



Metabolic & Bariatric Surgery of Florida

Brandon Location

620 Eichenfeld Drive
Brandon, FL 33511
Phone: 813.848.9588
Fax: 941.445.4152

Venice Location

1370 E. Venice Avenue | Suite 208
Venice, FL 34285
Phone: 941.209.4646
Fax: 941.445.4152

Lakeland Location

3030 Harden Blvd, Building 1
Lakeland, FL 33803
Phone: 863.398.3870
Fax: 941.445.4152

Handbook | **Metabolic & Bariatric Surgery of Florida**

Joseph Chebli, MD, FACS, FASMBS



Independent Member of the Medical Staff of
Lakeland Regional Health Medical Center & HCA Florida Brandon Hospital

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www.mbsfla.com | info@Venicembs.com

WELCOME | **METABOLIC & BARIATRIC SURGERY OF FLORIDA**

Dear Prospective Patient,

Thank you for considering Metabolic and Bariatric Surgery of Florida in your effort to take control of your healthcare needs. Our practice offers one of the most experienced metabolic and bariatric surgical programs in the area. Board-certified surgeon specializing in bariatric surgery, Dr. Joseph E. Chebli has dedicated his medical career to improving the lives of his patients. His entire career is devoted to providing patients an opportunity who have struggled with being overweight to become healthier with a more fulfilling life. Our focus is to improve your overall health and medical problems such as type 2 diabetes, high blood pressure, sleep apnea, lipid disorders, and fatty liver disease. Our team is dedicated and committed to helping you achieve optimal results while providing the highest level of quality patient care in a supportive environment.

For people suffering from severe obesity and related health conditions, weight loss surgery may be the solution you have been searching for. Studies demonstrate that weight loss surgery, as compared to non-surgical treatments, yields the longest period of sustained weight loss in patients who have failed other therapies.

During your evaluation, Dr. Chebli will review and provide the most appropriate options for your needs based on your lifestyle, medical history and personal goals. Please read through the materials provided in this handbook carefully. It is important to realize that this is not an overnight process. For best results, patients need to actively participate in a multidisciplinary weight loss program which includes nutritional, emotional, and exercise counseling. Our practice is here for you every step of the way supporting you on this journey and creating an environment where success is maintained.

We look forward to working with you and assisting you in achieving your health goals.

Sincerely,

Metabolic & Bariatric Surgery of Florida

Dr. Joseph E. Chebli and office staff

OVERVIEW

The most obvious and compelling reason people choose metabolic and bariatric surgery is because it works. Patients often experience much greater and sustained weight loss than they would have experienced with diet and lifestyle change alone.

Our program is based on our experience with hundreds of successful weight loss surgery patients. We take great pride in delivering the highest success rates and lowest complications. We take a team approach and believe your active involvement is critical to long-term success.

Before surgery you will undergo medical, nutritional and psychological evaluations. We encourage you to learn about healthy nutrition habits, increase your physical activity, and establish a local support structure to ensure your long-term success.

Here each patient is provided individualized, custom care based on their needs and lifestyle. No patient is the same, which is why we believe in the customization of plans and programs for each patient.

The primary concern is the safety and well-being of our patients.

We are committed to helping you through this life-changing journey.

Program for Gold Standards of Care

- Provide the highest level of quality care and medical standards
- Our vision is to be the most caring and desired Metabolic and Bariatric practice by patients, physicians and staff throughout the state of Florida
- We always strive for excellence in everything we do
- Provide a safe and enjoyable experience
- Maintain strict protocols and sanitary measures for providing excellent care
- Provide customized weight loss solutions that renew lives
- Provide you with life-long follow up care
- Provide support and education before and after surgery
- Maintaining happy, healthy and successful patients

As you prepare for surgery, you may have questions. Please do not hesitate to contact our office. Our highly trained staff is here and happy to help and assist you with any questions or concerns you may have.

Please contact us at 941-209-4646.

FOR LIFE THREATENING EMERGENCIES: CALL 911

FREQUENTLY ASKED QUESTIONS

If I want to have bariatric surgery, how long do I have to wait?

It may take a few weeks to several months from the time you make the first phone call to the date of your surgery. Several factors determine the amount of time. They include your weight loss history and its documentation, insurance approval, fulfilling our program requirements (pre-operation education seminars, consultation with dietitian, psychologist, and other specialists), and completing the pre-operative tests. Our goal is to reduce the time and make the process as efficient as possible.

Why do I need to lose weight before surgery?

We will often require our patients to lose a small amount of weight prior to surgery. This is primarily done to decrease the size of the liver and increase your chances of undergoing a safe laparoscopic procedure.

How do I find the support I need?

Many successful bariatric surgery patients say that their support network helped them immensely in maintaining their new healthy lifestyle changes. From family and friends to bariatric program support groups, there is a wealth of options available for those interested in bariatric surgery.

The first step in getting support is talking to your family and friends about bariatric surgery and your interest in it. You might find that they are completely supportive. While this is always ideal, you might find that some family members and friends are against your decision. Often, this is because your loved ones are concerned about you or have preconceived notions about bariatric surgery. Explaining the advantages, benefits, and risks of bariatric surgery may open their minds to its importance.

If you find that they are unsupportive, it does not mean you are alone. Many people have bariatric surgery and have been very successful with the care they received from the healthcare professionals on their bariatric program team. Support group is a forum for celebrating success, such as the improvement or resolution of co-morbidities. The support group is devoted to people who have common experiences, share feelings in a safe environment, and develop relationships that can contribute to improved physical and emotional health.

Our bariatric program includes support groups for patients both before and after surgery. Paige Singletary, RN, the Bariatric Coordinator at Lakeland Regional Health Medical Center, Kay Carlile, RN, the Bariatric Coordinator at HCA Florida Brandon Hospital, manage the support groups for our program. These support groups are completely free. Please ask our office for further information.

Support groups are a wonderful place to meet people and get perspective on bariatric surgery. You will hear about successes, frustrations, special moments, and have a chance to share your own experiences.

Why is exercise so important after surgery?

When you have bariatric surgery, you will lose weight as the amount of calories (food energy) become much less than your body needs. Your body will need to make up the difference by burning unused fat or muscle tissue. Your body tends to burn muscle before it begins to burn fat that it has saved up. Without daily exercise, your body will burn unused muscle, and you will lose muscle mass and strength. Daily aerobic exercise for 20 minutes will tell your body to use your muscle and force it to burn the fat.

How much exercise is needed after bariatric surgery?

Exercise begins on the day of your bariatric surgery. The patient will be out of bed and walking. The goal is to walk further each day after that, including the first few weeks at home. You may be encouraged to begin exercising, limited only by discomfort, about two weeks after surgery. The type of exercise depends on your overall condition. Some patients who have severe knee problems can't walk well but may be able to swim or bicycle. Many patients begin with low-stress forms of exercise and move on to more advanced activity when they are able.

TOBACCO

Patients should stop smoking eight weeks prior to surgery and permanently avoid all tobacco products post operatively.

(e.g., cigarettes, cigars, chewing tobacco, hookah, e-cigarettes, including marijuana).

Question: Why do I have to quit smoking or using tobacco before surgery?

Answer: Smoking or chewing tobacco leads to decreased blood supply to the body's tissues and delays healing. (Haskins & Amdur, 2014). Smoking harms every organ in the body and has been linked to:

- Blood clots (Largest cause of death post bariatric surgery)
- Marginal ulcers after gastric bypass
- Heart disease
- Stroke
- Chronic obstructive pulmonary (lung) disease
- Increased risk for hip fracture
- Cataracts
- Cancer of the mouth, throat, esophagus, larynx (voice box), stomach, pancreas, bladder, cervix, and kidney

For additional information call tobacco free Florida at 877-822-6669.

ALCOHOL

Question: Can I drink alcohol after surgery?

Answer: **Alcohol is not recommended after bariatric surgery.** Alcohol contains calories but minimal nutrition and will work against your weight loss goal. For example, wine contains twice the calories per ounce that regular soda does. The absorption of alcohol changes with gastric bypass and gastric sleeve because the enzyme in the stomach which usually begins to digest alcohol is now absent or greatly reduced.

Alcohol may also be absorbed more quickly into the body after gastric bypass or gastric sleeve. The absorbed alcohol will be more potent, and studies have demonstrated that Bariatric surgery patients reach a higher alcohol level and maintain the higher level for a longer period than others. In some patients, alcohol use can increase and lead to alcohol dependence. For all of these reasons, it is imperative to avoid alcohol after bariatric surgery. (American College of Surgeons, 2011)

CAFFEINE

Caffeine is a stimulant and is naturally found in more than 60 plants: including cocoa, tea and coffee. Caffeine is also added to soft drinks and is often a component of many over-the-counter medications, dietary supplements, certain protein powders, and drinks. Caffeine temporarily speeds up the body's heart rate, boosts energy and is often used to "fight fatigue". Caffeine acts as a diuretic, which means a loss of fluids. As a result, caffeine can leave you feeling thirsty if used as your main source of fluid intake.

It is best to **AVOID caffeine 1 month before surgery and at least 3 months after surgery.**

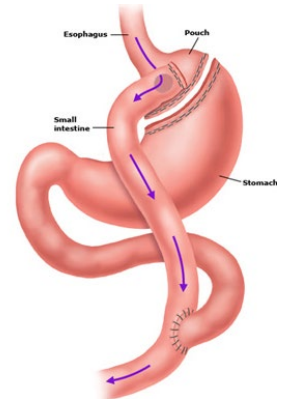
Question: Why is fluid intake important?

Answer: Dehydration is the most common reason for readmission to the hospital. Dehydration occurs when your body does not get enough fluid to keep it functioning at its best. Your body also requires fluid to burn its stored fat calories for energy. Carry a bottle of water with you all day, especially when you are away from home. Remind yourself to drink even if you don't feel thirsty. Drinking 64 ounces of fluid is a good daily goal. You can tell if you're getting enough fluid if you're making clear, light-colored urine 5-10 times per day. Signs of dehydration can be thirst, headache and/or hard stools or dizziness upon sitting or standing up. You should contact your surgeon's office if you are unable to drink enough fluid to stay adequately hydrated.

SURGICAL OPTIONS

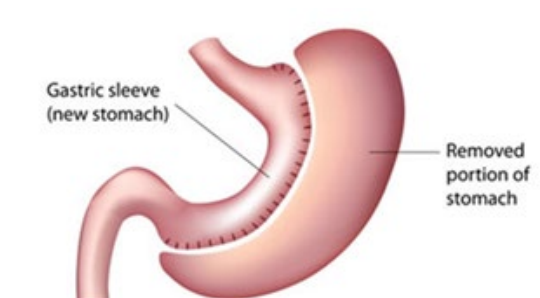
Laparoscopic Roux-en-Y Gastric Bypass

This is a metabolic operation which involves the creation of thumb sized stomach reservoir and a small intestine reconstruction. Hormonal changes occur from the bypass of food from the upper gut and stimulation of the small intestine.



