

## Guidelines for Success: First month after surgery

**Important:** Call the office if you are experiencing any of the following:

- Increasing abdominal pain
- Diarrhea, more than six episodes a day
- Surgical incisions become increasingly red surrounding the incision or have foul drainage
- Nausea/vomiting and unable to consume the recommended foods and fluid
- Fever greater than 101.5°

Call **911** or go to the emergency room if you are experiencing a life threatening condition. If you have non-life threatening concerns, please call the office at 585-341-0366.

## Bariatric Medications/Vitamins Guide

	Dosage	Gastric Bypass	Sleeve Gastrectomy	
Complete Multivitamin/Mineral Celebrate	1 chew/tab	2x daily Celebrate 60: 2x daily	2x daily - multivitamin 1x daily – Celebrate One	
Calcium citrate Vitamin D	600 mg 400 IU	2x daily	2x daily	Calcium carbonate can be used but should be taken with meals
Omeprazole (Reduces acid in your stomach)	20 mg	1x daily for 2 months - unless you have a history of GERD	1x daily for 2 months - unless you have a history of GERD	
Ursodiol (Helps you to avoid gallstone formation)	300 mg	2x daily for 6 months – only if you have a gallbladder	2x daily for 6 months – only if you have a gallbladder	
Iron/Ferrous Sulfate	325 mg (65 mg elemental iron)	1x daily – unless you are taking Celebrate	Only if your provider recommends	Separate calcium and iron by 2 to 3 hours for best absorption of both minerals
Vitamin B12	1000 mcg	1x daily – unless you are taking Celebrate	1x daily – unless you are taking Celebrate	
Thiamin B1	12 mg (minimum)	1x daily – unless you are taking Celebrate	1x daily – unless you are taking Celebrate	Most dosages are 50-100 mg

**DO NOT TAKE NSAIDS (Non-Steroidal Anti-Inflammatory Drugs)** For example ibuprofen, naproxen, Motrin®, Advil®, Aleve®, Celebrex® and Mobic®. These medications will increase your risk of ulcer formation and GI bleeding.

## Diet and Exercise

### Hydration

It is important that you drink 64 ounces of fluid each day. Not getting the recommended daily fluid intake can cause nausea, headaches, decreased energy levels and constipation.

### Diet – Pureed Meal Plan

- All foods **must be the consistency of applesauce or baby food**. Your pouch is in the healing phase. Consuming foods not on the pureed diet will put you at **risk for complications**.
- Protein intake is very important. Be sure to set a goal of at least **60g or more of protein per day**. If you have any questions on the meal plan please send the dietitian a MyChart message or call the office at 585-341-0366.

### Exercise

You may start walking outside or on a treadmill as soon as you feel well enough. Work your way up gradually to **30 minutes per day of exercise, 5 days per week**.

## Personal Care

### Constipation

Constipation is common after bariatric surgery. This can be due to iron supplements, pain medication, decreased fluid and decreased fiber intake. If you experience constipation:

- Increase your fluid intake
- Continue with Miralax and Colace twice a day
  - If you are still not moving your bowels at your normal pre-surgery frequency, you can increase the Miralax to three times a day for one day.
  - If you do not have results after this, you may use **one** of the following. Please **follow package instructions**:
    - Milk of Magnesia
    - Magnesium citrate
    - Dulcolax pills or suppository
    - Fleet enema

### Skin Care

- If you have glue on your incisions, this will fall off on its own. Steri-Strip bandages may have been applied. You may shower with them on. Pat dry after showering. They will eventually dry up and the ends will begin to curl. This may take up to 5 days. You may then begin to take them off.
- **Do not apply any lotions** or antibiotic cream to your incisions.
- Do not cover your incisions with Band-Aids unless they are draining or rubbing against your clothing.
- Showers only. **NO swimming, baths or hot tubs** until your incisions have healed and any scabs have fallen off.

### Smoking

**NO SMOKING!** Smoking increases your risk of gastritis or ulcers in your pouch.

### Birth Control

Weight loss can increase fertility. **You must wait at least 1 month after surgery to use birth control pills.** In the interim, all females of childbearing years who are sexually active must either refrain or use a condom as a form of birth control. We strongly recommend that you **DO NOT BECOME PREGNANT until 2 years** after your surgery. It has been shown that women who had absent or irregular periods before surgery are likely to begin regular cycles and ovulation with weight loss. If you were not able to get pregnant before surgery this can change with weight loss.

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## Lifestyle Changes

### Monarch Support Group

The Monarch meetings are held on the 2nd Wednesday of each month. Register to participate at [bariatricsupport.urmc.edu](http://bariatricsupport.urmc.edu).

### Return to work

- You will return to work 2 weeks after your day of surgery, sooner if you are feeling up to it. You will not have any restrictions once you return to work.
- There is no exception to this policy unless you have experienced complications in the postoperative period.

### Your weight loss

- Do not weigh yourself more than 1x per week for the first 3 months as fluid intake and constipation can affect weight.
- Make sure you are eating and drinking as recommended in this packet. You will be weighed at each of your office visits.
- Our goal is for you to lose 60% or more of your excess body weight at the end of your first year.
- The rate of weight loss differs between people. Try not to compare yourself with anyone else.

## Office Visit Schedule

7-10 days post-op	This visit will be with a provider. Labs will be drawn at this visit.
4-6 weeks post-op	This visit will be with the dietitian and will be held via Zoom. No labs will be drawn at this visit. <b>Please keep a food journal for one week prior to your visit</b> so that you may review this with the dietitian.
2-3 months post-op	This visit will be with a provider. Labs will be drawn at this visit.
6 months post-op	This visit will be with a provider. Labs will be drawn at this visit.
1 year post-op	This visit will be with a provider. Labs will be drawn at this visit.
Annuals	This visit will be with a provider. Labs will be drawn at this visit.

**Research shows that patients who consistently follow up with visits to their surgeon's office maintain a higher percentage of weight loss.**

### Lab Results

You will receive a MyChart message or a letter from this office if your labs are abnormal and require any adjustment to your vitamins/supplements. **If your labs are all within normal limits you will not receive a message or a letter.**

We will check the following labs at each visit:

- CBC
- Chemistry
- Vitamin D
- Iron
- Ferritin
- B12
- Folate
- PTH

### MyChart Portal:

- You may access your health information through MyChart at **mychart.urmc.edu**
- If you do not have a MyChart account, click on the button "I don't have a code" under "Sign Up"