

Nutritional Guidelines

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Nutritional Guidelines

In this section, you will find guidelines, tips and ideas to stay motivated while on your weightloss journey. You will also find surgery-friendly exercises and a list of helpful resources to help you continue your path to better health!

Under the direction of your physician, follow these diet guidelines to achieve your goals following weight-loss surgery.

Hydration

It is important to hydrate throughout the day. To stay hydrated, keep fluids with you at all times, and sip frequently throughout the day. Your daily goal is 64 ounces of fluid (eight fluid cups).

Sipping liquids

Drinking too fast will cause nausea and possibly vomiting. It is best to take liquids in slowly by sipping them.

Drinking liquids while eating

Liquids and food do not mix well in the stomach pouch. To prevent severe nausea, do not drink with meals. Stop drinking 30 minutes prior to eating and wait 30 minutes after eating to resume drinking.

Limit caffeine and coffee intake

Caffeine acts as a diuretic and can be dehydrating if consumed excessively. Drinking large amounts of caffeine can produce ulcers.

Limit use of straws

Drinking through straws can increase the air in your stomach and may cause severe discomfort.

No carbonated beverages

Carbonated beverages cause gas, reflux and discomfort, so please avoid.

Calorie-free beverages only

Beverages should have no more than five calories per serving. Juice, sweet tea, soda, and other sugary beverages are too high in calories.

No alcohol

Alcohol causes gas, reflux, discomfort, and could also cause ulcers. Avoid alcohol for at least one year following surgery. Your tolerance to alcohol will be lower following surgery.

Protein first

Consume protein prior to other foods at meal times. Lean sources of protein include: fish, low-fat cheese, eggs and skinless poultry. For sleeve gastrectomy and Roux-en-Y Gastric Bypass, daily protein intake should be a minimum of 65g for women and 80g for men. For Duodenal Switch, daily protein intake should be a minimum of 80g for women and 100g for men.

Nutritional Guidelines

Introduce new foods one at a time

By introducing foods one at a time, you will be able to identify your food tolerance. If you do not tolerate a new food, wait a few days and try again. If you are not tolerating foods, make sure you are not advancing your diet too quickly.

Stop eating before you are full

Stop eating at the first sign of fullness to avoid discomfort.

Eat three meals daily

Fuel your body through the day by eating at the beginning, middle and end of your day. Meals should be balanced and have variety (i.e., fruits, vegetables, lean protein, dairy, whole grains.) If you become hungry between meals, add a small snack. Avoid grazing, which leads to consumption of too many calories.

Do not chew gum

Chewing gum may decrease your thirst and fluid intake. Swallowing gum may cause a blockage in the stomach pouch.

Protein shakes

Protein shakes are used through the first three stages of the post-operative diet plan. After that, don't use them as a primary protein source.

Food tolerance

Meats may be better tolerated if soft, moist cooking methods are used, such as slow cooker or braising. Dry meats (fried, grilled, or over-baked) may not be tolerated. Stringy foods, such as asparagus, pineapple, string beans or roast beef, may not be tolerated.

Quick Tips for Vitamin and Mineral Supplementation After Bariatric Surgery

These vitamin and mineral recommendations apply to Lap-Band®, gastric sleeve, and Roux-en-Y bypass surgeries.

What supplements do I need?

Freeman Bariatric Center recommends taking the following vitamin and mineral supplements after surgery:

- One bariatric multivitamin with minerals and iron per day.
- Sleeve Gastrectomy and Rouz-en-Y Gastric Bypass take 600mg of calcium citrate with breakfast and dinner
- Duodenal Switch take 600mg of calcium citrate with breakfast, lunch and dinner
 (Do not take with multivitamin, because this will decrease absorption).
- 3,000 IU of vitamin D per day
- FOR DUODENAL SWITCH & BYPASS PATIENTS: Take 350mcg vitamin B12 per day (oral, sublingual/nasal forms) OR 1,000mcg injection once per month.

What kind should I buy?