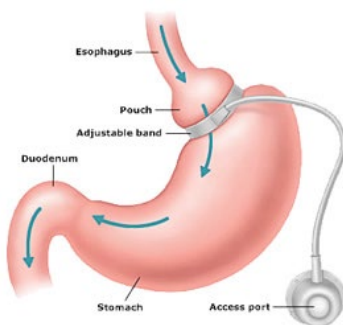
Laparoscopic Vertical Sleeve Gastrectomy

A banana or half-moon shaped stomach is created by removing about 80% of the stomach. This results in hormonal changes that reduce appetite and stimulate the small intestine. It can be performed as a primary or staging operation.



Laparoscopic Adjustable Gastric Banding / Endoscopic Intra-Gastric Balloon Procedure

These are purely restrictive approaches to morbid obesity. These procedures involve portion limitation to reduce calorie consumption.



Laparoscopic Revisional Bariatric Surgery

These procedures are for patients who have undergone prior bariatric surgery. Potential approaches include laparoscopic surgery, open surgery, and endoluminal surgery. These procedures generally entail more risk than primary bariatric surgery.

WEIGHT LOSS SURGERY | OVERVIEW

DIGESTIVE PROCESS

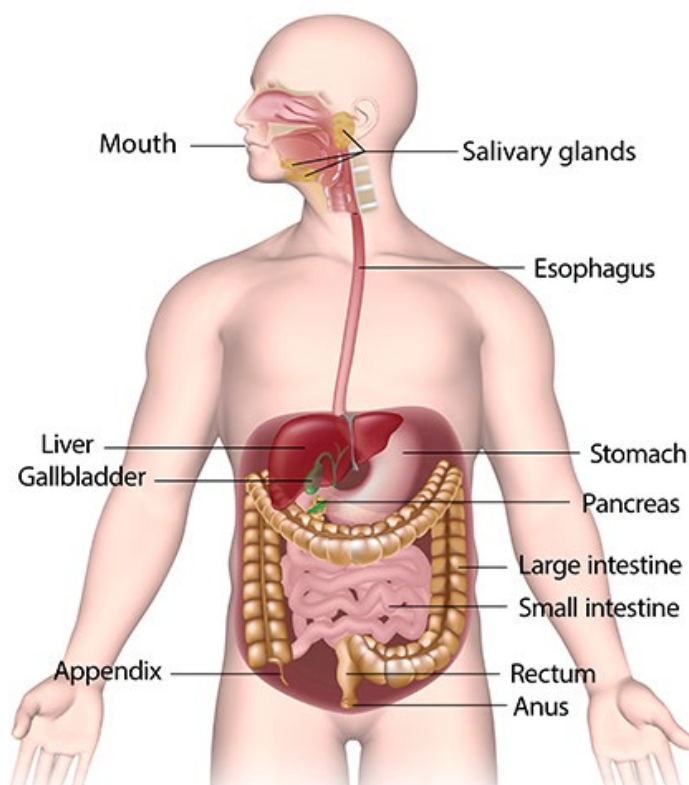
To better understand how weight loss surgery works, it is helpful to know the normal digestive process.

What Is Digestion?

Digestion is the complex process of turning consumed food into nutrients, which the body uses for energy, growth and cell repair in order to survive. The digestion process also involves creating waste to be eliminated.

The Normal Stomach

As food moves along the digestive tract, special digestive juices and enzymes arrive at the right place at the right time to break down and absorb calories and nutrients. After we chew and swallow our food, it moves down the esophagus to the stomach, where strong acids and powerful enzymes continue the digestive process. The stomach, which is about the size of a football, can hold about four pints of food at one time.



DIRECTORY | SPECIALTY CARE- VENICE

Preparation for bariatric surgery or treatment may involve receiving care from a provider in one or more of the following specialties. For this care, you may choose a provider with whom you are already established or one from the list below. You are under no obligation to choose a provider from this list.

If you need help or have questions, our bariatric coordinator can assist you or provide further instructions.

CARDIOLOGY

Dr. Ki Hassler

1215 Jacaranda Boulevard
Venice, FL 34292
Phone: 941.451.8282
Fax: 877.652.3039

Dr. Eric Pressman, Dr. Kenneth Pfahler

601 Medical Drive
Englewood, FL 34223
Phone: 941.475.5621
Fax: 941.474.8587

Dr. Ricardo Martinez, Dr. Michael Malone

3340 Tamiami Trail
Port Charlotte, FL 33952
Phone: 941.412.0026
Fax: 941.412.0027

Dr. Steven Shoemaker, Dr. James Landis, Dr. Edmund Bermudez, Dr. Joseph Balzano

First Physicians Group Cardiac
& Vascular Associates
200 Healthcare Way, Second Floor
N. Venice, FL 34275
Phone: 941.261.0160
Fax: 941.261.0165

GASTROENTEROLOGY

Dr. Caren Taylor, Dr. Peter Dumas, Dr. Katie Agnello, Dr. Ravi Kondapalli

Florida Digestive Health Specialists
825 Venetian Parkway
Venice, FL 34285
Phone: 941.483.5730
Fax: 941.482.5740

Dr. Robert Felman

1220 E. Venice Avenue
Venice, FL 34285
Phone: 941.484.5000
Fax: 941.484.6608

HEMATOLOGY

Florida Cancer Specialists

Venice Island location
901 S. Tamiami Trail, Suite A2
Venice, FL 34285
Phone: 941.484.3531
Fax: 941.486.1701
For more locations:
www.flcancer.com

INTERVENTIONAL RADIOLOGY

Radiology Associates of Venice & Englewood "RAVE"

Venice Location:
512-516 Nokomis Avenue
Venice, FL 34285
Phone: 941.488.7781
Fax: 941.486-8991

Englewood Location:
900 Pine Street
Englewood, FL 34223
Phone: 941.475.5471
Fax: 941.475.4264

Radiology Regional

18300 Murdock Circle, Building 15
Port Charlotte, FL 33948
Phone: 941.255.7945
Fax: 941.255.7923

Venice MRI

1370 E. Venice Avenue Suite 101
Venice, FL 34285
Phone: 941.484.6500
Fax: 941.484.6556

SimonMed Imaging

5831 Bee Ridge Road Suite 102
Sarasota, FL 34233
Phone: 941.954.1900
Fax: 941.342.7847

IVC FILTER PLACEMENT

Dr. Issam Halaby

436 Nokomis Avenue
Venice, FL 34295
Phone: 941.445.5054
Fax: 941.303.6796

NEPHROLOGY

Dr. Lorraine Cho Chung Hing

1500 E. Venice Avenue, Suite 103
Venice, FL 34292
Phone: 941.485.4700
Fax: 941.485.2888

NUTRITION

Kimberly Riley, RD, CDE

312 E. Venice Avenue, Suite 102
Venice, FL 34285
Phone: 941.800.5565
Fax: 941.275.6340
Email: Kimsgateway@gmail.com

PHARMACY

Apothecary of Venice

560 The Rialto
Venice, FL 34285
Phone: 941.483.7606

PSYCHOLOGY SERVICES

Dr. Dale Simpson

Comprehensive Med Psych System
1250 South Tamiami Trail Suite 201
Sarasota, FL 34239
871 Venetia Bay Boulevard. Suite 310
Venice, FL 34285
Phone: 941.363.0878 Ext 2075
Fax: 941.636.0527
Email: chall@medpsych.net

Dr. Curtis Takagishi

Licensed Psychologist
13701 Bruce B. Downs Boulevard Suite 111
Tampa, FL 33613
Phone: 813.819.8895
Fax: 813.523.2363

PULMONOLOGY / SLEEP STUDIES

Bio-Serenity

Phone: 877.753.3776
Fax: 866.216.5200

Blackstone

Phone: 888.710.2727
Fax: 813.313.5933

DIRECTORY | SPECIALTY CARE- LAKELAND

Preparation for bariatric surgery or treatment may involve receiving care from a provider in one or more of the following specialties. For this care, you may choose a provider with whom you are already established or one from the list below. You are under no obligation to choose a provider from this list.

If you need help or have questions, our bariatric coordinator can assist you or provide further instructions.

CARDIOLOGY

Lakeland Regional Health
130 Pablo Street
Lakeland, FL 33803
Phone: 863.284.5020

Watson Clinic
1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

Premier Heart & Vascular Center
1470 N. Florida Avenue
Lakeland, FL 33805
Phone: 863.858.6666

ENDOCRINOLOGY

Lakeland Regional Health
3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.284.5000

Watson Clinic
1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

GASTROENTEROLOGY

Lakeland Regional Health
130 Pablo Street
Lakeland, FL 33803
Phone: 863.687.8335

Watson Clinic
1600 Lakeland Hills Blvd
Lakeland, FL 33805
Phone: 863.680.7000

GENERAL SURGERY

Lakeland Regional Health
3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.687.1321
Fax: 863.603.6534

HEMATOLOGY

Lakeland Regional Health Hollis Cancer Center
3525 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.603.6565

Watson Clinic
1730 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.603.4770

INTERVENTIONAL RADIOLOGY/ VASCULAR SURGERY and LAB (IVC FILTER)

Lakeland Regional Health
1324 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.687.1068

Radiology and Imaging Specialists (RIS)
1305 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.688.2334

Gregory Nedurian, MD
521 Buena Vista Street
Lakeland, FL 33805
Phone: 863.687.0550

LABORATORY SERVICES

Lakeland Regional Health 863.284.5000
Watson Clinic 863.680.7000
Quest Diagnostics 863.682.4400
LabCorp 863.683.5343

LIVER ELASTOGRAPHY (FIBROSCAN®)

Lakeland Regional Health
1324 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.687.1100

Watson Clinic
1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

NEPHROLOGY

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

Central Florida Kidney Care PA

1745 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.688.0576

Florida Kidney Physicians

2001 W Reynolds Street
Plant City, FL 33563
Phone: 813.910.0030

Bond Clinic PA

500 East Central Avenue
Winter Haven, FL 33880
Phone: 863.293.1191

Gessler Clinic PA

635 1st Street North
Winter Haven, FL 33881
Phone: 863.294.0670

NEUROLOGY

Lakeland Regional Health

3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.284.6809

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

Josephine Lim MD

2404 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.802.8440

Herminio Cuervo MD

1601 Williamsburg Square
Lakeland, FL 33803
Phone: 863.647.1684

NUTRITION

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

OBESITY MEDICINE

Lakeland Regional Health

3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.284.1500

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

Terrence Delikat, DO

1350 E. Main Street
Bartow, FL 33830
Phone: 863.537.6151

PHYSICAL MEDICINE AND REHABILITATION/ PHYSICAL THERAPY

Lakeland Regional Health

3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.687.1250

PULMONOLOGY

RESPIRATORY THERAPY/ARTERIAL BLOOD GAS

Lakeland Regional Health

3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.284.5000

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

PSYCHIATRY AND PSYCHOLOGY SERVICES

Lakeland Regional Health

3030 Harden Boulevard
Lakeland, FL 33803
Phone: 863.687.1222

Yantra Psychiatric Services

1014 S. Florida Avenue, 2nd Floor
Lakeland, FL 33803
Phone: 863.450.3067

RADIOLOGY

Radiology and Imaging Specialists (RIS)

1305 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.688.2334

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

DIRECTORY | SPECIALTY CARE- BRANDON

Preparation for bariatric surgery or treatment may involve receiving care from a provider in one or more of the following specialties. For this care, you may choose a provider with whom you are already established or one from the list below. You are under no obligation to choose a provider from this list.

