

## Staying Healthy After Weight Loss Surgery

Follow the tips below to stay healthy after your surgery.

If you have any questions, please call your surgeon's office to confirm your instructions

| Problem  | What to do   |
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| <b>Hydration</b><br>Signs that you're not drinking enough water: <ul style="list-style-type: none"> <li>• Dry mouth</li> <li>• Not peeing very much or very often</li> <li>• Dark or amber colored urine (pee)</li> <li>• Fast heartbeat</li> <li>• Low blood pressure</li> <li>• Dizziness</li> </ul>   | To stay hydrated: <ul style="list-style-type: none"> <li>• Try to sip 2 to 3 ounces (oz) of water each hour</li> <li>• Only take sips and small swallows. No <b>gulping or guzzling</b>.</li> <li>• Aim for between 48 to 64 oz per day<br/>(3 ounces of water an hour x 16 hours awake) = 48 oz</li> </ul> If your symptoms continue even after trying these suggestions, <b>please call your surgeon's office</b> .  |
| <b>Pain</b> <ul style="list-style-type: none"> <li>• Keep incisions dry for 48 hours after surgery.</li> <li>• Do not take a bath, go swimming, or sit in a hot tub for 2 to 3 weeks, or until your incisions are healed and your surgeon tells you it's okay to do these activities.</li> <li>• Look for <b>signs of infection</b> at the surgical site: <ul style="list-style-type: none"> <li>○ Swelling</li> <li>○ Heat</li> <li>○ Redness</li> <li>○ Drainage</li> <li>○ Foul odor</li> <li>○ Fever of 101.5° F (38.6° C) or higher.</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Use the non-opioid medication prescribed by your surgeon. Examples include acetaminophen (Tylenol, others), gabapentin (Gralise, Horizant, Neuraptine), and celecoxib (Celebrex – be sure to take omeprazole [Prilosec] 30 minutes prior to using).</li> <li>• <b>Recommended:</b> Take 1000 mg of acetaminophen every 8 hours unless you have an allergy or another medical reason for not taking it. <b>Do not take if you are using a prescribed opioid that contains acetaminophen</b> (example: Percocet, Roxicet, Vicodin, Lorcet, or Lortab).</li> <li>• Refer to the pain management guide given to you before your surgery. If the pain is above your pain goal, use the prescribed opioid medication.</li> <li>• Manage pain without medication with these suggestions: <ul style="list-style-type: none"> <li>– Distractions, such as tv or music</li> <li>– Ice the surgical site</li> <li>– Brace your incisions with pillows</li> <li>– Walking</li> <li>– Guided imagery</li> <li>– Deep breathing and meditation.</li> <li>– Massage or acupressure</li> <li>– Aromatherapy</li> <li>– Spiritual or emotional counseling</li> </ul> </li> </ul> If your pain doesn't get better even after trying these things, <b>call your surgeon's office</b> .<br>Watch for signs of <b>constipation</b> and treat as noted in the MAWDS packet or <b>call your surgeon's office for further instruction</b> . |
| <b>Gas pain</b><br>CO <sub>2</sub> (carbon dioxide) is used to inflate the abdominal cavity (belly) during surgery. The CO <sub>2</sub> may rise and settle in the shoulders, chest, or back, causing aches or pains.  | <ul style="list-style-type: none"> <li>• Walking or movement will help get rid of the CO<sub>2</sub>. Note if the pain lessens when you burp, pass gas, or walk.</li> <li>• Try placing a heating pad on your upper back and shoulders.</li> <li>• Use the incentive spirometer hourly.</li> <li>• Try chewable Gas-X to relieve pain. Opioid pain medications are not likely to help with gas pain.</li> <li>• Pay attention to other symptoms associated with the pain and how you feel so you can tell your surgeon.</li> </ul> If gas pain worsens or becomes too severe, <b>call your surgeon's office</b> .  |