Freeman Bariatric Center recommends *only* liquid or chewable forms for first six months. No gummies and no patches.

After six months, most patients tolerate tablets without problems.

Why do I need them?

Due to restriction and malabsorption that occurs with bariatric surgery, it is important to take daily vitamin and mineral supplements every day for the rest of your life. These supplements help fill the nutrition gaps immediately following surgery and also help prevent nutrient deficiencies long-term.

Quick Tips for Vitamin and Mineral Supplementation After Bariatric Surgery

Hair loss

Alopecia, also known as hair loss, is caused by *malnutrition* or *deficiencies* of certain vitamins, minerals, proteins, and/or essential fatty acids.

Hair shedding, which can occur after surgery, is caused by emotional or physical stress and is unrelated to protein malnutrition or vitamin and mineral deficiencies. Examples of conditions or events that may lead to excessive hair shedding:

- Shock to body: follicle shutdown
- Crash diets
- Some drugs
- Chronic stress
- Thyroid disease

The best prevention for hair loss is to take your vitamin and mineral supplements daily, as described above, and to eat a variety of foods.

Managing Diabetes After Bariatric Surgery

Test blood sugar:

- After surgery you should check your blood sugar frequently because your diabetes treatment will likely change and several factors can affect your blood sugar control (e.g., eating habits, stress, healing, medication changes, exercise, etc.)
- Continue to test blood sugars as previously directed by your doctor unless otherwise directed. You may need to test more often if you experience low blood sugar.
- Call your doctor (who treats your diabetes) regarding patterns of abnormal blood sugar levels:
 - LOWS (Less than 70) 2 or more times in one week
 - HIGHS (Over 250mg/dL) 2 or more times in one week
 - GO TO HOSPITAL if 400mg/dL or higher (and/or if positive for ketones)

Low blood sugar:

- Low blood sugar (hypoglycemia) occurs when blood sugar is less than 70mg/dL
- SYMPTOMS may include: shaky, sweaty, confused, headache, dizzy, light-headed, increased heartbeat, hungry, numbness/tingling around mouth or lips, tired, etc.
- TREAT with 1 tablespoon of syrup, honey, or jelly. Wait 15 minutes, retest blood sugar, and repeat treatment if blood sugar is still less than 70mg/dl.
- CALL DOCTOR if you have two or more unexplained lows in one week. You may need to adjust your treatment for diabetes.
- Risk for low blood sugar after bariatfic surgery is higher due to changes in both eating habits and medication needs.

Medication:

- After surgery, your medication needs will likely change. This may or may not happen immediately after surgery; ongoing follow-up with your physician (who treats your diabetes) and blood sugar monitoring is very important.
- Prior to surgery, you should have talked with your doctor (who treats your diabetes)
 about how to adjust your medication following surgery. If you did not do this, continue
 your current medication/treatment for diabetes at this time and make sure you follow-up
 with and/or contact your doctor to discuss your diabetes treatment within one week
 after surgery.

Dumping Syndrome

What is dumping syndrome?

A condition that is a result of consuming high-sugar, high-carbohydrate foods or foods that are heavy in salt or oil.

Symptoms:

- Diarrhea
- Nausea
- Dizziness
- Weakness
- Rapid pulse
- Cold sweats
- Fatigue
- Cramps

Occurs: Symptoms usually begin quickly, about 10 to 30 minutes after eating. However, some patients experience late dumping syndrome about one to three hours after a meal.

Reason: Rapid absorption of glucose triggers an exaggerated insulin release, causing reactive hypoglycemia (low blood sugar).

How do I prevent it?

- Consume foods and beverages that are low in sugar, oil, salt.
- Limit food choices to less than 25 grams of total sugar per serving.
- Natural sugars, such as dairy and fruit, in moderation.

Behavioral Techniques

Keep a positive attitude

Permanent weight loss requires a change in food attitudes. Stay positive about making healthy food choices.

Make food less visible in your home

Store all food out of sight. Keep food in the kitchen, not on the table, to avoid eating seconds. Store all leftovers immediately following the meal.

