### Day of Surgery
- Keep head of bed raised at 45-degree angle
- Ice chips only
- Sequential compression devices (SCDs) on legs to prevent blood clots
- Continuous oxygen saturation monitoring
- Continuous oxygen by nasal cannula until saturation above 92% on room air
- Patient-controlled analgesia (PCA) to control pain
- Urinary catheter
- Ceiling lift sling
- IV fluids until taking 14 ounces every 8 hours
- Gastrostomy tube to drainage bag (if present)
- Use CPAP machine, if used at home

### Day 1 After Surgery
- If stable, will start bariatric liquid diet in morning
- Clamp gastric tube (if present)
- Begin oral pain medicine when tolerating liquids
- Remove urinary catheter in morning
- Lovenox injection to prevent blood clots
- Stop IV fluids and remove IV access

### Day 2 After Surgery
- Bariatric liquid diet as able
- Remove SCDs when walking 3 hours a day
- Pharmacy or care team makes final changes to your discharge medicines

### Treatment and Equipment (Managed by Staff)
- ▪ Keep head of bed raised at 45-degree angle
- ▪ Ice chips only
- ▪ Sequential compression devices (SCDs) on legs to prevent blood clots
- ▪ Continuous oxygen saturation monitoring
- ▪ Continuous oxygen by nasal cannula until saturation above 92% on room air
- ▪ Patient-controlled analgesia (PCA) to control pain
- ▪ Urinary catheter
- ▪ Ceiling lift sling
- ▪ IV fluids until taking 14 ounces every 8 hours
- ▪ Gastrostomy tube to drainage bag (if present)
- ▪ Use CPAP machine, if used at home

### What I Need to Do
- Bring these items with you to the hospital:
  - ▪ Your “Guide to Your Weight Loss Surgery” binder
  - ▪ CPAP machine (if you use one)
- After surgery:
  - ▪ Use incentive spirometer 10 times every hour while awake, 10 breaths each time
  - ▪ Get out of bed with help on day of surgery
  - ▪ Participate in Physical/Occupational Therapy (PT/OT) evaluations
  - ▪ Begin Home Exercise Program
- ▪ Get out of bed in morning with help; up for all meals
- ▪ Work with PT/OT
- ▪ Practice moving from bed to chair with help
- ▪ Walk in hall with help 5 times: □ 1 □ 2 □ 3 □ 4 □ 5
- ▪ Bathe (with help, if needed)
- ▪ Do Home Exercise Program twice a day: □ 1 □ 2
- ▪ Sip liquids slowly from a 1-ounce cup; stop when full
- ▪ Get bathed and dressed without help
- ▪ Do Home Exercise Program on your own

### What I Need to Learn
- □ Lovenox side effects and interactions (with pharmacist)
- □ How to give myself an injection
- □ Nutrition/diet education: sugar-free liquids, advancing to blended diet at discharge
- □ Incentive spirometry, deep breathing, coughing
- □ Incision care
- □ Gastrostomy tube care (if present)
- □ Discharge medicines: crushed or elixir, when and why to take
- □ How to manage diabetes (if needed)
- □ Signs of complications to report to the doctor

### Planning for Discharge
- □ Order adaptive equipment as needed (walker, cane, etc.)
- □ Talk with social worker about discharge issues, if needed:
  - □ Home health
  - □ Transportation
- □ Create plan for walking, exercising at home
- □ Equipment for home will be delivered
- □ Arrange home health, transportation, housing
- □ Pick up medicines for home
- □ Confirm follow-up visit in 2 weeks, plan for blood draw 1 hour before appointment
- □ Set up visit with primary care provider in 1st week after surgery
**Goals to Meet Before Going Home**

Before you are discharged, you must:

- Not have nausea or vomiting after eating
- Be getting enough nutrients by eating
- Be able to manage your pain with your home pain medicine plan
- Show that you can take care of your incision and gastrostomy tube (if present)
- State signs to report to your doctor, such as vomiting that does not go away, severe constipation, abdominal pain, or signs of infection
- Be able to walk by yourself and climb stairs safely
- Give yourself Lovenox shots
- Be able to care for yourself or have enough support at home to help

**Medical Terms**

**Bariatric liquid diet:** On this diet, you can have only clear and full liquids that are low in sugar or sugar-free, such as water, tea, Jell-O, milk, broth, and pudding.

**Ceiling lift sling:** An overhead mechanical lift that may be used to help turn you or help you get out of bed.

**Continuous oxygen saturation monitoring:** A device on your finger that measures the amount of oxygen in your blood.

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

**Gastrostomy tube:** A drainage tube that comes out of your belly. It drains fluids from your lower stomach piece. Most patients do not have a gastrostomy tube.

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

**IV fluids:** Fluids in a bag that are delivered into your body through a tube placed in your vein.

**Oxygen nasal cannulas:** Plastic prongs that sit in your nostrils to deliver oxygen.

**Patient-controlled analgesia (PCA):** A machine that lets you push a button to give yourself pain medicine. The medicine enters your body through your IV line.

**Sequential compression devices (SCDs):** Wraps on your legs that squeeze from time to time to prevent blood clots. After surgery, you will have these on until you are walking 3 hours a day.

**Urinary catheter:** A tube that drains urine from your bladder.