- 2 handfuls spinach
- Ice

#### DIRECTIONS

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.

**RECIPES**

## Egg Muffins

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

### QUICK TIPS

You can try all types of vegetables 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)
- ½ tsp. garlic powder
- ¼ tsp. cayenne
- ¼ tsp. black pepper
- ½ tsp salt
- ¼ cup milk

### DIRECTIONS

1. 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.

### RECIPES

## 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

- ½ 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 vegetables 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)
- ¼ tsp. salt
- ¼ tsp. pepper
- ½ tsp. garlic powder
- 1 tsp. smoked paprika
- 1/3 c. real bacon bits
- ½ c. low-fat shredded cheddar cheese

#### INGREDIENTS (EVERYTHING SAUCE)

- ½ c. low-sugar ketchup
- ¼ c. yellow mustard
- ¼ c. low-fat mayo
- 2 tbsp. no-sugar added relish

#### DIRECTIONS

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.
4. 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



**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
- 1 32-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

### 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.

## RECIPES

### Roasted Cauliflower Soup



12 servings  
155 Calories  
7 g Protein  
21 g Carbohydrate  
6 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

#### 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

## RECIPES

# Pan Seared Salmon with Mediterranean 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

### 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.

**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 brussels sprouts
- 6 oz broccoli
- 12 oz cauliflower rice
- 2 Tbsp minced garlic
- Sriracha
- Juice from ½ lemon
- 1 cup chopped fresh dill

### DIRECTIONS

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)

**RECIPES**

## 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)

### DIRECTIONS

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.
5. 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.

**RECIPES**

## 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

**DIRECTIONS**

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

**RECIPES**

## Cauliflower Crust Supreme Pizza



**8 Servings**  
**227 Calories**  
**17 g Protein**  
**8 g Carbohydrate**  
**14 g Fat**

### INGREDIENTS

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

### DIRECTIONS

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



## RECIPES

### 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.*



4 Servings

105 Calories

2 g Protein

27 g Carbohydrate

1 g Fat

#### INGREDIENTS

- 2 ripened bananas

#### DIRECTIONS

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 powder, or fresh berries.

## 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, Vegetables, 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 that you make at home. Many foods that are high in fat or sugar may cause dumping syndrome. Avoiding new foods at a restaurant or party can keep you from getting sick while you are out.**

## Physical Activity



Physical activity is encouraged, and can help you maintain weight loss long-term. It can also improve your mood and sleep, and can help you build lean muscle mass. Strength training will help you build muscle, improve bone health, and is the greatest contributing factor for increasing your metabolism. Aerobic (cardio) exercise will help you 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
- Encourage your family members to join

you for a walk, a hike, or a bike ride

**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, use small hand weights while watching TV, 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, walk your dog, walk to the mailbox

**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

**This best exercise is the one you will incorporate on a daily basis.**

## 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:

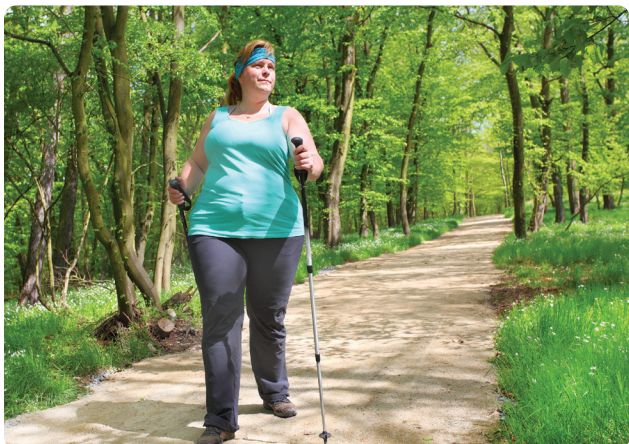
Once you get into your room after surgery, give yourself one hour, and then start small with walking around the room.

Walk every hour while you are awake.

If you have more than an hour drive on your way home from the hospital, stop at the hour mark and walk several laps around your car. This is important because it will help reduce your risk of blood clots.

**First month after surgery:** walk for 3 to 5 minutes at least once every hour throughout the day while awake. This does not have to be strenuous. It can be outside, or in your house. Try not to sit for more than an hour without getting up and walking around.

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



### Second month after surgery:

perform low-to-moderate intensity exercise for 30 minutes per day (can be split into smaller bouts to equal a daily total of 30 minutes).

Increase the duration of your moderate-to-high intensity exercise sessions by 3-5 minutes each week, as tolerated. For example, for the first week, you can exercise for 30 minutes, 5 days per week. For the second week, you can exercise for 35 minutes, 5 days per week. However you choose to incorporate exercise throughout your week, progress slowly by adding 3-5 minutes to your activity weekly. Start with low-to-moderate intensity aerobic exercise 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 takes pressure off the joints. The lifetime goal is to reach 150 minutes of moderate-to-high intensity exercise per week (30-40 minutes 5-6 times a week).