Change your food shopping habits

Avoid grocery shopping when you feel hungry. Make a shopping list, and stick to it. Shop the outer walls because whole foods, such as fresh fruits, vegetables, fresh fish, meat, poultry and dairy products, tend to be on the outer aisles of the store. Avoid eating processed foods that are high in calories.

Portion size matters

Weigh and measure portions to learn what a healthy portion looks like. Use small dishes and utensils. Cook just enough for the planned meal.

Take your time

Food must be consumed slowly and chewed thoroughly. Your average meal time should be 20 minutes, but not exceed 30 minutes. Individual bites should be the size of the tip of a pencil eraser.

CAUTION: Tobacco and NSAIDS

Patients **must quit smoking** prior to surgery and to avoid nicotine-containing products for the rest of your life. The number one cause of bleeding ulcers is smoking. Ulcers can occur if tobacco or NSAIDS (non-steroidal anti-inflammatory drugs, such as Advil®, ibuprofen, Motrin®, Aleve®, naproxen, Naprosyn®, Celebrex®, meloxicam, etc.) are used in any amount, even years after surgery. Ask your surgeon before taking these drugs.

Pre-operative Phase

Liver reduction diet

The pre-operative, high-protein, low-calorie diet shrinks the size of the liver. This diet should be followed for seven days prior to surgery.

Diet instructions

Drink liquid protein supplements and sugar-free, noncarbonated, low-calorie liquids. Try to consume at least eight cups of liquid per day. You should be drinking enough protein shakes to equal your daily protein goal. Typically, this equals about three to four shakes per day to reach 65g of protein per day for women and 80g of protein per day for men.

Daily protein goal

Women: 65g of protein Men: 80g of protein

An approved 12-ounce protein shake should fit these criteria:

- No more than 150 to 300 calories
- Less than 15g carbohydrate
- · Less than 6g sugar

Examples of acceptable protein shakes:

Product	Protein Content	Serving Size	Available At
Unjury®	20g	1 scoop	Unjury.com
Muscle Milk Light®	25g	2 scoops	GNC, Walmart
Premier Protein®	30g	11 ounces	Sam's Club, Walmart
Pure Protein®	35g	11 ounces	GNC, Walmart
Slim-Fast Low Carb®	20g	11.5 ounces	Walmart, Walgreens
Ensure Max Protein®	30g	11.5 ounces	Walmart, Walgreens
Owyn-Vegan®	32g	11.5 ounces	Sam's Club
Fairlife - Lactose Free®	30g	11.5 ounces	Amazon, Sam's Club

Between meals you may have the following clear liquids (Those with less than five calories per serving):

Water or flavored water (zero calories)

Propel®

Vitamin Water 10®

SoBe Lean®

Sugar-free Popsicle®

Sugar-free gelatin

Ocean Spray® sugar-free drink mixes Chicken, beef or vegetable broths

Tea (no sugar) Coffee (no sugar)

^{*}Artificial sweeteners may be added to liquids

Phase 1: Bariatric Clear Liquids

During phase one, consume only clear liquids with no calories. Begin sips of protein shakes per physician recommendation.

Hydration

It is important to remain hydrated. Sip liquids between meals, try to drink $\frac{1}{2}$ to $\frac{3}{4}$ cup per hour. Begin sipping a minimum of four to six cups of approved liquid daily, and then gradually increase to eight cups per day.

When do I start this stage?

You will remain on bariatric clear liquids until you are no longer nauseated.

Protein shakes

Begin sipping two to four tablespoons of protein shakes every three hours, as tolerated. Sip slowly to avoid nausea, and stop drinking when you begin to feel full.

Reminder tips to improve your success:

No caffeinated beverages

Caffeine is a diuretic and in large quantities can be dehydrating.

No carbonated beverages

Carbonation will cause gas, reflux and discomfort.

No straws

Straws introduce air into the stomach pouch and cause excess gas.

Sip liquids

Drinking too quickly may cause cramping, discomfort or vomiting.

