

Guidelines for Success: Annually after surgery

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

Increasing abdominal pain

Nausea/vomiting and unable to consume the recommended foods and fluid

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

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 – Lifestyle Bariatric Meal Plan

Continue to prioritize following the lifestyle meal plan (60g Protein and 1300-1500 calories daily). Your volume of food should be 1- 1 ¼ cups of food per meal.

Exercise

A good fitness routine will include a combination of flexibility, cardio and strength training.

Aim to incorporate moderate aerobic physical activity to include a minimum of 150 minutes per week

(30 minutes x5/week) and an ultimate goal of 300 minutes/week, including strength training 2 to 3 times 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

Lifestyle Changes

Monarch Support Group

The Monarch meetings are held on the 2nd Wednesday of each month. Register to participate at bariatricsupport.urmc.edu.

Your weight loss

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.

Energy Level

Your energy level should be back to normal, if not better than before!

Body-Contouring Surgery

Body-contouring surgery may be performed after bariatric surgery to manage excess tissue that impairs hygiene, causes discomfort, and is disfiguring. This surgery is best pursued after weight loss has stabilized (12-18 months after bariatric surgery). If loose or "hanging" skin is a concern you may contact the Life After Weight Loss initiative at the University of Rochester Medical Center by calling (585)-276-5295 for a consult.

Bone Density Test

Bone density measurements are recommended 1-2 years after surgery to establish a baseline and every 2-3 years thereafter as weight loss surgery increases your risk for bone thinning (osteoporosis).

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"