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CARDIOLOGY

Bay Area Cardiology Associates

635 Eichenfeld Drive
Brandon, FL 33511
Phone: 813.684.6000
Fax: 813.654.9032

Dr. Shahid Malik

Northside Cardiology
620 Eichenfeld Drive
Brandon, FL 33511
Phone: 813.633.9700

Dr. Thangam Saba

The Heart & Vein Center
533 Medical Oaks Avenue
Brandon, FL 33511
Phone: 813.295.5800

Dr. Ed Gandi

320 Oakfield Drive, Suite A
Brandon, FL 33511
Phone: 813.689.1912

ENDOCRINOLOGY

Dr. Mia Fronteras

116 Parsons Park Drive
Brandon, FL 33511
Phone: 813.615.7620

Linda Cohen, APRN

116 Parsons Park Drive
Brandon, FL.
Phone: 813-615-7620

GASTROENTEROLOGY

Dr. Bhavtosh Dedania

Gastroenterology Center of Tampa Bay
602 Vonderburg Drive, Suite 101
Brandon, FL
Phone: 813.685.5500

Dr. Arif Qazi

609 Medical Care Drive
Brandon, FL 33511
Phone: 813.685.5100

Digestive Diseases Associates

Dr. Farooque Dastgir
Dr. Farrakh Saeed
876 S. Parsons Ave.
Brandon, FL
Phone: 813.653.3359

HEMATOLOGY

Comprehensive Hematology/Oncology

425 S. Parsons Avenue, Suite 101
Brandon, FL 33511
Phone: 813.278.5062

Brandon Cancer Center

403 S. Kings Avenue, Suite 100
Brandon, FL 33511
Phone: 813.982.3460

HOSPITAL

HCA Florida Brandon Hospital

119 Oakfield Drive
Brandon, FL 33511
Phone: 813.681.5551

• **Central Scheduling**

Phone: 866-463-7001

Fax: 866.378.0408

• **Pre-Admission Testing**

Phone: 813.916.1339

IVC FILTER PLACEMENT

Dr. Harshinder Singh

South Shore Cardiovascular Associates
425 S. Kings Avenue
Phone: 813.661.6199

Dr. Faisal Khan

633 W. Lumsden Road
Brandon, FL 33511
Phone: 813.643.0033

Interventional Radiology

Brandon Regional Hospital
119 Oakfield Drive
Brandon, FL
Phone: 813-681-5551

LIVER ELASTROGRAPHY (FIBROSCAN®)

Lakeland Regional Health

1324 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.687.1100

Watson Clinic

1600 Lakeland Hills Boulevard
Lakeland, FL 33805
Phone: 863.680.7000

NEPHROLOGY

Dr. Amit Johnsingh, Dr. Azhar Malik

Dr. Cristina Balsera

Florida Kidney Physicians
3140 S. Falkenburg Road, Suite 201
Riverview, FL 33578
Phone: 813.910.0030

NEUROLOGY

Dr. Rafael Rodriguez

401 N. Parsons Avenue, Suite 105
Brandon, FL 33511
Phone: 813.653.2775

Dr. Bitar Hassan

1771 S. Kings Avenue
Brandon, FL 33511
Phone: 813.684.5880

Dr. Pravin Zala

500 Vonderbury Drive, Suite 314W
Brandon, FL 33511
Phone: 813.654.7030

NUTRITION

Kimberly Riley, RD, CDE

312 E. Venice Avenue, Suite 102
Venice, FL 34285
Phone: 941.800.5565
Email: Kimsgateway@gmail.com

PSYCHOLOGY SERVICES

Dr. Dale Simpson

Comprehensive Med Psych System
1250 South Tamiami Trail Suite 201
Sarasota, FL 34239
871 Venetia Bay Boulevard. Suite 310
Venice, FL 34285
Phone: 941.363.0878 Ext 2075
Fax: 941.636.0527
Email: chall@medpsych.net

Dr. Curtis Takagishi

Licensed Psychologist
13701 Bruce B. Downs Boulevard Suite 111
Tampa, FL 33613
Phone: 813.819.8895
Fax: 813.523.2363

SLEEP STUDY | CONSULTATION



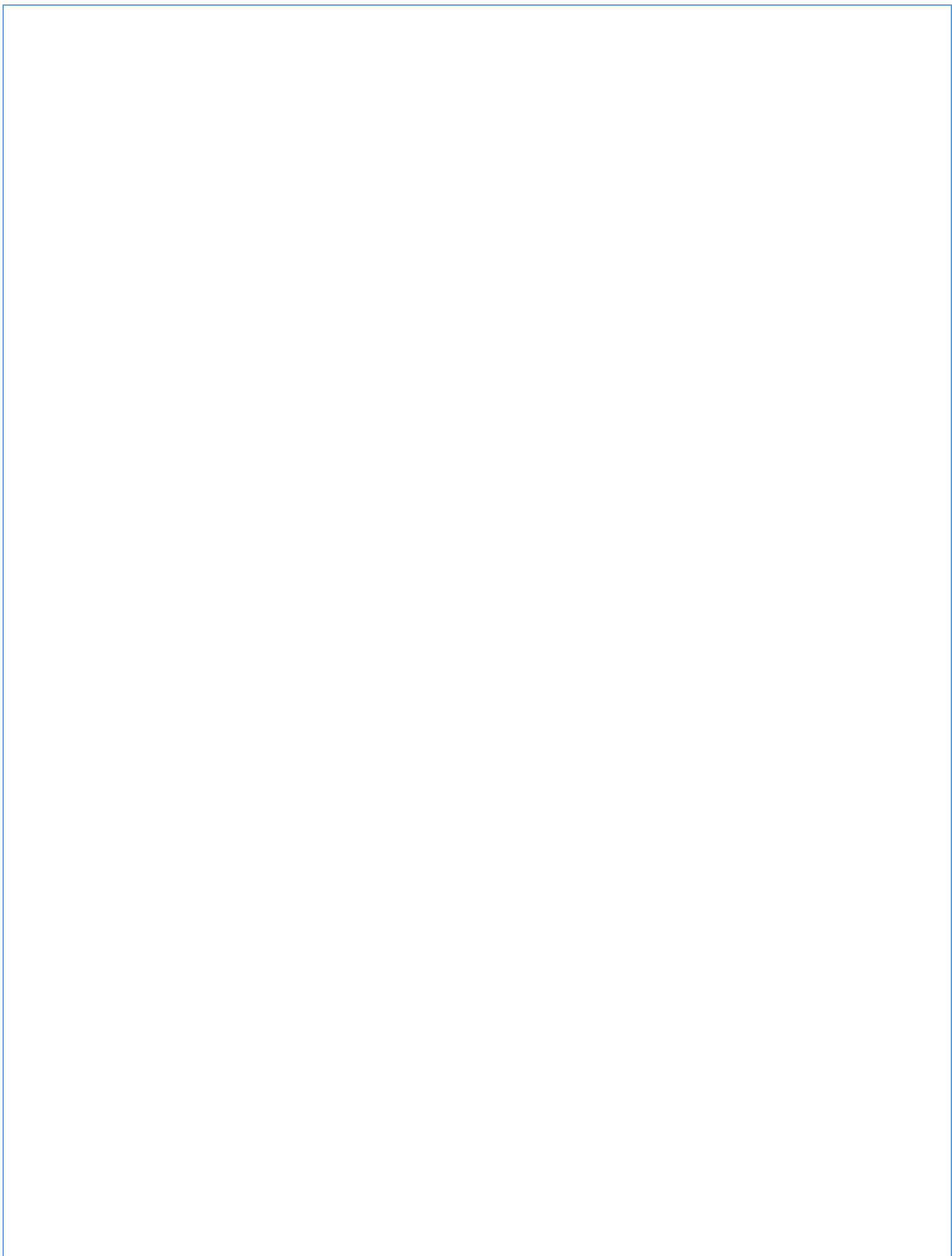
Why do I need to have a sleep study?

Sleep apnea is a potentially serious sleep disorder in which breathing repeatedly stops and starts. If you snore loudly and feel tired even after a full night's sleep, you might have sleep apnea.

You will be referred to a sleep disorder center. There, a sleep specialist can help you determine your need for further evaluation.

An evaluation often involves overnight monitoring of your breathing and other body functions during sleep. Home sleep testing also might be an option.

Testing for sleep apnea is an important part of your pre-operative work up as it will determine if you are required to use a CPAP (Continuous Positive Airway Pressure) when you are sleeping. It is important to have a clear picture of whether you have obstructive sleep apnea and start treatment with a CPAP prior to surgery.



NUTRITION | CONSULTATION



Kim Riley, RD/CDE

Registered Dietitian, Certified Diabetes Educator

312 E. Venice Avenue | Suite 102

Venice FL 34285

Phone: 941.800.5565

Email: Kimsgateway@gmail.com

Nutrition and lifestyle changes are key factors to obtain and maintain successful weight loss. We are very passionate about helping others overcome obesity and who want to choose a healthier lifestyle.

Not only do we enjoy getting to know our patients and forming a relationship, but we also want you to feel comfortable throughout the entire process.

Our services offer complete nutrition care that include individualized programs, meal planning, as well as health and wellness coaching.

Pre-op and Post-op Bariatric Surgery diets are available to assist patients in each phase of their journey.

With flexibility of over-the-phone or in-person follow-ups, our nutritionists are at your service to ensure you are well educated on your nutritional needs.

FREE email questions if you need help between visits and support via Facebook, support group [CHEBLI SUPPORT](#)



weight loss ROADMAP



- NUTRITIONAL GUIDELINES | DIET PHASES
- PHASE 1 | FULL LIQUID
- PHASE 2 | PUREE AKA BLENDERIZED CONSISTENCY
- PHASE 3 | SOFT PROTEIN
- PHASE 4 | REGULAR DIET
- SUPPLEMENTS | GUIDELINES
- ADDITIONAL INFORMATION | TIPS
- NUTRITION | CHEAT SHEET
- BEHAVIORAL | CHANGES
- SWEETENERS | SUGARS
- DUMPING SYNDROME | AWARENESS
- ALCOHOL & SUGAR | ALTERNATIVES

NUTRITIONAL GUIDELINES | DIET PHASES

WHAT CAN I EAT After Bariatric Surgery?



Metabolic & Bariatric surgery is a big step in the right direction for substantial weight loss.

However, surgery alone isn't enough to maintain long-term success.

The way you eat after surgery must be **permanently changed**.

Initially, the volume of food to be consumed will be **restricted** to aid healing, and at the same time provide essential nutrients.

IMPORTANT TIPS

- Eat slowly
- Chew, Chew, Chew
- Keep your meals small
- Practice mindful eating
- No liquids with meals (at least ½ hour before and after each meal)
- Consume adequate Fluid (water, enhanced water)
- No Carbonation
- No Alcohol (empty calories)
- Avoid sweetened beverages (juice, energy drinks, milkshakes)
- Avoid using straws
- Focus on high-protein foods and avoid foods with high fat and sugar content

Following these guidelines before and after bariatric surgery is vital to reach and maintain your goals.

PHASE 1 | FULL LIQUID

WEEKS 1 - 2

GOAL: Drink at least 80 GRAMS OF PROTEIN DAILY as well as 64 OUNCES OF TOTAL LIQUIDS.