Drink room temperature liquids

Room temperature beverages are better tolerated than hot or cold liquids.

Between meals you may have sugar-free, low calorie beverages. Choose from the following approved clear liquids:

Water or flavored water (zero calories)

Propel®

Powerade Zero®

Fruit20®

Sugar-free Kool-Aid®

Chicken, beef or vegetable broths

Tea (decaffeinated and no sugar)

*Artificial sweeteners may be added to liquids

Crystal Light®

Sugar-free gelatin

Vitamin Water 10®

SoBe Lean®

Sugar-free Popsicle®

Ocean Spray® sugar-free drink mixes

Phase 2: Bariatric Full Liquids

One week following surgery, you may add one to two tablespoons of the following items to your meals and snacks:

Thinned out, smooth yogurt Skim or 1% milk Plain soy milk Lactaid® milk Unflavored almond milk Rice milk

Low-fat cream soup Strained hot cereal Thinned Cream of Wheat®

Cream of Rice® or Malt-O-Meal®

NO CAFFEINATED or CARBONATED BEVERAGES!

Hydration

Continue to sip liquids between meals, consuming $\frac{1}{2}$ to $\frac{3}{4}$ cup per hour. Sip a minimum of three to five cups of fluid daily, gradually increasing to eight cups. *Note: Contact your surgeon if you are having nausea/vomiting that prevents you from drinking three to five cups of fluid per day.

Protein shakes

Sip a small amount of protein shake, up to $\frac{1}{2}$ cup each time. Stop once you begin to feel full – this may be after only $\frac{1}{4}$ cup. Continue with bariatric clear liquids between meals for a minimum of eight cups of fluids per day.

Vitamins

Add vitamins to your diet as soon as you are no longer nauseated. See vitamin tip sheet for more details.

Phase 2: Sample Menu – Full Liquid

Breakfast ½ cup protein shake (10-12g protein)

2 tablespoons thinned Cream of Wheat

Snack ½ cup protein shake (10-12g protein)

Lunch ½ cup protein shake (10-12g protein)

2 tablespoons strained, low-fat cream soup 1 tablespoon unsweetened applesauce

Snack ½ cup protein shake (10-12g protein)

Dinner ½ cup protein shake (10-12g protein)

2 tablespoons strained, low-fat cream soup

1 tablespoon Greek yogurt, smooth

Snack ½ cup protein shake (10-12g protein)

Phase 3: Puréed Foods

Progression of diet

At this stage, your food should be a smooth consistency without any solid pieces. Begin puréed foods 14 days following surgery or per your surgeon's instructions. You will stay on puréed foods for about seven days.

You may add the following foods to your diet:

- Soft-cooked eggs
- Non-fat refried beans
- Low-fat cottage cheese
- Ricotta cheese
- Sugar-free pudding
- Potatoes mashed, boiled or baked (not fried)
- Puréed soups, no meat chunks
- Puréed vegetables

Hydration

Continue to sip ½ cup to ¾ cup of fluid per hour with a goal of eight cups per day.

Protein

Gastric Sleeve and Bypass patients should consume a minimum of 65g of protein per day for women and 80g of protein per day for men. Consume only the amount of food that is comfortable for you.

Duodenal Switch patients should consume 80g of protein per day for women and 100g per day for men.

Puréed food tip

Puréed foods should be the consistency of applesauce or thick mashed potatoes. To purée foods, place chopped food in blender or food processor, and add just enough liquid to cover the blades. Blend until food is smooth and free of chunks. You may use broth or low-fat milk for the liquid. If you have more than you can eat, freeze in ice cube trays and store in freezer containers for convenience. One cube is equal to ¼ cup. Do not purée meat.

