

Getting Started

For candidates for weight loss surgery

This section of the Guide to Your Weight Loss Surgery explains the referral process, medical and insurance criteria, expected costs, and what will happen at your first and second clinic visits at University of Washington Medical Center (UWMC).

Bariatric Surgery Seminar

If you are thinking about having weight loss surgery, we invite you to attend a Bariatric Surgery Seminar. This seminar will provide you and your family with basic information about weight loss surgery. The goal of the seminar is to help you make an informed medical decision.



Bariatric Surgery is part of the Surgical Specialties Clinic at UWMC.

Referral Process

Your primary care provider (PCP) must refer you for this surgery. To begin the referral process:

- You or your PCP should call UWMC's Surgical Specialties Clinic's intake line at **206-598-2274**.
- You or your provider will leave your contact information and request a *bariatric surgical screening* phone call.
- For your screening phone call, our intake office will call you and ask questions to see if you meet the criteria to start the program.

If you meet the medical criteria for weight loss surgery, your patient information is given to the patient services specialist (PSS) to start your patient file and begin the process of financially clearing you for surgery. The PSS will:

- Ask for insurance information to verify your health care coverage.
- Check your insurance for weight loss benefits.
- Find out your insurance company's requirements for getting authorization for you to have the surgery.

Requirements for Bariatric Surgery at UWMC

To have weight loss surgery, you **must**:

- Be between 18 and 60 years old. The bariatric surgeon must approve patients older than 60 or younger than 18.
 - Be referred by your primary care provider. Your PCP **must** be willing to assist your surgeon in your care after the surgery. Patients should have a good working relationship with their PCP.
 - Have a body mass index (BMI) of:
 - 40 or higher
 - **Or**
 - 35 or higher, with major obesity-related health problems
- (See the BMI calculator on page 13.)
- Have tried to lose weight using a nutritionally and medically safe diet, not fad diets.
 - Not have other medical problems that would make surgery too risky.
 - Be willing to make needed changes in your eating habits. You need to really want to make these changes to be able to lose weight.
 - Not smoke cigarettes or use tobacco products for 3 months or longer before starting our program. Your urine will be checked for signs of tobacco use. We ask that you stop smoking before your first visit with the surgeon.
 - Not plan to become pregnant for at least 18 months after your weight loss surgery.

Paying for Weight Loss Surgery

Insurance Coverage

Insurance coverage for weight loss surgery depends on the benefits your plan offers. Even if your doctor thinks you are a good candidate for bariatric surgery, this does not mean your insurance will pay for it. Not all companies that provide health insurance for their employees buy this benefit.

Insurance companies change their plans on a yearly basis, and benefits can change without much notice. Coverage may also be based on your employment status or other issues.

Our PSS will check your insurance plan for specific benefits for weight loss surgery. If you do **not** have insurance benefits for this surgery, our PSS will tell you.

Paying for Your Surgery Yourself

If your insurance does not cover weight loss surgery, you must find other ways to pay for the consultation and surgery. You **must** pay the full amount before your surgery is done.

Our Patient Services Specialist (PSS) will give you a price quote for your specific weight loss surgery. Expect costs close to these:

- Gastric bypass surgery: \$35,000 or more
- Laparoscopic sleeve gastrectomy: up to \$30,000
- Laparoscopic gastric banding: \$25,000 or more

Body Mass Index (BMI) Calculator

BMI = Weight in pounds multiplied by 700, divided by height in inches squared

BMI	25	30	35	40	45	50	55	60	65	70	75	80
Height (Inches)	Body Weight (Pounds)											
58	119	143	167	191	215	239	263	288	311	330	359	385
59	124	148	173	198	222	247	272	297	323	348	372	397
60	128	153	179	204	230	255	281	307	334	359	384	409
61	132	158	185	211	238	264	290	315	345	370	395	423
62	136	164	191	218	246	273	301	332	360	386	410	440
63	141	169	197	225	254	282	310	342	367	393	422	451
64	145	174	204	232	262	291	320	354	380	410	437	466
65	150	180	210	240	270	300	330	360	390	420	450	480
66	155	186	216	247	278	309	341	371	402	433	464	495
67	159	191	223	255	287	319	351	382	415	446	478	510
68	164	197	230	262	295	328	362	396	430	464	495	526
69	169	203	236	270	304	338	373	408	442	477	510	543
70	174	209	243	278	313	348	383	418	453	488	523	558
71	179	215	250	286	322	358	394	430	466	502	538	573
72	184	221	258	294	331	368	405	442	479	516	554	589
73	189	227	265	302	340	378	417	457	495	535	570	606
74	194	233	272	311	350	389	429	469	509	548	587	625
75	200	240	279	319	359	399	440	480	519	559	599	639
76	205	246	287	328	369	410	451	492	533	574	615	656

Medical Insurance Criteria

Most health insurance plans look at these criteria when they are considering paying for weight loss surgery:

- Age 18 to 60
- Diabetes
- Hypertension
- Gastroesophageal reflux disease (GERD) or heartburn
- Sleep apnea
- Arthritis of weight-bearing joints (knees and hips)
- Body mass index (BMI) greater than 35

*(Most insurance plans require either a BMI of 40 or greater **OR** a BMI of 35 with complications of obesity such as diabetes, sleep apnea, or high blood pressure.)*

- Above your ideal body weight by 60 to 100 pounds, for a specific length of time

(Some insurance companies require 5 years of being overweight, documented by your health care provider.)