Remember to take small sips frequently!

These liquids must be “pourable” or able to be sipped with a straw (**but no straws!**). If the “liquid” is semi-solid such as sugar-free gelatin or sugar-free pudding, it may be too thick and not tolerated well.

SERVING SIZE: Start with 1 - 1+1/2 ounces every 10 - 15 minutes. If you feel you can increase the amount, increase in 1/2-ounce portions (about 1 Tablespoon). You may need to measure or use a medicine cup initially.

LIQUID PROTEIN EXAMPLES: Consider using pre-made protein shakes to obtain your daily 80 g protein goal.

Premier Protein • Ensure MAX • Fair Life • Core Power • Quest • Muscle Milk. • Equate

Make sure whatever protein shake you drink has at least **20g protein** and **9g or less of total carbs** per serving.



TOTAL LIQUID EXAMPLES: 64 oz’s of additional liquids can be obtained from the following examples:

Water • decaffeinated coffee • Crystal Lite • Fair Life skim milk • low sodium broth • herbal tea • Gatorade Zero • Powerade Zero • Propel Zero



IMPORTANT TIPS: You can use unflavored protein powder (Isopure unflavored, Vital Proteins unflavored, Unjury unflavored) to add to cooled or warm beverages to create another source of protein.



When unflavored protein is added to hot liquids, or to liquid and then heated or microwaved, the protein will clump up and not be suitable for this phase of your healing.

You may also use crystal light, Gatorade Zero, Powerade Zero, Propel Zero, or herbal tea mixed with unflavored protein to make sugar-free protein popsicles.



Examples:

Sugar free lemonade with 1 scoop unflavored protein powder

Chicken broth (try Better than Bouillon!) cooled to a warm temperature, and add 1 scoop unflavored protein powder

Decaffeinated coffee, cooled to a warm temperature, and add 1 scoop unflavored protein powder

Take-out wonton soup, STRAINED so there are no pieces, cooled to a warm temperature and add 1 scoop unflavored protein powder

Unsweetened almond milk with 1 scoop of unflavored protein

FULL LIQUID OVERVIEW:

Focus on obtaining 70 - 80 grams of liquid protein per day.

Do not have more than 30 grams of liquid carbohydrate per day.

Focus on obtaining 64 ounces of fluid besides the liquid protein.

PHASE 2 | PUREE AKA BLENDERIZED CONSISTENCY

WEEKS 3 – 6

GOAL: Continue with at least 2 protein shakes (60-70g protein from shakes) and at least 64oz total fluid or more. Start adding puree foods at least 1-3 times daily.

Below are some ideas you can eat as puree. Aim for a daily meal plan with at least 80 grams of protein and 6-8 cups of fluid per day. Portions may vary with EACH INDIVIDUAL due to preferences etc. Work with the dietitian to come up with a personalized plan that suits you.



Blender

SERVING SIZE: Start with a serving size of 2 ounces. This is the time to remember not to drink and eat at the same time. Wait 30 minutes BEFORE and AFTER meals before consuming any liquids.

AVOID: Cereal • Mashed potatoes • Regular refried beans • Baby food (potatoes, peas, fruits) • Purees in the grocery store such as Hormel pureed meals.

BLENDERIZED PROTEIN CONSISTENCY EXAMPLES: Chicken • Turkey • Fish • Lean Beef

Remember that spices intensify in flavor when blenderized.

Baby food protein is acceptable; it may need to be seasoned.



NON-PUREE EXAMPLES: Flavored non-fat Greek or non-Greek yogurt • Cottage cheese • Ricotta cheese • Low fat refried beans

You can flavor the yogurts with extracts and many other non-calorie items. Remember the yogurt cannot have seeds, pieces of fruit, or chunks in them.



IMPORTANT TIPS

- Add non-fat powdered milk (3 Tablespoons=4g protein) or GENEPRO (1 scoop = 11g protein) protein powder to your foods to boost the protein count.
- Try one new food at a time. If you feel nauseated or experience gas or bloating after eating, then you are not ready for this food. Wait a few days before trying this food again.

NON-PUREE NUTRITION

Food/Beverage	Portion	Grams of Protein
Fat free plain Greek yogurt	4 oz	9g
Cottage cheese: fat free, 1%, 2%	¼ cup	7g
Ricotta cheese: fat free, part skim	¼ cup	7g
Baby food: stage 1 or 2 <u>meat or poultry only</u>	2 oz	6-7g
Egg, scrambled until small curds are formed but are soft and not runny	1	7g

RESOURCES

There are many good resources to help fuel some more ideas:

Check out www.bariatricbits.com for recipe examples.

Fresh Start Bariatric Cookbook: Healthy Recipes to Enjoy Favorite Foods After Weight-Loss Surgery by Sarah Kent

BREAKFAST EXAMPLES: Nonfat plain yogurt (Greek or regular) – can be flavored with cinnamon, decaf instant coffee crystals, sugar free jelly, sugar free pancake syrup etc.

- Protein Shake of choice (make a shake with powdered protein and unsweetened almond milk for a twist!)
- Mashed up scrambled eggs
- Mashed up egg/tuna/chicken salad (remember, you don't have to eat breakfast foods for breakfast!)

LUNCH & DINNER EXAMPLES: Any protein that is soft, blended or mashed

- Overcooked veggies mashed up
- Protein shake
- Strained soup (broth based is preferred)
- Many companies have high protein soup (Bariatric fusion, Unjury etc.)
- Ricotta cheese

PHASE 3 | SOFT PROTEIN

WEEKS 6 – 12

GOAL: Continue with at least 2 protein shakes (60-70g protein from shakes) and at least 64oz total fluid or more. Continue puree foods at least 1-3 times daily and transition into adding softer proteins that won't need to be blenderized.

Soft Protein Examples:

Eggs: Start with egg whites only as a whole egg can be too rich for the healing belly. Try 1 scrambled egg white at a time. If tolerable, try a soft or hardboiled egg white.



Mayo based salads: Prepare them yourself instead of getting ready-made. This will help control the ingredients.

chicken/tuna/salmon/shrimp/egg salad: canned white chicken/canned or pouch tuna/canned salmon/canned baby salad shrimp with low fat or lite mayo/miracle whip. Mash up with fork or spoon to break up any big chunks. Add broth or brine from pickles/olives for additional flavor and to thin it out if desired.

Tip: Try canned proteins as they tend to be softer and easier to digest.



Canned Protein Examples:

You may also make “egg salad” in the blender! Make regular egg salad with low fat /lite mayo, and blenderize it to the consistency of a puree - it will taste like the inside of a deviled egg.

You may also blend low fat cream of chicken soup with a can of chicken; heat and enjoy “Super Chicken Soup”

- Shaved deli meats (turkey, chicken, ham) – **AVOID** roast beef and high fat salami/pepperoni.
- Laughing Cow cheese wedges
- Low Fat Mozzarella string cheese
- Over cooked green beans, boiled broccoli tips, boiled carrots, mashed cauliflower or other non-starchy veggies (avoid raw veggies and foods with seeds such as tomato or tomato sauce)
- Baked flaked and cut up fish/shellfish
- Crustless quiche
- Egg bites
- Turkey meatballs (made from ground turkey)



IMPORTANT TIPS

- All foods should be cooked without added fats. Bake, grill, broil, or poach meats. You may season meats with herbs and spices instead of fats.
- Moist meats are tolerated better at this phase. Add chicken or beef broths, fat free gravies and low-fat cream soups to moisten meats. Finely dice meats and chew well.
- Add 1-2 Tbsps. of a new food at a time, if you feel nauseated or bloated after eating then you are not ready for this food.
- Wait a few days before trying this food again. Everyone progresses differently. Listen to your body.

PHASE 4 | REGULAR DIET

3 MONTH POST SURGERY



FINAL STAGE

GOAL: Continue with at least 2 protein shakes (60-70g protein from shakes) and at least 64oz total fluid or more. Continue softer proteins at least 1-3 times daily and gradually add new foods. Raw fruits and vegetables can be added in as tolerated. You may want to avoid the skin and membranes on fruit. Citrus fruits can be added back into diet as tolerated.



Follow a lower fat diet and avoid simple sugars for life. **Your protein goal remains at 80 grams each day.**

For successful weight loss, caloric intake may range between 800-1200 calories each day. Try to keep your total carbs to 50g or less daily.

AVOID: dry, tough, fatty meats, grains (bread, rice, pasta, crackers), peanut butter, dried fruit, nuts, chips, popcorn, high sugar foods.

IMPORTANT TIPS

- Eat protein foods first: hunger is normal, and protein will help you feel more satisfied
- *Don't* drink beverages with meals, wait 30 minutes after your meal to begin drinking again.
- Eat slowly and chew foods well.
- Continue to take your prescribed supplements for life.
- Keep yourself hydrated! Always include 6-8 cups of water and low-calorie beverages daily.



SUPPLEMENTS | GUIDELINES



Before purchasing any supplements speak with our nutritionist for personalized recommendations.

SURGERY SUPPLEMENT GUIDELINES

You are required to take the following vitamin and mineral supplements every day for the rest of your life.

Start Day 4 Post Surgery***

Taking a vitamin supplement is vital to maintain your nutritional health and prevent vitamin and mineral deficiencies. Post bariatric surgery patients are at a greater risk for decreased vitamin and mineral absorption for the reason that daily food intake has significantly decreased.



IMPORTANT TIPS

NO GUMMY VITAMINS, NO CHILDRENS CHEWABLE VITAMINS***

Depending on the brand and size of the vitamin, you'll need to take between 1 and 4 pills, or chewable tablets daily. Read the label to find out how many are required.

It should contain at least **18mg of iron**. If you choose a multivitamin without iron, you may need to take iron supplementation separately.

- It should contain at least **400-800 mcg of folic acid (800-1000 mcg/day for females of childbearing age)**
- **Vitamin A:** at least 5000-10,000 IU/day (1500-300 mcg),
- **Vitamin E:** at least 15mg/day
- **Vitamin K:** 90-120 mcg/day
- At least **1-2 mg of copper**
- Should contain **12-100 mg of Thiamine**
- At least **3,000 IU of Vitamin D.**
- At least **350-1000 mcg of Vitamin B12**
- Calcium: **1200-1500mg per day.** For best absorption 500 mg doses should be taken at breakfast, lunch, and dinner. (3 times per day). It should **not** be taken within 2 hours of iron. Calcium inhibits iron absorption so separating these is necessary.

Calcium Citrate is recommended. Absorption is better compared to calcium carbonate.

BARIATRIC FORMULATED MULTIVITAMIN RECOMMENDATIONS

Choose one of the following examples that are Bariatric formulated:

Bariatric Formulated Multivitamin Options	Serving Size Per Day	Amount of Iron	Where to Purchase
Chewable			
<i>Bariatric Formulations- Include higher levels of Vitamin D and Vitamin B12. Do not need to take an additional supplement.</i>			
<u>Bariatric Advantage</u> -Bariatric Advantage Advanced Multi EA -Bariatric Advantage Essential Multi	2 2	45mg None	bariatricadvantage.com
<u>Celebrate</u> -Celebrate Multivitamin -Celebrate Multi-Complete 36 -Celebrate Multi-Complete 45 -Celebrate Multi-Complete 60 -Celebrate MC Restrictive (R) 45 -Celebrate Multivitamin Soft Chew	2 2 2 2 1 2	None 36mg 45mg 60mg 45mg None	celebratevitamins.com
OPURITY Bypass & Sleeve Optimized Chewable	1	18 mg	opurity.com
ProCare Health -Bariatric Multivitamin Iron Free -Bariatric Multivitamin with 18 mg Iron -Bariatric Multivitamin with 45 mg Iron	1 1 1	None 18mg 45mg	procarenow.com

CALCIUM CITRATE RECOMMENDATIONS

Choose one of the following examples:

Take at least 2 hours apart from multivitamin with iron and any additional iron supplements to maximize absorption.