Phase 3: Puréed Foods

Phase 3: Sample Menu #1 - Puréed

Breakfast 2 tablespoons non-fat Greek yogurt, no chunks

2 tablespoons puréed oatmeal (may add cinnamon and artificial sweetener)

1/4 cup protein shake

Snack ½ cup protein shake

Lunch 2 tablespoons low-fat cottage cheese

2 tablespoons puréed vegetable soup

1/4 cup protein shake

Snack ½ cup protein shake

Dinner 2 tablespoons fat-free refried beans

2 tablespoons puréed green beans

1/4 cup protein shake

Evening ½ cup protein shake

Phase 3: Sample Menu #2 – Puréed

Breakfast 1 egg, poached or soft-cooked

2 tablespoons puréed fruit

1/4 cup protein shake

Snack ½ cup protein shake

Lunch 2 tablespoons low-fat ricotta cheese

4 tablespoons puréed carrots

1/4 cup protein shake

Snack ½ cup protein shake

Dinner 2 tablespoons puréed cream of broccoli soup

2 tablespoons puréed peaches (no skin)

¼ cup protein shake

Evening ½ cup protein shake

Phase 4: Bariatric Soft to Semisoft Foods

Diet progression

After seven to 10 days on puréed foods, begin adding very soft and moist foods to your diet. Begin with very soft food that can be mashed with a fork. Add one food at a time to identify food tolerance. At this phase, it is important to separate fluids from food during meals. Remember to pause fluid intake 30 minutes prior to eating and resume fluid intake 30 minutes after a meal.

Bites should be the size of the tip of a pencil eraser. Chew 20 to 25 times per bite and wait 30 to 60 seconds between bites. If you feel pain or pressure, return to softer food. Increase to more challenging food consistency every week.

Foods to begin adding:

- Oatmeal regular consistency
- Yogurt with chunks
- Canned chicken and tuna (packed in water)
- Cooked beans or lentils, soups regular consistency
- Vegetables, soft-cooked (no skin)
- Canned fruit in its own juice or with Splenda®
- Fruits soft and fresh (banana, peach, melon), but no citrus
- Deli shaved meats
- Ground beef at least 90% lean (90/10)
- · Poultry and lean meats cooked in slow cooker
- Fish and shellfish
- Tofu
- Cheese less than 5g fat per ounce
- Reduced fat cream cheese

Protein

Aim to meet protein goals of 65g per day for women and 80g per day for men with protein supplements and food. As you eat more protein from food, decrease your protein supplements. Consume only the amount of food that is comfortable for you.

Duodenal Switch patients should consume 80g of protein per day for women and 100g per day for men.

Phase 4: Bariatric Soft to Semisoft Foods

Phase 4: Sample Menu #1 - Semisoft

Breakfast 1 soft, scrambled egg

4 tablespoons low-fat cottage cheese

2 tablespoons pears

Lunch 3 ounces shrimp

4 tablespoons broccoli

Snack ½ cup protein shake

Dinner 3 ounces canned chicken

4 tablespoons green beans

Evening ½ cup protein shake

Phase 4: Sample Menu #2 – Soft foods

Breakfast 2 egg, poached or cooked soft

1 ounce cheese stick

¼ banana

Lunch 2 ounces thin-sliced deli meat

1 slice American cheese

3 tablespoons carrots, steamed

Dinner 3 ounces baked fish

2 tablespoons mixed vegetables2 tablespoons mashed potatoes

Evening ½ cup protein shake

Phase 5: Lifelong

Final phase food additions

Let your fullness guide you rather than counting calories. If you feel satisfied and energetic, you are eating an adequate amount. Meals should include protein first, then fruits and vegetables and whole grains last. Meals should be put on a small dessert plate with ½ to one cup of food per meal. Calorie intake will vary among individuals from 800 to 1,500 calories per day.

Foods to add with caution

The foods listed below swell in the stomach pouch and may make you feel full without adequate nutrients. Always eat these at the end of a meal:

- Bread
- Tortilla
- Rice
- Pasta

The following foods may take longer to digest in your pouch:

- Raw fruits and vegetables (avoid iceberg lettuce)
- Nuts and seeds
- Granola
- Dried fruit
- Popcorn

Protein

Continue to strive for 65g of protein for women and 80g of protein for men each day. Duodenal Switch patients should consume 80g of protein per day for women and 100g per day for men. By this phase you do not need protein shakes, unless they are used for meal replacement. However, the registered dietitians at Freeman Bariatric Center strongly recommend eating a variety of whole foods from all food groups.