Some insurance companies require 6 months or more of a doctor-supervised weight management program before they will pay for the surgery.

Learning About Your Surgery

This manual provides basic information about weight loss surgery. You will learn more during your first clinic visit.

First Clinic Visit

During your first clinic visit, you and your surgeon will talk about your weight loss history:

- How much weight you lost
- What you did to try to lose the weight
- How you lost the most weight

Your surgeon will also:

- Describe your weight loss surgery options in detail.
- Talk with you about the lifestyle changes you will have to make for the surgery to have long-term success.

- Tell you what tests and consultations you must complete before you can schedule your second clinic visit. We will give you a copy of the “Bariatric Worksheet,” which lists all the tests and consultations often done before weight loss surgery. Your surgeon will check only the tests and consultations you need. At the end of this first clinic visit, we will schedule you for the tests you need.
- Talk with you about the risks of the surgery, how much weight loss to expect, and how long it may take you to lose the weight.
- Review the Bariatric Team’s responsibilities to you, as well as your responsibilities during this entire process. YOU are an important member of your Bariatric Team!

Why do I need to have so many tests?

For your safety, we need a clear picture of your health before we schedule your surgery. The tests listed in the “Bariatric Worksheet” can show if you have liver problems, breathing problems, excess fluid in your tissues, too much or not enough salts and minerals in your body fluids, or abnormal blood fat levels.

For instance:

- It is important to test your **thyroid function**, since *hypothyroidism* (low thyroid hormone production) can lead to sudden death after surgery.
- If you have **diabetes**, you must take special steps to control your blood sugar.
- We will also test your **heart** to see if it will be able to handle the stress caused by surgery.

Some health conditions, such as serious heart or lung problems, can increase the risk of any surgery. But, these conditions may also increase the need for weight loss surgery. Your surgeon will carefully review your test results and will make a recommendation based on that assessment.

Routine Tests and Evaluations

All candidates for weight loss surgery will have these tests:

Blood Tests

Complete Blood Count (CBC with platelet count)

This test gives information about the kinds and numbers of cells in your blood. From these results, doctors can evaluate and diagnose conditions such as *anemia* (a low red blood cell count).

Chemistry Screen (Complete Metabolic Panel)

This test gives your doctor information about your general health and shows anything that is not normal. There are different versions of this test. The most complete one measures 20 substances in the blood and can include *glucose* (blood sugar), *cholesterol* (a type of steroid found in the blood), and *triglycerides* (a form of fat).

Blood Glucose Test (Included in Chemistry Screen and HbA1c)

This test measures the amount of sugar in your blood. There are 3 ways this test can be done:

- The *fasting blood sugar test* is done 12 to 14 hours after your last meal.
- The *postprandial blood sugar test* is done 2 hours after a meal.
- A *random blood sugar test* is done any time.

The *HbA1c* test tells us your average blood sugar level over the last 3 months.

Thyroid Test (TSH)

Thyroid hormones control activity in your cells and affect your body temperature, appetite, sleep, and mental health. This test will show if your thyroid hormones are normal or too high or too low.

Dietary Evaluation

At your visit, your dietitian will talk with you about the diet changes you can expect after surgery and how to maintain a healthy, successful weight-loss program. The dietitian will plan a 1,000-calorie daily diet for you to start 3 weeks before your surgery.



Good support from your family, friends, and community is a key factor for success with weight loss surgery.

Psychosocial Assessment

Your first meeting during this time will be with a social worker for a *psychosocial assessment*. The purpose of this meeting is for the social worker to learn about different aspects of your life to help you prepare for the surgery. This visit takes about 60 to 90 minutes.

The social worker will talk with you about your:

- **Social situation:** This includes your family history, current family structure, education level, financial status, and employment history.
- **Support system:** Good support from your family, friends, and community is a key factor for success with this surgery. Your support network can help provide emotional support during the surgery process, help with your physical needs after surgery, and help you make lifestyle changes that will help you get the most benefit from your surgery. You will talk with your social worker about your support system and will help you develop additional support, if needed.