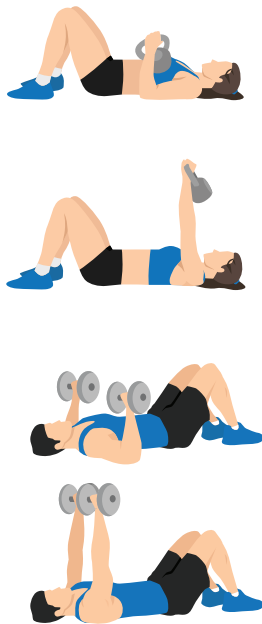
**When cleared for full activity by your surgeon:** begin doing strength training at least 3 times a week, and continue cardio at least 5 times a week.

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 for tightening and strengthening the mid section.

## Milk Jug Workout

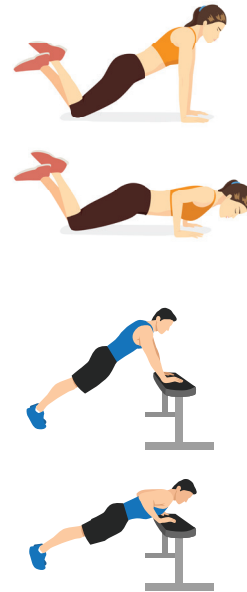
Fill jugs with water, sand, coins, or gravel to whatever weight is difficult but doable for the number of repetitions given. (Can use dumbbells or kettlebells if available)

### Chest Press 8-12 Repetitions



or

### Pushups 8-12 Repetitions



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



## Milk Jug Workout cont.

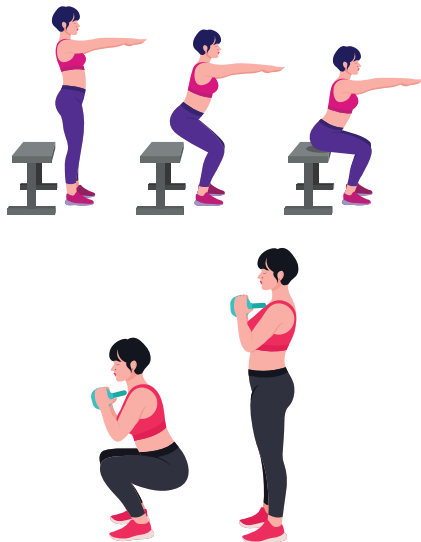
### Jug Squats, Bodyweight Squats or Sit to Stand Squats in Chair

8-12 Repetitions

(Do sit to stand squats for first few workout cycles until you can tolerate added weight)

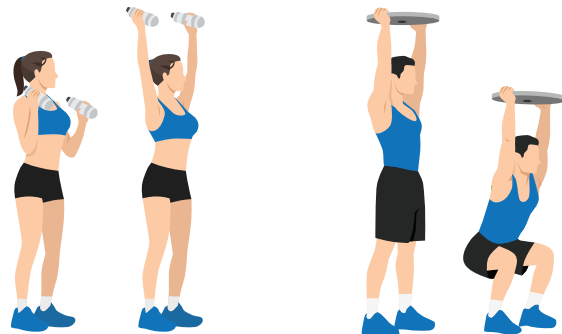
Hold the milk jug in front of your chest with both hands, your elbows close together and your hands cupping the jug. In this position, your forearms will look like a goblet. Stand with your feet hip-width apart, toes pointed slightly out from parallel. Push your hips back

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.

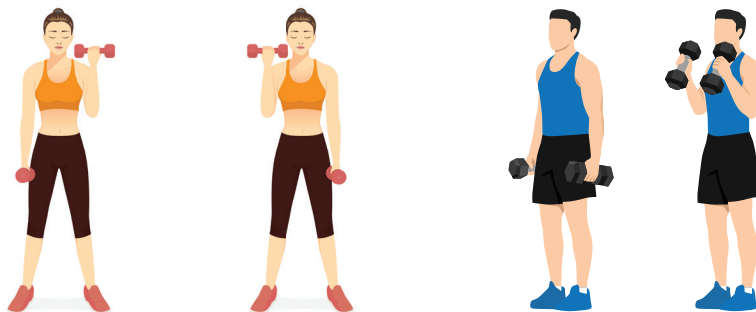


### Overhead Press

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



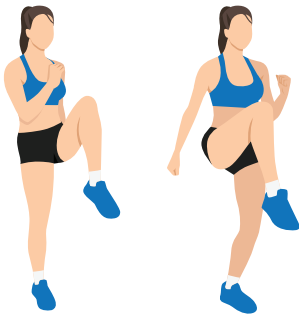
### Jug Hammer Curls 8-12 Repetitions Each Side