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| <p><b>Nausea / Vomiting</b></p>  | <ul style="list-style-type: none"> <li>• Use prescription nausea medication or an over-the-counter antacid like chewable Tums or Maalox at least 30 minutes before you eat.</li> <li>• Introduce one new food at a time.</li> <li>• Drink room temperature liquids.</li> <li>• Try sipping broth.</li> <li>• Sip liquids slowly.</li> <li>• Keep water and food separate.</li> <li>• Avoid water 30 minutes before and after meals.</li> <li>• Chew each bite 20 to 30 times before swallowing.</li> <li>• Avoid acidic food and food not on the permitted list (OJ, tomato, etc.)</li> <li>• Make note of the food or medicine that upset your stomach in your food journal. Reintroduce the food 2 to 3 weeks later.</li> <li>• Apply cold cloth to base of neck and forehead.</li> </ul> <p>If you continue to feel nausea or can't stop vomiting, <b>call your surgeon's office.</b></p> |
| <p><b>Activity</b><br/>Feeling dizzy or out of breath. May be caused by:</p> <ul style="list-style-type: none"> <li>• Pain medications</li> <li>• Dehydration</li> </ul>   | <ul style="list-style-type: none"> <li>• Take short walks (3 to 5 minutes) at least 4 to 5 times daily. Walking will help prevent blood clots and help you heal better.</li> <li>• Increase your level of activity if you continue to feel okay. Ask your surgeon about starting an exercise regimen at your follow up appointment.</li> <li>• Add one electrolyte per day as needed. Example: One 8-oz sugar free Gatorade.</li> <li>• Drink at least 32 oz of water per day and that you can eat. At least 75% of what you are eating should be foods that are high in protein (7g or more per serving).</li> <li>• Check and record your blood pressure and blood sugar at regular intervals.</li> </ul> <p><b>Notify your surgeon's office</b> if you continue to feel dizzy when standing or if you are easily out of breath.</p>   |
| <p><b>Nutrition</b><br/>Pain upon eating.<br/>Unable to eat or keep food down.</p>   | <ul style="list-style-type: none"> <li>• Eat 3 times daily.</li> <li>• Eat slowly over 20 to 30 minutes. Chew each bite 20 to 30 times.</li> <li>• Avoid drinking water 30 minutes before or after meals.</li> <li>• Don't eat more than maximum recommended portion. You can eat less if the food is not well tolerated.</li> <li>• Only eat one food one at a time. Follow your guidelines on adding new foods. Go back to the prior stage of dietary recommendations for a couple of days if you're not tolerating the current stage.</li> <li>• Chewable Gas-X may help with gas or gas pain</li> </ul> <p>Update your surgeon on your diet progression at your follow up appointments.</p>  |
| <p><b>Bowel Movements (poops)</b><br/>Your first bowel movements (BM) may not come for a few days. It may be watery and dark in color and have strong odor.<br/>You should return to normal BM routine of at least one a day or every couple of days (aim for daily).<br/>Iron supplements may cause the dark color to continue.</p> | <p><b>For healthy BMs:</b></p> <ul style="list-style-type: none"> <li>• Stay hydrated and ambulate often.</li> <li>• Sip on warm (as tolerated) non-caffeinated drinks or Smooth Move or Senna tea. If your BMs cause nausea, try using peppermint Smooth Move tea.</li> </ul> <p><b>If constipated (no BMs):</b><br/>May use Benefiber in water and sip on it throughout the day. Other options include:</p> <ul style="list-style-type: none"> <li>• Milk of Magnesia-liquid or chewable</li> <li>• Miralax 1 oz twice a day</li> </ul> <p>Avoid Metamucil or Citrucel as they expand in the stomach.<br/>If you are still unable to have a BM, <b>please contact your surgeon's office.</b><br/>All products mentioned above can be purchased at most grocery stores.</p>   |

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| <b>Pulmonary (Lungs)</b><br>Pain, cough, or discomfort in lower lungs when breathing.   | <ul style="list-style-type: none"> <li>• <b>Do your incentive spirometry 10 times each hour</b> until lung or belly pain is minimal and you are breathing at normal lung capacity.</li> <li>• Take small walks often.</li> <li>• Take deep breaths and cough frequently.</li> </ul> <b>For pain with deep breaths:</b> <ul style="list-style-type: none"> <li>• Brace your incisions with a pillow. This helps your belly and lungs absorb the pain or pressure of the cough.</li> </ul> If pain worsens or you are short of breath, <b>contact your surgeon's office.</b> |
| <b>GERD or Acid Reflux</b> <ul style="list-style-type: none"> <li>• Heartburn</li> <li>• Indigestion</li> <li>• Pain or burning in the throat</li> <li>• Difficulty swallowing</li> </ul>   | Take an over-the-counter proton pump inhibitor (Prilosec, Prevacid, Nexium) prescribed medication if indicated)<br>If a proton pump inhibitor does not work, <b>call your surgeon's office.</b>  |
| <b>Dizziness</b><br>Mild dizziness or weakness may be caused by: <ul style="list-style-type: none"> <li>• Anesthesia from surgery</li> <li>• Pain medications</li> <li>• Eating and drinking less</li> <li>• Low blood pressure</li> <li>• Low blood sugar</li> </ul> | <ul style="list-style-type: none"> <li>• Drink 2 to 3 ounces for water each hour.</li> <li>• Eat at regular intervals 3 times a day.</li> <li>• Check your blood pressure, heart rate, and blood sugar before taking any medications.</li> <li>• Try no-calorie Gatorade or Powerade.</li> <li>• Rule out dehydration, low or high blood sugar, or low energy from low food intake.</li> </ul> If you are on blood pressure medication, check your BP. If low, <b>contact your prescribing physician</b> for possible dosage change.                                       |

#### WHEN TO GET HELP

- Call your surgeons office if you have a fever of 101.5° F (38.6° C) or higher or have any of the problems noted above.
- Seek immediate medical attention if you have chest pain or shortness of breath.

#### Contact information:

- **LDS Hospital:** Rocky Mountain Associated Physicians – 801-268-3800, or the Bariatric Medicine Institute – 801-746-2885
- **St. George Regional Hospital:** Utah Surgical Associates – 435-628-1641
- **Cassia Regional Hospital:** Intermountain Cassia Surgical Clinic – 208-677-6266
- **Sevier Valley Hospital:** Intermountain Sevier Surgical Clinic – 435-893-4100
- **Utah Valley Hospital:** Utah Surgical Associates – 801-852-3460

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