Calcium Citrate	Amount of Calcium	Where to Purchase
Chewable/Chewy	Per tablet/chew	
Bariatric Advantage <ul style="list-style-type: none"> • Calcium Chewable • Calcium Chewy Bites 	500mg 500mg	bariatricadvantage.com
Celebrate <ul style="list-style-type: none"> • Calcium PLUS 500 Chewable • Calcium Soft Chews 	500mg 500mg	celebratevitamins.com

IRON RECOMMENDATIONS

- The iron in your multivitamin may be enough. Most people need 36 mg per day.
- Menstruating women and/or patients with iron deficiency anemia need more iron.
- Take 45-60 mg per day if you are female and are still menstruating.
- If your bariatric brand multivitamin contains 45-60 mg of iron, you do not need to take a separate supplement.

THIAMINE (B1) RECOMMENDATIONS

Choose one of the following examples:

- Take 100mg Thiamine (B1) daily or a B50 complex
- Thiamine supplementation above the RDA is suggested to prevent thiamine deficiency.
- All patients should take at least 100mg thiamine daily from a B-complex supplement or multivitamin once or twice daily to maintain blood levels of thiamine and prevent thiamine deficiency

Thiamine	Amount	Where to purchase
Bariatric Advantage	100 mg per capsule	Bariatric advantage website, online
Swanson B1	100 mg per capsule	Amazon.com
Nature's Made B1	100 mg per capsule	Walmart/online
Bariatric Fusion	100 mg per capsule	Bariatric fusion website, online

OPTIONAL SUPPLEMENT RECOMMENDATIONS

Biotin (30-1000mcg daily)

Papaya Enzyme (dosage varies)

MiraLAX, Smooth Move Tea for those who experience constipation



***The information contained on this handout is presented for general information purposes only and is subject to change by third parties. Metabolic & Bariatric Surgery of Florida does not recommend any specific vendor, product, or services. Other vendors, products and services may be available from people not on this list. Nothing contained in this handout should be construed nor is intended to be used for medical diagnosis or treatment. Always consult with your physician or other qualified health care provider before embarking on a new treatment, diet or fitness program.

ADDITIONAL INFORMATION | TIPS

- Flavor extracts or spices that do not contain sugar can be added to protein drinks for flavor.
Examples: vanilla or almond extract, cinnamon or nutmeg.
- Sugar-free cocoa powder can be added to provide a chocolate flavor.
- Add unflavored protein powder to drinks, soups, shakes, salad dressings, yogurt, cottage cheese, eggs, low fat gravies, taco seasoning and many more!
- MIO flavoring (<http://www.makeitmio.com>)
- Instant decaffeinated coffee crystals can be added to drinks or yogurt for a flavor change.
- Sugar-free Tang can be added to vanilla drinks to create an orange creamsicle flavor or try adding to an unflavored protein drink.
- Sugar Free Kool-Aid or Crystal Light powder can be used to flavor protein drinks
- Sugar-free syrups can be added to flavor protein drinks
- If a drink tastes too thick or too sweet, try adding more fat free milk (unsweetened almond or soy milk) or water.
- Mixing with milk provides additional protein and calcium.
- Try freezing your protein drink after preparing. This can be consumed with a spoon as a frozen treat. Also, can be made into “popsicles”.
- Try adding ice to the prepared protein drink and blend to make a slushy.
- Try mixing your protein powder with plain or sugar-free vanilla yogurt.
- Try mixing protein powder into sugar-free gelatin (before it is set).



PROTEIN POWDER RECOMMENDATIONS

Whey based protein powders	Vegetarian protein powders
Unjury	Tone it Up
GenePro	Vega One
BioPro	PureLean Ultra
IsoPure	BodyLogix Vegan Protein
Pure Protein	PlantFusion
Orgain Clean Whey	Vega Sport protein
Huli	NitroFusion (plantfusion)
GNC brand	Garden of Life protein powder Raw protein
Publix GreenWise whey	Organic
EAS	KOS
Met-Rx	Health Warrior Super food
Body Fortress	

Try collagen protein powder (Vital Proteins) and hydrolyzed collagen protein (ProT Gold or Liquacel)

Q's & A's

- **Can I take all my protein in one dose?**

Protein should be eaten at every meal and snack throughout the day. It is not known if there are additional benefits to having more than 30 grams of protein at once. Protein is a nutrient that helps you feel fuller for longer. If you try to include proteins in each meal or snacks, you're less likely to feel hungry when it's not time to eat.

- **What happens if I don't take in enough protein?**

The body needs additional protein during the period of rapid weight loss to maintain your muscle mass. Protein is required to have a healthy metabolism. If you don't provide enough protein in your diet, the body will take its protein from your muscles and you can become weak.

RESOURCES

Recommended websites to check out:

- www.bariatriceating.com
- www.obesityhelp.com

Recommended books to read:

- Exodus from Obesity – The Guide to Long-Term Success After Weight Loss Surgery by Paula F. Peck, RN
- Eating Well after Weight Loss Surgery by Patt Levine and Michele Bontempo-Saray

Websites for calculating calorie and protein intake:

- www.fitday.com & www.sparkpeople.com

PREPARATION CHECKLIST



- _____ Discuss custom vitamin recommendations with nutritionist
- _____ Protein shakes
- _____ Vitamin supplements
- _____ Refrigerated proteins
- _____ 2-ounce cup
- _____ Baby Spoon, Cocktail Fork, Shrimp fork (Helps you to take small bites)
- _____ Small Decorative Plates (Helps control portions and increases the eye appeal of the meal)
- _____ Mini food processor/food chopper



NUTRITION | CHEAT SHEET

CARBS & STARCHES

- Remove all starches and you'll automatically be low carb

OR

- <30 grams of Total Carbohydrates per day during starch free pre op phase
- 50-60 grams of Total Carbohydrates per day after 6 months



Nutrition Facts	
8 servings per container	
Serving size	2/3 cup (55g)
Amount per serving	
Calories	230
% Daily Value*	
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 160mg	7%
Total Carbohydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Added Sugars	20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 235mg	6%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

You will be removing starches 4 weeks before and 6 months after surgery.

Bread, flat breads, tortillas, pasta, rice (for these items, even whole wheat counts as a starch), potatoes, sweet potatoes, peas, corn, beans (except string beans/green beans), the entire cereal aisle including oatmeal, Cream of Wheat, Farina, and all hot cereals, granola, granola/breakfast bars, most of the snack aisle, crackers, rice cakes, popcorn.

Anything over 15 grams of carbs is likely a starch (some items may have small amounts of starch in the ingredients, but if it's very low in carbs, it's OK)



KEY WORDS:

oats, wheat, grains, flour, corn

TIPS FOR READING FOOD LABELS

Nutrition Facts

8 servings per container

Serving size 2/3 cup (55g)

Amount per serving

Calories **230**

% Daily Value*

Total Fat 8g **10%**

Saturated Fat 1g **5%**

Trans Fat 0g

Cholesterol 0mg **0%**

Sodium 160mg **7%**

Total Carbohydrate 37g **13%**

Dietary Fiber 4g **14%**

Total Sugars 12g

Includes 10g Added Sugars **20%**

Protein 3g

Vitamin D 2mcg 10%

Calcium 260mg 20%

Iron 8mg 45%

Potassium 235mg 6%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

CALORIES:

There is no precise measurement of calories after surgery, however, after healing, it is likely you will end up between 600-1100 calories per day. Use the **Baritastic App** to track your nutrition!

BEFORE Surgery: you'll have more calories – if you want a precise calorie count, use My Fitness Pal.

FAT:

35 grams per day or less

Fat should be lower than protein per serving

CARBS:

<30 grams per day during starch free and 50-60 grams per day after 6 months OR remove all starches and automatically be low carb

PROTEIN:

80-100 grams per day 20-30 grams per meal



SWEETENERS | SUGARS

You should not consume any foods or beverages made with sugar.

The following artificial sweeteners / sugar substitutes are acceptable:

- Aspartame (Equal®, NatraTaste®)
- Acesulfame-K (Sweet One®)
- Saccharin (Sweet 'N Low®, Sugar Twin®)
- Sucralose (Splenda®)
- Stevia (Truvia™, Pure Via™, SweetLeaf®, Stevia in the Raw)



The following is a list of sugar alcohols that manufacturers use instead of sugar. Note that most of them end in “ol” but not all do. These sugar alcohols could cause stomach pain, gas and diarrhea. If you see any sugar alcohol listed among the first three ingredients, test that product at home. If you experience any discomfort, you should eliminate that product from your diet.

Arabitol	Hydrogenated	Iditol	Isomalt
Glycerol (glycerin)	Starch (hydrolysate)	Mannitol	Polyglycitol
Lactitol	Maltitol		Xylitol
Ribitol	Sorbitol	Threitol	
Dulcitol	Erythritol	Glycol	

The following are some foods/beverages that are high in added sugar and should be **eliminated from your diet**.

Baked goods, cakes, cookies, pies, donuts, pastries, etc.

Gelatin (sugared)	Honey	Syrup (sugared)	Yogurt, fruit on the bottom
Sherbet	Sorbet	Custard	Frozen yogurt (sugared)
Dried fruits	Ice Cream	Jam and jelly (sugared)	Fruit drinks (sugared)
Marmalade	Chocolate milk	Tapioca pudding	Popsicles (sugared)
Canned fruit in syrup	Sweetened	Maple syrup	Pudding (sugared)
Gelato	condensed milk	Yogurt, sugared	
Soft drink (sugared)	Italian ice	Drink mixes (sugared)	
Cereal			



DUMPING SYNDROME | AWARENESS

Eating foods containing sugar or excessive amounts of fat/salt can cause the symptoms of dumping syndrome.



Why Does It Happen?

Foods pass into your intestines more quickly because the stomach is bypassed/alterd. Sugary, fatty or salty foods draw excess water into the intestines, can cause a sense of fullness, cramping, and diarrhea. This can also cause a drop in blood pressure and blood sugar, which may result in weakness, sweating, rapid heart rate, and nausea 15-60 min after eating.

AVOID

- Ice Cream
- Cookies
- Cakes
- Candy
- Soda
- Sweet Tea made w/ sugar
- Fruit Juice
- Cold Cereal
- Crackers
- Chips
- Large portions of fruit
- Chocolate/flavored milk
- Applesauce w/ added sugar
- Yogurt with over 15 g sugar
- Protein shakes with over 15 g sugar



ALCOHOL & SUGAR | ALTERNATIVES

NO ALCOHOL 12 MONTHS POST SURGERY

- Alcohol doesn't provide any nourishment or satiety (empty calories)
- Your new stomach can cause you to reach dangerous levels of alcohol intoxication quickly
- Alcohol is a gastric irritant and can lead to ulcers or other stomach/GI complications
- Alcohol is dehydrating and depletes your body of certain nutrients

ADDICTION RISK WARNING

After surgery, when a person cannot turn to food, it is important be careful what outlets they choose to handle stress. Alcohol can quickly become an addiction, even if you were not a drinker before surgery.