## 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:

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Some ways that I can work on these challenges are: \_\_\_\_\_

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**2 WEEKS**  
before surgery

## 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



**2 DAYS**  
before surgery

## Day of Surgery: To Do

**Remember, do not eat solid food after 7:00 pm the night before surgery. You will be given two bottles of Gatorade during your presurgical visit. You will drink one bottle the night before surgery, and one bottle the morning of surgery (before you get to the hospital). You may also drink water the night before surgery. Other than this Gatorade or water, do not eat or drink the night before surgery, after 7:00 pm.**

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.

### 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.

## 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.
- We will monitor your blood glucose, as well as your blood pressure while you are in the hospital. You will need to follow up with the prescriber of your medications for management of these medications, or dosage changes that might need to take place after surgery. Discuss this with your provider before surgery so that you can 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. Walking after surgery is important because it **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 walking. You can start in short increments by walking around your room, and work your way up to walking in the hallways of the hospital unit.
- 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.
- In between walking, sit up on the edge of the bed, or in a chair. Your goal for today is to be out of the bed more often than you are in the bed.

## Post-Op Medications

You will be given prescriptions for pain, nausea, a stool softener, and a medication to prevent stomach ulcers. You will need to take the medication that prevents stomach ulcers 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. If you are taking an extended release medication, consult with the prescribing physician prior to your bariatric surgery to see if adjustments need to be made to the medication.

**Physical Activity** - Start with light daily physical activity immediately. Avoid any strenuous activity for 4-6 weeks.

**No lifting, pushing, or pulling** over 15 pounds until cleared by your surgeon at your first postoperative appointment.

**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, or swim in a swimming pool, lake, ocean, 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 (foul-smelling drainage, redness around the incision, or fever over 100.4 degrees).***

**Driving** - No driving while taking pain medication.

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



~~Impossible~~  
~~Unachievable~~  
~~Unable~~

**Do NOT** take any BC or Goody Powders, NSAIDS (Celebrex, Naproxen, Toradol, Mobic, Dicofenac, Motrin, Ibuprofen, or Aleve). These medications can help promote the formation of ulcers. If you have been prescribed Aspirin (for your heart or for other reasons), please speak with your provider in regard to continuing it after bariatric surgery.

## When to Call?

**Call 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 over 100.4 degrees F or chills
- Increased heart rate greater than 120 beats per minute for four hours
- Worsening abdominal pain that is not relieved by pain medication
- Nausea or vomiting that is not relieved by nausea medication
- Swelling, redness, or tenderness in one or both legs
- Inability to reach fluid intake goal for several days in a row
- Dizziness that does not go away
- Constipation greater than 7 days, with associated symptoms of nausea and vomiting or lower abdominal pain
- Changes at the incision site, such as:
  - Bleeding
  - Redness
  - Burning
  - Swelling
  - Tenderness
  - Warmth
  - Foul-smelling drainage



## 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 sugar-free 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. Do not drink with a straw.
Dehydration	Keep track of how much you are drinking with a food journal, or with a food tracking app (such as Baritastic).

### Stuck Food Recipe:

- ½ tsp Adolph's Meat Tenderizer
- 1 tsp Real Lemon Juice
- ½ Cup Warm Water



Mix Ingredients well.  
Sip over one hour.  
Eat nothing else  
during this time.



## Constipation

Constipation after surgery is very common. Your body is adjusting immediately after surgery, so you may experience a new bowel pattern. Patients will need to adapt to a new bowel habit as they are losing weight in the first few weeks.

### Signs of constipation:

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



If you are experiencing fewer bowel movements with these symptoms, follow these steps to treat constipation.

### Reasons you may be experiencing constipation:

- Insufficient water intake. Many post-op issues are brought on by dehydration.
- The anesthesia and pain medication from surgery can slow bowel function. Additionally, it may take a little longer for the bowels to “wake up” since you are now eating less food than you were prior to surgery.
- Increased protein intake is your main source of nutrition after surgery. However, many protein sources have little fiber content.

### Steps to treat constipation:

- Hydrate! Increase your water intake as a first line of treatment after surgery. Your fluid intake goal is 64 oz. daily.
- Walking immediately postoperatively, even for a few minutes, can significantly improve bowel habits. Most physical activity will help improve symptoms of constipation.
- Lifting greater than 15 pounds after surgery should be avoided till cleared by your surgeon.
- Start a bowel regimen immediately after surgery
  1. Begin taking Docusate (Colace) 100 mg twice daily starting the day of surgery, and continue for 7-10 days.
  2. Miralax can be added (once-twice daily) if you are not able to have a bowel movement by postoperative day 4.
  3. On postoperative day 6, if you have not had a bowel movement, and are experiencing abdominal pain, call the office (501) 227-9080.
  4. If you have not had a bowel movement by postoperative day 8-9, call the office at (501) 227-9080, even if you are not experiencing abdominal pain.

