



OUR LADY OF THE LAKE PHYSICIAN GROUP

Surgeons Group of Baton Rouge

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Bariatric Discharge Instructions

DIET- CHANGES IN HOW YOU EAT:

- Follow Diet **Phase I** until the third day after your surgery.
- **Band patients** - Begin **Diet Phase II** on **day three (3)** after your surgery. Begin **Diet Phase III** on **day five (5)** after your surgery and continue until you see your surgeon.
- **Sleeve and Bypass patients** - Begin **Diet Phase II** on **day three (3)** after your surgery and continue until you see your surgeon.
- Drink liquids in small amounts or suck on **ice chips**.
- **Do not** use straws to drink your liquids through
- It is very important that you **drink** liquids (in smaller amounts) so you don't become too dehydrated. Some signs of dehydration include dry mouth, dark colored urine, nausea, weakness and dizziness.
- **Eat slowly**. Eating too much or too quickly will cause nausea and vomiting or food becoming stuck.
- Do not eat foods with lots of sugar so that you can avoid "dumping syndrome"
- Follow the Dietary Phases according to your surgery. **DO NOT** eat anything that is not on the diet phase.
- When you begin Phase III and slowly increase what you are able to eat, you may have trouble eating for the first few months. Some days will seem better than others. If you encounter difficulty, go back to the previous phase for a day or two.

ACTIVITY:

- It is normal to feel tired. **Rest** when your body needs it.
- **No** sit-ups for 2 weeks
- Abdominal **soreness** below your ribs can last for a couple of weeks. The more you walk, the sooner the soreness will get better.
- **Walk** as often as you can; increase your activity slowly.
- **Do not** lift anything heavier than 15 pounds for 2 weeks; after 2 weeks discuss this with your surgeon
- **Do not** do strenuous chores like vacuuming, moping (twisting motion), lifting full bags of garbage until you ask your surgeon
- Climb stairs slowly; stopping as you need to
- Start an **exercise** program 1 week after surgery like walking

HOME CARE:

- You may drive a couple of days after surgery as long as you are not taking any pain medications.
- Continue using the Incentive Spirometer after surgery until seen by your surgeon
- Shower. **DO NOT** sit in a bath tub, hot tub or go swimming for 2 weeks after your surgery.
- **Do not** apply lotions or creams to the incisions
- Your cuts may drain bloody fluid. This is usually fluid that collected under your skin right after surgery. This is **not** dangerous. The wounds will stop draining after all the fluid comes out, usually within a few days.
- Keep the wounds clean and dry. Wash them **gently** with mild soap and warm water; pat them dry with a towel. Let the steri-strips (small white pieces of tape) **fall off** on their own.

MEDICATION:

- Your medications will need to be changed or stopped as you lose weight.
- Take your **chewable vitamins and minerals**.
- You can take **liquid Tylenol** or **Tylenol Jr. Melt ways**.
- You have been given a prescription for **pain medication**- take only as directed
- You have been given a prescription for an **antacid** to decrease the chances of ulcers in your smaller stomach and to decrease your nausea. Take this medication for at least **2 months** or until instructed otherwise by your surgeon.
- Constipation: Drink fluids. Milk of Magnesia as directed can be taken if you have not had a bowel movement by three (3) days after your surgery.
- **DO NOT TAKE NSAIDS** such as:
 - ibuprofen (Motrin, Advil)
 - aspirin (Excedrin, Pepto-bismol, BC powder, Bayer)
 - celecoxib (Celebrex)
 - nabumetone (Relafen)
 - naproxen (Naprosyn, Aleve)
 - diclofenac (Voltaren, catatlam)
 - meloxicam (Mobic)
 - ketoprofen (Oradis)

******Do not take NSAIDS after your surgery unless discussed with your surgeon.**

FOLLOW-UP:

- Call **225-769-5656** to make an appointment with your surgeon for **1 week** after your surgery.
- Make an appointment with the nutritionist **4 weeks** after your surgery
- Bring all your medicines or an accurate list to your appointments.
- **Support Group Meetings** are held at OLOL the 1st Tuesday of every month @ 6:00pm in Auditorium B.

WHEN TO NOTIFY YOUR DOCTOR:

- Red, swollen, warm, hard wound site.
- Trouble breathing or chest pain (**CALL 911**)
- Cloudy or smelly drainage from cuts that looks more like pus than blood.
- Fever of 100.4 ° or higher taken under the tongue, shaking chills.
- Fast heartbeat
- Night sweats
- Painful, warm, swollen leg (s)
- Pain, nausea, or vomiting after eating that does not get better
- Diarrhea past the first week after discharge
- Pain in your upper back, chest, or left shoulder
- Hiccups that don't go away
- Confusion, sadness, or unusual fatigue
- Blood in your urine, burning or pain when you urinate, urinating more often than usual.
- If your pain medication does not help you.

Please note that there is a surgeon on call 24/7 during business and after hours and can be reached at 225-769-5656.