Tips to Improve Your Progress

Remember the following tips:

- 1. All meals should be eaten slowly, and food should be thoroughly chewed.
- 2. Allow enough time for meals, and choose healthy foods.
- 3. When you feel full, stop eating, even if you haven't finished your meal.
- 4. Do not overeat! It takes six to nine months (possibly longer) for your new stomach size to stabilize and allow you to determine your normal meal amount.
- 5. Do not take a multivitamin with minerals at the same time as calcium citrate.
- 6. Introduce new foods one at a time to rule out intolerance. If a food is not tolerated, remove it from your diet and then reintroduce it in one week.
- 7. If you cannot tolerate dairy, substitute Lactaid® for milk. You may need to take a lactase pill with dairy to help digest lactose. You can also try soy milk fortified with calcium and vitamin D.
- 8. Exercise! This is the key to long-term weight loss and maintenance. Walking should be the main exercise for the first six weeks. After six to eight weeks, more strenuous exercises can be added.
- 9. Remember, you will have the most rapid weight loss in the first weeks following surgery. You will continue to lose weight up to 24 months following surgery at a slower rate.
- Utilize your bariatric team and support group for continued encouragement and motivation.

Ten rules for long-term success:

- 1. Eat three small meals per day
- 2. Eat only good, solid food protein first
- 3. Eat slowly sense fullness and then stop
- 4. Do not eat between meals
- 5. Do not drink liquids with your meals
- 6. Exercise at least 30 minutes each day
- 7. Consume your recommended protein
- 8. Drink plenty of liquids at least eight cups (64 ounces) per day
- 9. Take your vitamins and supplements daily
- 10. Utilize support from friends, family and/or support groups

Long-term goals:

The goal of surgery is to improve your overall health. Committing to a lifestyle change that includes making healthy food choices and being more active after surgery will maximize your weight loss and your overall health.

Protein Content of Common Foods*

Beans and soy

Tofu, 1ounce: 2g

Soy milk, 1 cup: 6-10g

Most beans (black, pinto, lentils, etc.): 7-10g protein per ½ cup of cooked beans

Split peas, ½ cup cooked: 8g

Eggs and dairy

Egg, large: 6g Milk, 1 cup: 8g

Cottage cheese, low-fat, 1% milk fat, ½ cup: 14g

Yogurt, 1 cup: usually 8-12g, check label Yogurt, Greek, ½ cup: about 12g, check label

Soft cheeses (mozzarella, brie, camembert): 6g per ounce

Medium cheeses (cheddar, Swiss): 7-8g per ounce

Hard cheeses (Parmesan): 1 tablespoon – 2g per ounce

Chicken

Chicken, cooked, 1 ounce: 6-7g

Pork

Pork chop, 3 ounce: 22g

Ham, 3 ounce: 19g

Ground pork, 1 ounce cooked: 7g

Ground pork, 1 ounce cooked: 7g

Bacon, 1 slice: 3g Canadian-style bacon (back bacon), 1 slice: 5-6g

Beef

Most cuts of beef: 7g per ounce

Fish

Most fish fillets: 6g per ounce Tuna, 6 ounce can: 30-36g

Nuts and seeds

Peanut butter, 2 tablespoons: 8g Almonds, ¼ cup: 8g Peanuts, ¼ cup: 9g Cashews, ¼ cup: 5g

Pecans, ¼ cup: 2.5g Sunflower seeds, ¼ cup: 6g

Pumpkin seeds, ¼ cup: 8g Flax seeds, ¼ cup: 8g

^{*}Information from USDA NUTRITIONAL DATABASE: ndb.nal.usda.gov

Common Problems and Solutions

The following guidelines are for your reference in case you experience any problems. Please inform the medical team of any problems you are experiencing.