- **Substance abuse history:** The social worker will ask you about your history of tobacco, alcohol, and other drug use.
- **Mental health:** If you have any emotional issues that may affect your success after surgery, the social worker may ask you to see a therapist for counseling. A therapist can help you with the many emotional issues that can arise when having a surgery like this.
- **Eating behaviors:** The social worker will ask you about your current eating behaviors. You will also talk about the changes you will need to make to prepare for and get the most benefit from the surgery. The social worker will review with you how changing your eating behaviors might affect your mental health.

Other Tests and Evaluations

Some candidates for weight loss surgery may also have one or more of these tests:

Pulmonary Function Test with Arterial Blood Gas

This test measures how much air you take in with 1 breath and how effective your breathing function is. The arterial blood gas portion of the test shows the amount of oxygen in your blood.

Swallowing Test

This test measures how well your swallowing muscles and esophagus work.

Upper GI X-ray Study or Endoscopy

Patients who have symptoms such as upper abdominal pain, heartburn, or belching sour fluid may have a hiatal hernia, *gastroesophageal reflux* (also called acid reflux, or GERD), peptic ulcer, or other health issues. Up to 15% of patients (15 out of 100) who have symptoms of gastroesophageal reflux show early changes in the lining of their esophagus. These changes could be an early sign of esophageal cancer. It is important to find these changes if they are there so that a treatment program can be planned, if needed.

Upper Endoscopy

Patients with symptoms or signs of reflux disease or swallowing problems may need an *endoscopy*. To do this, your doctor uses a lighted flexible scope or tube to look for any problems in the lining of your esophagus and stomach. It can also check for a hernia (hole) in the *diaphragm*. The diaphragm is the large muscle between the chest and abdomen.

Gallbladder Ultrasound

If you still have your gallbladder, this test shows whether or not you have gallstones or any blockages in your bile duct system.

Sleep Study (Sleep Apnea Testing)

The sleep study checks for abnormal stopping of breathing, called *apnea*. During apnea, the airway is blocked when your throat relaxes during sleep. This condition is linked to a high death rate.

After your bariatric surgery, you will be given pain medicines that affect your normal breathing and reflexes. An airway blockage such as apnea is more dangerous at this time. It is important that we know before your surgery what to expect so that we are prepared to handle it.

Medicine Consult

Your surgeon may order an evaluation by UWMC medicine specialists. These specialists will assess your medical risk for surgery and will help the bariatric surgeon manage other medical conditions, such as diabetes, hypertension, and lung disease, while you are in the hospital after surgery.

Cardiac Evaluation

A basic cardiac evaluation shows whether your heart function is normal or abnormal, whether there is any damage in your heart, and other information about your heart muscle. Other cardiac tests show how your heart muscle contracts, how your heart valves are working, and how your heart responds when it works harder, such as when you exercise.

Electrocardiogram (EKG)

The EKG gives information about your heart function. It is the main test used for diagnosing heart disease.

Echocardiogram

This ultrasound picture shows the heart while it is working. It helps your surgeon assess the condition of your heart muscle and valves.

Physical Therapy and Occupational Therapy

You will have a basic assessment of your physical abilities before surgery. We require 90 minutes of exercise a week for people who will have weight loss surgery. You received an exercise log at the Bariatric Seminar. Please tell our team if you need another log.

Test Results and Your Second Clinic Visit

When the Bariatric Team coordinator has received the results of all of the tests and consultations you have had, you will be scheduled for a second clinic visit to see your surgeon or nurse practitioner. Allow 3 hours for this visit.

At this visit, your surgeon or nurse practitioner will review all of the results with you and let you know if you are a candidate for weight loss surgery at UWMC. Or, they may tell you that you must meet more requirements before you are ready for surgery.



You may have many different types of tests to make sure your body can handle the stress of weight loss surgery.

If you are a candidate for weight loss surgery, these things will occur next:

- We will ask you to read and sign consent forms for your surgery.
- You will have a physical exam.
- Your bariatric nurse will review the self-care instructions you will need to follow before and after your surgery.
- You will need to start a 1,000-calorie-a-day diet. Your bariatric dietitian will teach you about this diet.

After this second visit, the Patient Care Coordinator (PCC) will get authorization from your health insurance company to cover your bariatric surgery.

Once the surgery is authorized, the PCC will call you to schedule a surgery date. Most times, surgeries are scheduled 4 to 8 weeks after your second clinic visit.

Weight Loss Surgery Research

A research coordinator may contact you about having blood tests done after your surgery. These tests are done at specific times after surgery to assess how the surgery has affected your health. Please see page 24 in the section “Preparing for Surgery” in this manual for more information about meeting with a research coordinator.

Getting Ready for Surgery

Once you have a surgery date, the PCC will also schedule your appointments:

- In the Pre-Anesthesia Clinic 3 weeks before surgery
- With your surgeon 2 weeks after surgery

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Center for Bariatric
Surgery: 206-598-2274