

Laparoscopic Gastric Bypass and Sleeve Gastrectomy CareMap

Before Surgery Day	Day of Surgery
What to Do	What to Bring to the Hospital
☐ If you use a CPAP: Before your test review, get a "proof of CPAP/BiPAP compliance" from your sleep medicine or	☐ Your bariatric notebook.
primary care provider (PCP).	☐ Your current medicine list and home medicine bottles for review. Remember: You cannot take these
 Bring your bariatric notebook to every clinic visit and to the hospital on the day of surgery. 	medicines while you are in the hospital.
☐ Starting 3 to 5 weeks before surgery: Eat a low carb, very	☐ Your own CPAP/BiPAP machine, if you use one.☐ One 8-ounce bottle of apple juice.
low-calorie diet. Take vitamins as you were taught by the bariatric dietitian.	At the Hospital
If you live more than 2 hours away from UWMC, plan for a place to stay in the Seattle area for 5 days after surgery.	Before surgery:
☐ Schedule a clinic visit with your PCP and chronic pain provider (if you have one) for 1 week after surgery.	☐ You will be told to arrive at the hospital 2 to 3 hours before your surgery is set to begin. Right after you park at the hospital, drink one 8-ounce bottle of apple juice. After that, do not eat or drink anything more before your surgery.
Plan and confirm who will take you home from the hospital after surgery.	☐ Use the bathroom before moving to the operating room.
	After surgery:
Day Before Surgery ☐ Follow your pre-surgery shower and shaving instructions:	☐ Use your incentive spirometer 10 times every hour while you are awake. Take 10 deep breaths each time.
Take your 5 "pre-op" showers starting 2 days before surgery: morning and evening, morning and evening, and morning.	☐ Wear compression devices (leg wraps) on your legs while in bed until discharge. This will help with blood flow.
☐ Review "Preparing for Surgery" and "Bariatric Surgery Education Packet" in your bariatric notebook.	☐ Get out of bed with help.
	☐ Be assessed by Physical/Occupational Therapy (PT/OT), as needed.
Night before surgery:	☐ If you use a CPAP/BiPAP machine, use it while sleeping and napping.
□ Drink one 8-ounce bottle of apple juice before midnight. After that, you may have only clear liquids (see the "Bariatric Hydrating Liquids" handout).	You will be on IV fluids, but you may take sips of water from a 1-ounce medicine cup. (Goal: Sip 1 ounce over 15 minutes.) You may not order from the kitchen. 1-ounce medicine cup

Day 1 After Surgery	Preparing for Discharge
 □ Keep wearing leg wraps while in bed. Do this until discharge. □ Get out of bed in morning with help. □ Practice moving from bed to chair with help. □ Sit up for all meals. □ Work with Occupational Therapy (OT). □ If needed, order adaptive equipment such as a walker or cane. □ Walk in hall with help 5 times: □ 1 □ 2 □ 3 □ 4 □ 5 □ Start doing your Home Exercise Program 2 times a day: □ 1 □ 2 □ Start bariatric liquids: Sip liquids slowly from a 1-ounce medicine cup over 15 minutes. Your goal is to slowly sip four 1-ounce medicine cups over 1 hour, with a daily goal of 48 ounces. Start tracking your liquid intake on your worksheet. □ Keep using your incentive spirometer. 	To Do Before Discharge □ Pick up your discharge medicines from the pharmacy. □ Confirm follow-up clinic visit in 1 week with PCP and chronic pain provider (if you have one). □ Confirm follow-up bariatric clinic visit in about 2 weeks. To Learn Before Discharge □ Enoxaparin: Pharmacist will teach you how to give an injection, side effects, and interactions. □ Discharge medicines: When and why to take — you may swallow the pills whole, or crush as needed. □ How to manage diabetes medicines (if needed). □ Warning signs to report and who to call. □ Diet: Slowly advance to bariatric liquid diet. Stay on this diet until your bariatric clinic visit, about 2 weeks after discharge. □ How to track your hydrating liquids: Slowly sip 8 oz. over 1 hour with a daily goal of 64 oz. □ Incentive spirometry, deep breathing, coughing (continue at home for 1 week). □ Incision care (continue through recovery). □ OT activities of daily living and activity restrictions (continue at home). Goals to Meet Before Discharge □ Manage your pain and nausea by taking medicines by mouth. Pain medicine should only be taken for moderate to severe pain that is not controlled with Tylenol. □ Show you can take care of your incisions. □ State signs to report to your doctor, such as vomiting that does not go away, severe constipation, severe abdominal pain, abnormal bleeding, or signs of infection. □ Be able to walk by yourself safely. □ Give yourself Enoxaparin injections. □ Schedule a support person for at least part of each day for the first 1 to 2 weeks. You will need help with meals, shopping, chores, personal care, driving, and child or pet care.

Week 1 After Surgery	Week 2 After Surgery
 Bariatric blended liquid diet. Follow-up clinic visit with your PCP to review medicines and to check how you are feeling. 	☐ Continue bariatric blended liquid diet until approved to advance by surgeon at your clinic visit.
☐ Follow-up visit with your chronic pain provider, if you have one.	□ Bring your vitamins to your clinic visit. □ Bring your bariatric notebook to your clinic visit. □ Follow up with surgeon and dietitian at your clinic visit.
 □ Keep doing your Home Exercise Program 30 minutes a day, 5 days a week. □ Keep tracking your liquid intake on the worksheet or on your phone. □ Keep using your CPAP/BiPAP machine while sleeping and napping (if you have sleep apnea). 	
 □ Incentive spirometry, deep breathing, coughing □ Incision care 	

Terms

Bariatric hydrating liquids: Drink **only** liquids that are low in sugar or sugar-free, such as Crystal Light, MIO, water, decaf tea, and Jell-O.

Bariatric blended liquid diet: On this diet, slowly sip foods that are blended to a consistency of a smooth liquid that you can easily pour. Do **not** eat any chunks of solid food, even small pieces. Please see your bariatric notebook for full details on this diet.

Continuous or bilevel positive airway pressure (CPAP/BiPAP): A device that keeps the airway open for people who have *sleep apnea*.

Incentive spirometer: A device you breathe into to help your lungs expand. Doing this helps prevent pneumonia.

To learn more, please read your bariatric notebook, the manual you received in clinic.

Questions or Concerns?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Weight Loss Management Center:

Weekdays from 8 a.m. to 5 p.m., call 206.598.2274

After hours and on weekends and holidays, call 206.598.6190 and ask for the surgeon or resident on call to be paged.