Constipation

- Be sure to drink plenty of water (goal of eight cups per day)
- · Take one tablespoon of milk of magnesia
- Stay active
- Depending on the phase of your diet, you may be able to increase fiber in your diet with more fruits, vegetables and whole grains. Verify with your dietitian if you are unsure of fiber intake.

Vomiting

- Return to an earlier tolerance (previous diet phase)
- Try clear liquids for 24 hours
- Eat slowly and chew food thoroughly
- Measure portion sizes
- Ensure foods are moist
- Avoid eating and drinking at the same time
- If you vomit bright red or dark brown liquid, call your doctor immediately

Nausea

- Do not over eat
- · Drink plenty of liquids and drink slowly
- Eat slowly and chew food thoroughly
- · Avoid carbonated beverages

Stomach bloating after eating

- Do not overeat
- Do not drink fluids with meals
- Avoid carbonated beverages
- Stay active
- Do not use straws
- Avoid high-fat foods

Diarrhea

- Eat slowly
- Do not overeat
- · Do not drink fluids with meals
- · Avoid high-sugar, high-fat and spicy foods

Common Problems and Solutions

Intolerance to dairy products

- Try Lactaid® milk, tablets or drops
- Yogurt may be better tolerated than milk
- Try soy milk, almond milk or rice milk

Dizziness or headache

- Drink plenty of water
- Add salt to your food
- Drink regular bouillon
- Be sure you are eating enough food
- If you take any prescription medications, call your doctor

Sudden lightheadedness

- Eat on a regular schedule
- Do not skip meals
- Ensure you are eating enough food
- If you take any prescription medications, call your doctor

Tiredness and weakness

- Drink plenty of fluids
- · Limit caffeine
- Sleep on a regular schedule
- Stay active
- Ensure you are getting enough protein
- Take multivitamins with minerals

Heartburn

- Limit caffeine and spicy foods
- Ensure you are taking reflux or heartburn medication, if prescribed
- Avoid foods that are too hot or too cold
- Read the side effects of any medication you are taking

Common Problems and Solutions

Leg cramps

- Eat a balanced diet
- · Take multivitamins with minerals every day
- Stay active
- If the problem persists or becomes severe, call your doctor immediately

Excessive hair loss

- Eat a balanced diet with adequate protein
- · Take your multivitamin with minerals daily

Very slow weight loss

- · Keep a food journal
- · Follow up with dietitian
- · Avoid high-fat foods and high-calorie beverages
- · Increase activity and exercise as tolerated

Extreme hunger

- Keep food journal
- · Follow up with dietitian

Excessive weight loss

- Keep a food journal
- · Follow up with dietitian
- Ensure you are taking in enough calories

Surgery-Friendly Exercises

It is important to be active as soon as you can after surgery to facilitate weight loss and keep muscles toned and flexible. The exercises listed below are safe to do after surgery. Everyone progresses differently after surgery. Be sure to follow your physician's recommendations.

General recommendations

It is recommended to get two and a half hours of moderate-intensity aerobic activity every week AND muscle strengthening activities that work on major muscle groups two or more days per week.

It is important to build up over time. Start with two to three continuous minutes and increase a couple of minutes every one to three days.

Arm chair exercises

For your arms

- Raise both arms, rotate in circles 10 times to front and 10 times to the back
- Keeping elbow at your side, bend arm toward shoulder. Do 10 sets on each arm.
- Raise arm straight out to side. Repeat 10 times for each arm.

For your shoulders

- Raise hand high above head. Repeat 10 times.
- Place hands on shoulders. Bring elbows together as close as you can. Repeat 10 times.

For your torso

- Raise arms above head. Gently lean to right and hold 10 seconds. Then lean to left and hold 10 seconds. Repeat 10 times.
- Keeping back straight, move your hands down your leg toward your ankle and back up (as if putting on socks). Repeat 10 times.