BEVERAGES TO AVOID

- carbonation (lifetime)
- caffeine (one month before and up to 3 months after)
- alcohol (one month before to one year after)
- calories (juice etc) – lifetime



ZERO CALORIE SUGAR SUBSTITUTES

These and similar products provide no calories and are perfectly fine to use.



AVOID ANY SWEETENERS CONTAINING SUGAR AND CALORIES

Examples: White and brown sugar, raw sugar, maple syrup, agave nectar, honey, coconut sugar, brown rice syrup, molasses)

30 GRAM CARBOHYDRATE | DIET

TO BE FOLLOWED 30 DAYS BEFORE SURGERY

<p>PROTEIN FOODS (use as desired)</p>	<ul style="list-style-type: none"> Eggs (fried, scrambled, poached, hard boiled, omelets, eggbeaters, whole eggs, or egg whites) Cheese: all regular or low-fat cheeses, cottage cheese, ricotta cheese, reduced fat cream cheese, cheese sticks LEAN: Beef, pork, lamb, chicken, ham, Canadian bacon, deli meat (turkey, chicken, ham, roast beef) Fish: any fresh variety, canned tuna, sardines or salmon, shellfish (shrimp, clams, oysters, etc.) Nut butter (limit to 2 Tablespoons) Plant protein sources: tofu, tempeh, pea protein powder, Ripple unsweetened plant protein milk 	<p>AVOID battered/fried protein foods</p>
<p>VEGETABLES</p>	<p>Greens: lettuce, salad greens, endive, escarole, spinach, Swiss chard, collard greens, mustard greens, kale, herbs, bok choy, cabbage</p> <p>Canned bamboo shoots, celery, seaweed, mushrooms, asparagus, fennel, sauerkraut, cauliflower, broccoli, brussels sprout, artichoke</p> <p>Avocado, okra, cucumbers (pickles), green/wax beans, peppers, summer squash, zucchini, spaghetti squash, snow peas, snap peas, pea pods, tomato, eggplant, tomatillo</p> <p>Radishes, jicama, green onion, turnip, leeks, water chestnuts</p>	<p>Higher carb veggies to avoid: beets, peas, winter squash (acorn, butternut), parsnips, potato, sweet potato, corn, plantains, legumes</p>
<p>SOUPS (use as desired)</p>	<p>Broth or broth-based soups made with lean meat and veggies listed above</p>	<p>AVOID soups made with corn, peas, potatoes, noodles, rice, barley, or other grains</p>
<p>FREE FOOD (use as desired)</p>	<ul style="list-style-type: none"> Drinks: sugar free drinks (drinks with 5 or less calories per serving), Crystal Light, sugar substitutes, decaffeinated coffee or tea, herbal tea, broth <p>Condiments: lemon or lime juice, horseradish, mustard, dill relish, salsa (up to ¼ cup), soy sauce, vinegar, Worcestershire, herbs and spices, garlic and onion powder, flavoring extracts</p>	

<p>Limit to no more than 1 serving per day or 2 ½ servings to equal 1 serving per day</p>	<ul style="list-style-type: none"> ¼ cup fresh or frozen berries Milk: 8 oz. Fat Free (Fair Life or regular brand) (12g carbs)
<p>NUTS</p>	<ul style="list-style-type: none"> up to ¼ cup of any nuts or 2T of seeds such as sunflower seeds Limit to no more than 2 servings per day
<p>USE SPARINGLY</p>	<ul style="list-style-type: none"> Butter, margarine, oils (canola, olive, coconut), cream, salad dressings, low fat mayonnaise, sour cream, whipped cream, coffee creamer
<p>AVOID</p>	<ul style="list-style-type: none"> Sugar and sugar containing foods (sweets, candy, cookies, pastry, gum) Regular soda, juice, milk and any beverage with more than 5 calories per serving Dried fruits, trail mix, granola Starches (bread, bagels, muffins, noodles, rice, hot/cold cereal, potatoes, beets, peas, corn, popcorn, snack chips, croutons, breading, French fries etc.)

MEAL | SAMPLES

BREAKFAST	LUNCH	DINNER	SNACK
Omelet with any veggies	Baked chicken with raw or cooked broccoli Sliced cucumbers	Cheeseburger (NO BUN) with tomato and onion, lettuce Add a veggie: spinach, green beans, sliced tomato or any other non-starchy veggie of your choice	Sugar free Italian Ice
OR			OR
Fried eggs with Canadian bacon	OR		Sugar free gelatin
OR	Tuna/egg/chicken salad with lite mayo, celery, bell peppers, onion, lemon juice Lettuce	OR	OR
Nonfat plain Greek yogurt with berries	OR	Broth with chopped chicken, cabbage, celery, mushrooms, zucchini	2 celery sticks filled with peanut/almond butter or cream cheese
OR	Pork loin chop with veggies	OR	OR
Scrambled eggs with cheese and veggies	OR	Grilled, Baked or Broiled fish (salmon, tilapia, scallops, shrimp, cod etc.) Grilled Zucchini Salad with lettuce, radishes, ¼ c cashews, oil and vinegar	Cheese stick or turkey wrapped around cheese stick
OR	Grilled chicken/salmon/shrimp over salad (use oil and vinegar instead of creamy dressing)	OR	OR
Low fat cottage cheese with cherry tomatoes		Rotisserie chicken with cauliflower mash	Low fat cottage cheese with handful of fresh or frozen berries (NOT dried berries/fruits)
OR			OR
Hard boiled eggs, cheese stick, handful almonds or walnuts			Sliced cucumber dipped in salsa
OR			OR
Premier protein shake			Dill pickle slices and ¼ cup olives
OR			2 oz. hummus with pepper or cucumber slices
Crustless quiche			

How Can You Tell if a Vegetable Is Low-Carb?

Look up the nutrition data: <http://www.calorieking.com>

1 Cup raw vegetables or 1/2 cup cooked would have no more than 5-6 grams carbohydrate per serving.

RECOMMENDED APPS



PSYCHOLOGICAL | CONSULTATION



Being Psychologically Ready for Surgery

In order to successfully attain your weight loss goal, you must prepare both your body and mind for the journey ahead. The surgery itself has been often referred to as merely “a tool”. Initially, it will produce significant weight loss but long term, this will not be sufficient with the necessary lifestyle changes. The surgery will not address the psychologically, emotional, behavioral, and lifestyle challenges that await you. You must prepare yourself to psychologically meet these challenges to ensure the best outcome. Your mind will need to be trained in how to learn to change your inner thoughts. You will need to establish new eating, exercise, and lifestyle habits. In effectively training your mind now, you will ensure weight maintenance for the rest of your life.

WHAT CAN BE DONE BEFORE SURGERY?

You will be asked to undergo a psychological evaluation. Your surgeon wants to know that you are psychologically and emotionally prepared for surgery. The psychological assessment will provide your surgeon with information on:

- Your ability to effectively manage the necessary long-term lifestyle changes
- Your ability to make the necessary psychological, emotional, interpersonal, and behavioral adjustments
- Your coping mechanisms when faced with unexpected challenges
- Whether you have adequate support systems to call upon

WHAT CAN I DO TO PREPARE FOR SURGERY?

Begin by taking an honest look at yourself and identifying possible risk factors that may become obstacles to achieving optimal weight loss. Develop strategies to deal with these possible roadblocks prior to surgery. By mastering your plan of action now, you will have greater success post operatively.

CHECKLIST FOR PSYCHOLOGICAL EVALUATION

Our mutual patient is considering surgical weight reduction and requires an evaluation by a psychologist or psychiatrist. Both the insurance companies and the surgeon require this. Most insurance companies will not authorize bariatric surgery without a letter of support from a psychologist or psychiatrist. It is helpful if you provide documentation on the following issues:

- How does the patient think the surgery will benefit him/her?
- How long has obesity been a problem?
- List and describe sources of stress in the patient's life.
- Provide details of the patient's personal history such as where he/she is from, where he/she lives now, education, marital status, and home situation, and family interactions, physical and sexual abuse.
- Provide details of tobacco, alcohol, and recreational drug use.
- Any history of addictions or substance abuse
- Any significant untreated or incompletely treated psychiatric illness?
- Provide details of depression, suicidal tendencies, eating disorders, or compliance issues.
- Provide details of comprehension of the surgery and the ability to make lifestyle changes.
- Is the patient reliable? Will he/she be compliant with post-operative instructions?
- Does the patient understand that noncompliance puts the patient at risk for complications?
- Does the patient have realistic expectations and understand that numerous complications can occur?
- Does the patient have adequate support?
- Is the patient capable of giving informed consent?

GET SOCIAL

Get Connected for Our *Latest*
News & *Updates!*

FOLLOW US ON SOCIAL MEDIA



@Like us on Facebook | Joseph E Chebli MD

@ Follow us on Instagram | @DoctorChebli

JOIN OUR ONLINE PRIVATE SUPPORT GROUP ON FACEBOOK



CHEBLI SUPPORT

Created for patients to share tips, tricks and recipes.
It is a great opportunity to support and encourage each other
through this process.

****Please, no medical advice****

LAKELAND REGIONAL MEDICAL CENTER

SUPPORT GROUP

JOIN US

Our entire Metabolic and Bariatric team will work together with you so we can help you meet your healthy-living goals. Your active participation is crucial to your success.

Before your surgery, we encourage you to learn more about nutrition and healthy foods. We also suggest you increase your physical activity, which can help prepare you for surgery and better prepare you for exercise after surgery. Lastly, we want you to have a support system to ensure your long-term success once the surgery is complete.

Our team is here to answer any questions or concerns you may have.

Please contact us at **863.284.1576**

Education and Support Groups:

We offer a variety of educational and support opportunities including Metabolic and Bariatric Seminars, Bariatric Surgical Support Groups and pre-op classes.

Please visit myLRH.org/support-groups to learn more or to view dates and times



PROGRAM GOALS

1. Provide compassionate, dignified, and respectful care
2. Provide exceptional surgical services
3. Provide follow-up care for our patients throughout their lives
4. Provide support and education before and after surgery



Lakeland Regional **Health**[®]

Do you have an upcoming operation?

Join us for one of our **pre-op classes** from 11AM - 12PM
on the 2nd Saturday of the month, starting December 10!
Held at LRHMC's Mulaney North Auditorium or via Zoom.

This pre-op class is designed to get you ready for your upcoming surgery. It will cover what is expected, ideas on what to have ready when getting home, and what to expect in the hospital. Discussion on pre and post-operative diet, vitamins and supplements, post-op care, and more.

To learn more or to sign up, scan the QR code
or visit myLRH.org/events.



Your Health. Our Promise.

myLRH.org/bariatrics

SUPPORT GROUP | HCA FLORIDA BRANDON HOSPITAL JOIN US

Florida WLS Support (Private Group)

Lots of excellent information provided and super tasty post-operative recipes, before and after testimonials and pictures. An opportunity to speak with patients and ask questions.