## 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
<b>Symptoms:</b> <ul style="list-style-type: none"> <li>• Bloating and Abdominal Cramps</li> <li>• Nausea, Vomiting, Diarrhea</li> <li>• Rapid heartbeat &amp; sweating</li> <li>• Dizziness or fainting</li> </ul>	<b>Symptoms:</b> <ul style="list-style-type: none"> <li>• Hunger</li> <li>• Confusion</li> <li>• Fatigue</li> <li>• Tremors &amp; fainting</li> </ul>

### 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 \_\_\_\_\_  
\_\_\_\_\_
5. 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 of rapid weight loss after surgery, and weight loss often feels effortless. This time period can vary widely from individual to individual. 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 is covered by some insurance plans, depending on the plan. 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. Take notice of the taste, texture, smell, and appearance of food. Be mindful of 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 personal electronic device, 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 overly 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 so that you will know that you are close to being full. At this point, take a break from eating, and finish once these signs of fullness have passed.

Use the Hunger-Fullness scale to build awareness of hunger and satiety cues. This rating system is purely subjective.

1	dizzy/nauseous/shaky
2	irritable/headache
3	growling stomach
4	1st sign of hunger
5	physically full
6	satisfied
7	slightly uncomfortable fullness
8	need to unbutton pants fullness
9	Thanksgiving full
10	binge fullness/sickness

## 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.
    - 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.

## Journaling and Self-Reflection



**Reflective journaling** is the practice of documenting both your experiences, and your interpretation of those experiences. This self reflection can lift your mood, and improve problem-solving ability. Start by recording daily meals, water intake, exercise/movement, and supplement intake. You might also list interesting insights you've had. For example, you might list a new recipe you enjoyed, or foods that you were not able to tolerate. Other examples include something that made you laugh throughout the day, or something that your friend or family member did that you admired. Reflective journaling can help reduce stress and create a calm environment at night. Journaling about negative thoughts, feelings, and experiences can also help you overcome them. However, this practice is helpful only if you view these experiences as

growth, change, or closure. Take time to be introspective, and to see how you feel deep down about the experience. Ask yourself what emotions this experience brings up, and what can be learned from the experience. The important step is what you will do the next time a similar experience occurs. Having written down what you will do makes it more likely that you will follow through when the time comes. The questions to ask during your reflective journaling 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 have grown over time. The greatest benefit of reflective journaling is to create the mindset of constant self-improvement, and a more fulfilling life. When it comes to weight, consistent behavior is the key to supporting healthy habits. Reflective 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

free, designed for bariatric patients to track nutrition, physical activity, and water intake daily; gives recipe suggestions



#### Fooducate

mostly free, allows you to scan barcodes at the grocery store and retrieve nutritional information.



#### MyFitnessPal

free, food, and exercise tracking



#### Nike+ Training Club

to track physical activity



#### Waterlogged

free, water intake tracking, reminds to drink water throughout the day



#### Body Space

To track physical activity



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.

[illegible]

## Post-Op Map - Year 1

*(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.

### **3 weeks after surgery**

☐ Surgeon Appointment      Date & Time: \_\_\_\_\_

### **4-8 weeks after surgery**

☐ 6 week Post-op Class      Date & Time: \_\_\_\_\_

### **3 months after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **6 months after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **12 months after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

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

## Lifelong Follow-Up Map

*(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.

### **2 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **3 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **4 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **5 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **6 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **7 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **8 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **9 years after surgery**

☐ Clinic Appointment      Date & Time: \_\_\_\_\_

### **10 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.**

## 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
- Non-adherence 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.
- Invite your family members to join you in healthy lifestyle rhythms that are maintainable!



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

## References

- ▶ Mechanick, J. et al. (2020). Clinical practice guidelines for the perioperative nutrition, metabolic, and nonsurgical support of patients undergoing bariatric procedures – 2019 update: Cosponsored by American Association of Clinical Endocrinologists/ American College of Endocrinology, The Obesity Society, American Society for Metabolic & Bariatric Surgery, Obesity Medicine Association, and American Society of Anesthesiologists. *Surgery for Obesity and Related Diseases*, 16(2), 175–247.  
<https://doi.org/10.1016/j.soard.2019.10.025>
- ▶ Centers for Disease Control and Prevention. (2023, September 21). *Overweight & obesity*. Centers for Disease Control and Prevention. <https://www.cdc.gov/obesity/index.html>