For your legs

- Place both feet flat on floor at 90 degree angle. Raise one foot up as straight as possible. Repeat 10 times and then switch legs.
- Place both feet on the floor at 90 degree angle. Raise your heels up as high as you can, keeping toes on the floor. Repeat 15 times.

Create a circuit workout at home

Circuits can be a great way to workout. Choose three to four exercises from each list. Next, alternate 30 seconds of cardio and three minutes of strength exercises. Then, repeat the circuit two to three times.

Surgery-Friendly Exercises

Cardio exercises

Try some of these activities to increase heart rate and improve cardiovascular health.

- Jumping jacks
- · Jumping rope
- · Jogging or marching in place
- Stair-climbing or step-ups
- High knees
- Mountain climbers
- Skipping

Strengthening and stability exercises

The activities listed below focus on improving strength and stability. Balance and strength become very important as weight comes off quickly.

- Plank and side plank
- Push-ups
- Sit-ups
- Hip lift
- · Triceps on chair
- Lunges
- Squats
- Wall sits

Helpful Resources

Books

Weight Loss Surgery Cookbook for Dummies by Brian K. Davidson, David Fouts, and Karen Meyers, MS, RD/LD.

Fresh Start Bariatric Cookbook: Healthy Recipes to Enjoy Favorite Foods After Weight-Loss Surgery by Sarah Kent, MS, RDN, CD.

Eat What you Love, Love What you Eat by Michelle May, MD.

Websites

American Society for Metabolic and Bariatric Surgery – asmbs.org

Eating Well, Recipes and Meal Plans – eatingwell.com

Obesity Action Coalition (OAC) – obesityaction.org

Mindful Eating Help – amihungry.com

Obesity Help – obesityhelp.com

The Obesity Society - obesity.org

Bariatric Pal – bariatricpal.com

My Fitness Pal – myfitnesspal.com

Spark People – sparkpeople.com

Baritastic – baritastic.com

Tracking Your Progress

Weight:
Pounds lost:
Inches lost:
Non-scale victories:

Follow-Up Sheet For Bariatric Patients

Follow up with your bariatric surgeon: One week, one month, 3 months, 6 months, one year and annually.

Follow-up with your primary care provider: Annually

Daily water intake: 64 ounces or more daily

Bone density test recommendation: Guidelines released by the American Association of Clinical Endocrinologists (AACE), the Obesity Society and the American Society for Metabolic and Bariatric Surgery (ASMBS) state that DEXA bone density scans are indicated both preoperatively and two years after bariatric surgery.

Daily protein recommendations: The minimum daily requirements are 65 grams for women; 80 grams for men who have the gastric sleeve or Roux-en Y procedure; and 80 grams for women and 100 grams for men daily who have the duodenal switch procedure.

Follow nutrition guidelines as educated in your Bariatric Nutrition education binder. These include focusing on meeting protein needs, limiting portions to one cup or less per meal, eating three meals daily and choosing nutrient-dense starches and carbohydrate food choices.

Daily vitamin and mineral recommendations: As per the nutrition guidelines booklet, two adult MVI with minerals and iron, calcium 1200 – 1800 mg, vitamin D 3000 IU, and vitamin B12 in the amount of 350 mcg (Roux-en Y and duodenal switch).

Recommended annual blood tests can be performed by your primary care provider: Complete blood count (which can reveal anemia, among other problems), comprehensive metabolic panel (review kidney and liver function), lipid panel (measures cholesterol and other fats), hemoglobin A1c (a test for diabetes), and vitamin levels of iron, ferritin, B12, D, A, folate, thiamine, copper, zinc and selenium.

Additional recommendations:

- Exercise 30 to 45 minutes or more per day
- Avoid alcohol post-surgery for at least one year
- Avoid smoking for life
- · Avoid NSAIDS for life
- Females should avoid pregnancy for 12 to 18 months post-surgery
- Review medications and dosages with your primary care provider. As you lose weight, these may need to be adjusted.

Support group: Freeman's Bariatric Support Group meets the third Tuesday of every month at the Freeman Business Center from 5:30 pm – 6:30 pm.