This is a private group for metabolic and bariatric surgery patients to help you through the processes. We offer insights to helpful articles, great recipes, Q & A and a lot of mutual support.

Hope to see you online!



EXERCISE PLAN | TIPS



1. **Find an activity you can do and won't mind doing (maybe you will even enjoy it!).**

A common question among beginning exercisers is "What exercise is the best?"

The answer is the type of exercise you will actually do. This means walking for most people. It's cheap (just the cost of a good pair of walking shoes). It can be done anywhere (around the block, at a local school track, in a mall, on a treadmill at a gym or at home). You already know how to do it.

2. **Start off easy.**

A common reason for failing to stick with an exercise routine is not to work too hard initially. Not many people truly enjoy vigorous exercise, so it is highly likely you will not want to stick with an exercise program that involves high-intensity work. Make it easy on yourself and start off easy...you will be much more successful in the long run. You may also put yourself at risk for injury if you exercise too vigorously to begin with, meaning it will be difficult for you to be active while you heal. If you have not exercised recently, it may be enough to simply be walking around the house several times a day, and slowly work up to walking for longer periods of time.

3. **Dedicate time EVERY DAY for exercise.**

Too often exercise is not made a priority, and it is therefore easy to not do it at all. Exercise is an essential part of your weight loss program and essential component in bettering your health in general. Ultimately, you want to be working up to engaging in 60 minutes of cardiovascular exercise every day (or a minimum of 5 days per week).

4. **Keep in mind you eat every day; therefore, you must exercise every day to keep your calorie consumption/expenditure in the proper balance.**

Individuals who have successfully maintained weight loss burn an average of 300 calories per day. There are 3500 calories per pound of fat, so you can see why it is so important to expend extra calories through exercise every day.

5. **Ask for advice from professional.**

Getting advice about exercise from a professional in the exercise field may make exercise much less of a mystery for you, dispelling many myths, answering questions for you, and ultimately making it more likely you will successfully stick with a good exercise routine. When seeking help regarding exercise, it is important to speak with someone with the proper credentials.

6. **An Exercise specialist or Physiologist is someone who has a Bachelor's or Master's degree in Exercise Science or closely related field and should be able to answer (or find the answer) for any exercise related questions you have.**

Physical Therapists are also good resources for exercise advice and are usually particularly helpful for individuals with orthopedic issues. Be aware that many people claim to be exercise experts but may lack the education and experience in working with overweight/obese individuals and therefore cannot provide appropriate, specific advice for your needs.

COMPONENTS OF AN EXERCISE PROGRAM



Examples of cardiovascular exercise include:

- Walking
- Cycling (regular or recumbent)
- Aerobic Dance/step
- Water Aerobics
- (Any exercise with continuous, repetitive movements involving large muscle groups)

Examples of exercise that can burn plenty of calories but are not considered cardiovascular include:

- Tennis
- Volleyball
- Basketball
- (Any exercise in which you are stopping and starting regularly)

Strength Training

Typically, individuals with excessive weight are quite strong and have a significant amount of muscle mass from carrying that excessive weight. However, calorie restriction is likely to result in the loss of muscle tissue and therefore important to limit the loss of this muscle tissue with exercise. A combination of cardiovascular and strength exercises will help preserve as much muscle as possible during your weight loss process

Strength training, unlike cardiovascular exercise, should be done every other day as muscles require a day of rest to repair following this time of activity. Strength training itself does not burn many calories, though muscle mass will improve with regular strength training, and the more muscle you have, the more calories you will burn at rest. Strength training is also important for maintaining bone density.

Ways to strength train:

- Handheld weights
- Weight machines
- Resistance bands
- Body weight

Range of Motion (ROM) Exercise

These are exercises that get your joints and muscles ready for exercise and should be done before your cardiovascular workout. When doing ROM exercises you take each joint through its full range of motion, thinking head to toe to get all of the major joints. ROM exercises should be done on a slow, controlled manner. If you have not exercised recently, these may be all you want to start off with, completing a set of these several times a day, working toward doing cardiovascular exercise.

Cardiovascular Exercise

This will be the main portion of your exercise routine. Cardiovascular exercise is the most effective way to burn calories, and therefore help you control your weight. This is also the kind of exercise that will yield benefits for your heart and lungs. To be considered cardiovascular on nature, the exercise must use large muscle groups the arms and legs, be rhythmical in nature (doing the same or similar motions repeatedly) and must be able to be sustained for extended periods of time.

If you have time for only one type of exercise, this is what you should be focusing on completing. At the start of your cardiovascular workout, it is important that you complete a minimum 3-minute warm-up as this is the amount of time it takes for the body to adjust to a new level of activity. At the end of your workout, it is usually important that you complete a minimum 3-minute cool down.

This prevents blood pooling in the legs that could result in feeling dizzy or faint. Both the warm-up and cool down should mimic your actual workout but at a lower intensity. If you have not exercised recently, you may find that your workout consists of just the warm-up and cool down. It is perfectly acceptable to start out this way.

Overtime, your goal is to complete 60 minutes of cardiovascular exercise (the warm-up and cool down do not count) on a daily basis. It is fine to break these 60 minutes into two 30 minutes workouts or four 15 minutes workouts, just as long as you get a full 60 minutes in a day. It is best to exercise at a moderate to somewhat hard level (3-4 out of a scale of 10) on a rating of Perceived Exertion Scale.

<i>Rating of Perceived Exertion Borg RPE Scale</i>		
6		How you feel when lying in bed or sitting in a chair relaxed. Little or no effort.
7	Very, very light	
8		
9	Very light	
10		
11	Fairly light	
12		Target range: How you should feel with exercise or activity.
13	Somewhat hard	
14		
15	Hard	
16		
17	Very hard	How you felt with the hardest work you have ever done.
18		
19	Very, very hard	
20	Maximum exertion	
		Don't work this hard!

TIPS FOR SUCCESSFUL WEIGHT TRAINING



Start Easy

If you try lifting too much you are likely to injure yourself, which can set you back in your exercise routine. It is best to start off with light weight to ensure you have proper form. The last few repetitions of each exercise should start to feel tough.

Work all the major muscle groups. Complete 2-3 sets of 10-15 repetitions of each exercise. If you are limited by time, do just one set of 10-15 repetitions working all the major muscle groups?

Importance of Exercise

You have already made the biggest step toward a healthier and happier life. You have decided you need to make a change now - congratulations!!

Exercise, in combination with surgery, diet, and behavior change will help you lose weight, reduce your risk of developing many chronic diseases, and allow you to live your life the way you want to. You have probably heard the phrase, "Surgery is a tool to help you lose weight"; this is true. Your weight loss surgery will make it easier for your body to burn calories provided that you ask your body to be more physically active.

Before Surgery

Many people have started exercise programs, only to end up sticking with it a short time later. The same scenario may occur repeatedly, and this discourages people from starting up again for fear of failing again. The good news is this cycle can be stopped with a little determination and the right knowledge.

You and your doctor have decided that bariatric surgery is the right option for you, and now it is time to get to work. It is very important that you begin to develop your exercise routine now so that you are in better physical condition for surgery and so that you can fall right back into your exercise routine after surgery. You will also be asked to lose percent- age of your pre-surgery weight, which will require some focused exercise.

SURGERY | PREPARATION

GUIDELINES FOR BARIATRIC PATIENTS PREPARING FOR SURGERY

NO NICOTINE

Permanently refrain from smoking and the use of nicotine products. Smoking impedes proper lung function, reduces circulation by constriction, inhibits healing of surgical sites, increases your risk of blood clots, and stimulates production of stomach acid putting you at risk of developing serious and potential life-threatening ulcers.

NO MARIJUANA

Complete abstinence from marijuana.

NO ALCOHOL

Complete abstinence from alcohol is required for the first year.

NO ASPIRIN

Excedrin and Bufferin are prohibited

NO NSAIDS (Non-Steroidal Anti-Inflammatory)

NSAIDS have been linked to causing ulcers following weight loss surgery and should be avoided.

Examples: Advil, Aleve, Anaprox, Ansaid, Beta, Cataflam, Celebrex, Clinoril, Daypro, Feldene, Ibuprofen, Indocin, Lodine XL, Naprelan, Naprosyn, Orudis, Oruvail, Relafen, Tolentin, Toradol, Vioxx, Voltaren.

Use of any these medications must be discussed and approved by Dr. Chebli

NO STEROIDS

Oral Steroids are not permitted.

Immunomodulatory such as methotrexate, embrel, and humera must be discussed and approved with Dr. Chebli.

Avoid the use of intravenous steroids/intramuscular under any circumstance.

HIBICLENS: PRE-OPERATIVE BATHING INSTRUCTIONS

1. Before Surgery you can play an important role in your own health. Because skin is not sterile, we need to be sure that your skin is as free of germs as possible before surgery. You can reduce the number of germs on your skin by carefully washing before surgery. Following these instructions will help you be sure that our skin is clean before surgery. **IMPORTANT:** You will need to shower with a special soap called Hibiclens. The soap may come in a liquid form or in a scrub brush applicator. Either form is acceptable to use. (Not to be used by people allergic to chlorhexidine.)
2. Shower or bathe with Hibiclens the night before your surgery. Do not shave the area of your body where your surgery will be performed.
3. With each shower or bath, wash your hair as usual with normal shampoo.
4. Rinse your hair and body thoroughly after you shampoo your hair to remove any residue.
5. Then apply the Hibiclens soap to your entire body **ONLY FROM THE NECK DOWN**. Do not use Hibiclens near your eyes or ears to avoid permanent injury to those areas. Wash thoroughly, paying special attention to the area where surgery will be performed. Turn off the water to prevent rinsing soap off soon. Wash your body gently for 5 minutes. Do not scrub your skin too hard. Do not wash with your regular soap after Hibiclens is used.
6. Turn the water back on and rinse your body thoroughly.
7. Pat yourself dry with a clean, soft towel each time.
8. Put clean sheets on your bed to prevent re-contamination.

LOCAL PHARMACIES STOCK HIBICLENS ANTIBACTERIAL SOAP

Hibiclens soap can be purchased at most large pharmacies, including CVS and Walgreens without a prescription.

Please call your pharmacy to be sure they have Hibiclens in stock.



DAY OF SURGERY

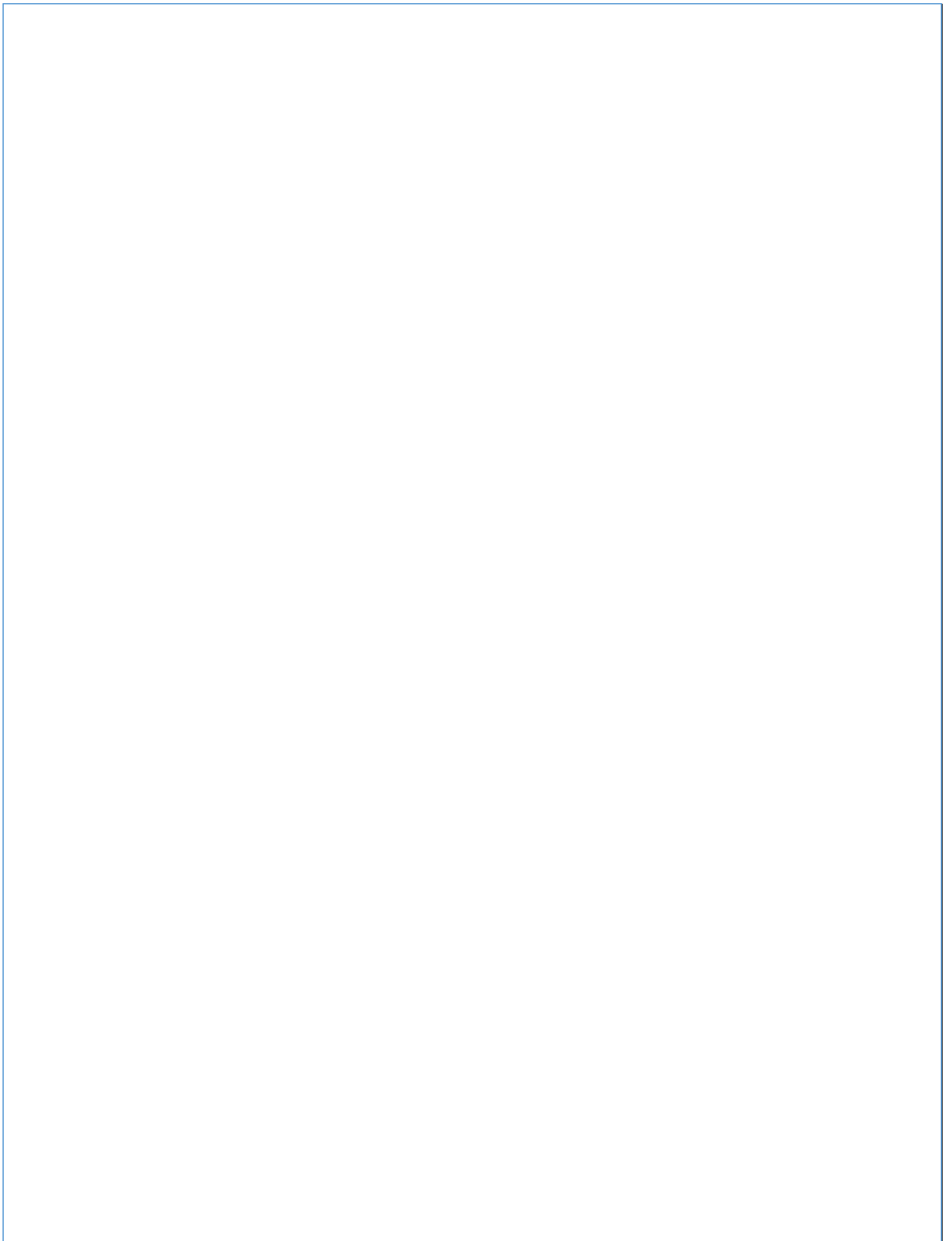


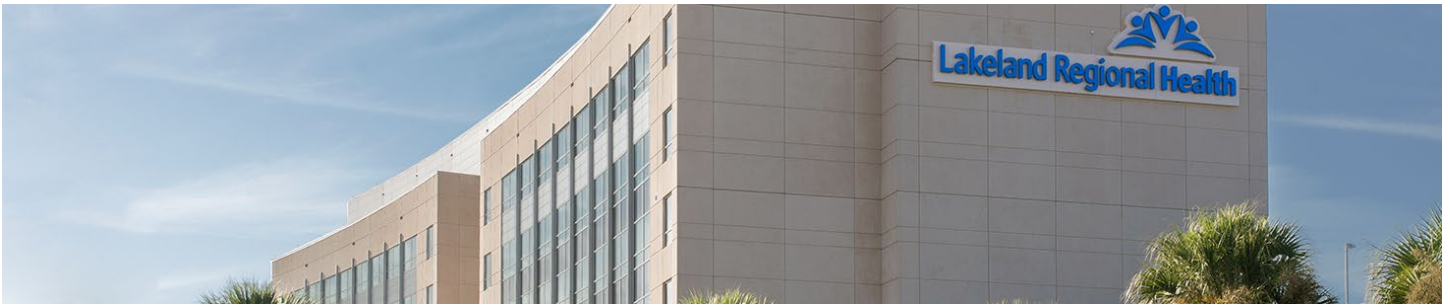
You will be asked to report to the Main Entrance of the hospital at least two hours prior to your scheduled surgery. You will be admitted to the surgical floor. Your nurse will review your history, examine you, and discuss your plan of care with you. Your consent to the procedure will be confirmed.

During your time in ACU, your nurse will check your vital signs and start an intravenous line. You may have some additional blood tests drawn at this time. You may be given medications as per your physician's orders. Instructions on our pain scale and the importance of deep breathing and coughing will be reviewed.

While in the pre-op holding, you will have the opportunity to talk with your anesthesiologist. Your anesthesiologist will review your general health history and your history with previous anesthetic agents. This is your opportunity to have any last-minute questions answered. Your anesthesiologist will explain the recommended type of anesthesia for you. The operating room circulating nurse will also introduce herself while you are in pre-op holding. Everyone in the team is involved in making certain that your pre-operative checklist is complete. So do not be surprised if you are asked the same questions several times by several team members.

When you are taken to surgery, your family/friends are then welcomed to wait in the Surgical Waiting Room near the Operating Room. Your physician will look for your family/friends in this area after the surgery is completed.





WELCOME | LAKELAND REGIONAL MEDICAL CENTER

1324 Lakeland Hills Boulevard
Lakeland, FL 33805

863.284.1576

Lakeland Regional Health's Institute of Metabolic and Bariatric Surgery and Medicine is located at our Grasslands Campus and surgeries are performed at Lakeland Regional Health Medical Center.

Directions

From Tampa

From I-4, take exit 32 and head south on U.S. 98N. Lakeland Regional Health Medical Center will be on your left. You may park in the free parking garage.

From Orlando

From I-4, take exit 33 and head south on Lakeland Hills Boulevard. Lakeland Regional Health Medical Center will be on your right. You may park in the free parking garage.

Parking

LRHMC has one main entrance to the hospital for the convenience of patients and visitors.

Parking is free in our B•C Garage.

Entrance B

Located on the northwest side of the campus at the new B Wing, provides the most convenient access to the 'B', 'C' and 'M' wings, Admitting, Parkview Cafe, and the Gift Shop. Entrance B is open 24 hours a day. Free valet parking is available from 8 a.m. until 6 p.m. Monday through Friday.

PARKING | LAKELAND REGIONAL MEDICAL CENTER

Complimentary Parking

For your convenience, we provide free parking in the following areas:

B-C Parking Garage (This parking area is closest to the B - Lobby)

D-E Parking Garage

Surface lots around the Carol Jenkins Barnett Pavilion for Women and Children

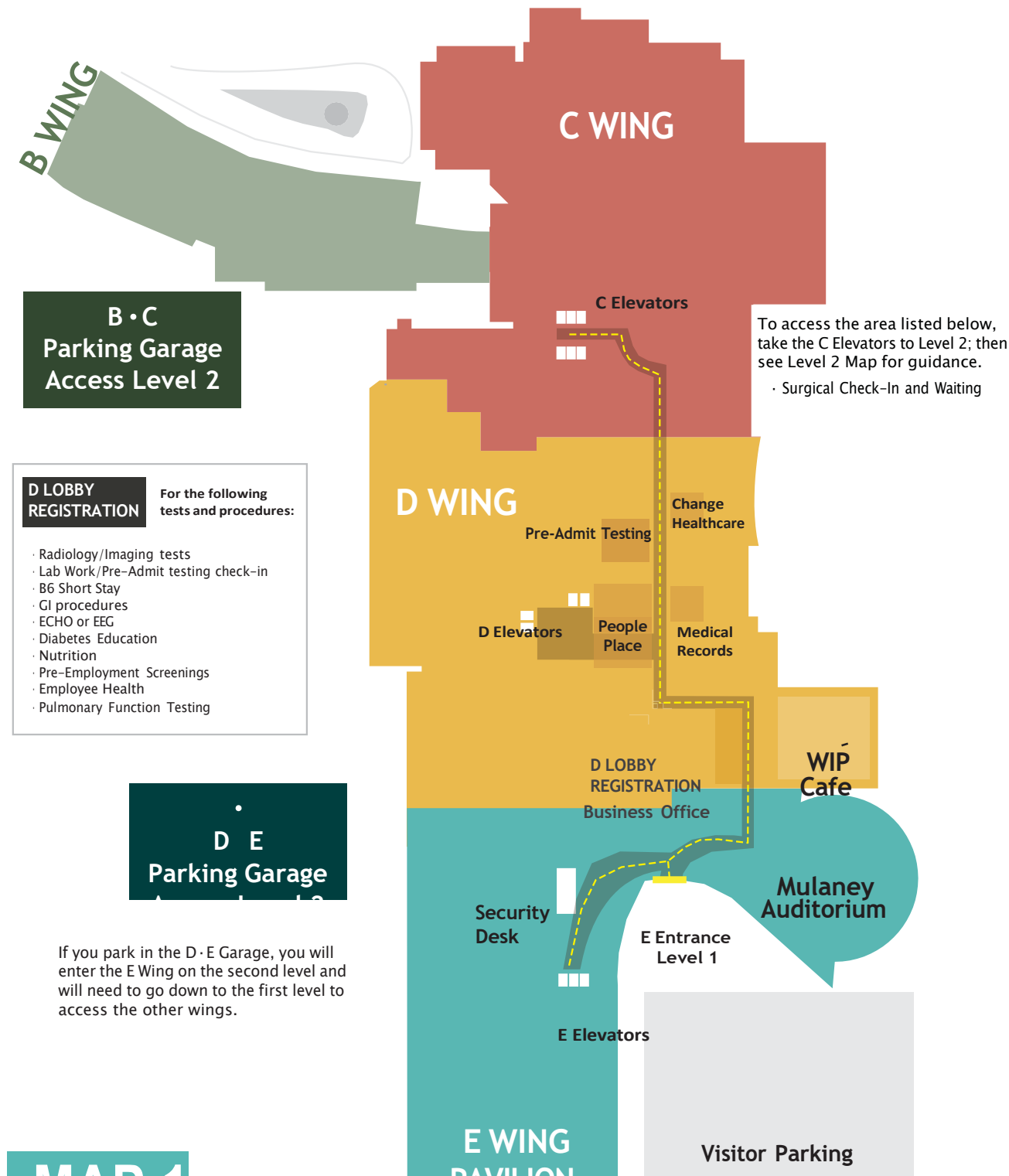
For the most up-to-date information about parking, including information about Valet Parking, please visit our website at myLRH.org/parking.



MEDICAL CENTER CAMPUS – LEVEL 1 MAP

Recommended entrance for joint surgery patients is the B-C Entrance or B-C Garage entrance. Please see Map 2 on page 25.

The map below provides guidance from the E Wing to the rest of the Medical Center Campus through the Level 1 hallway. The C Elevators can take you to Level 2.



B · C
Parking Garage
Access Level 2

To access the area listed below, take the C Elevators to Level 2; then see Level 2 Map for guidance.

- Surgical Check-In and Waiting

D LOBBY REGISTRATION For the following tests and procedures:

- Radiology/Imaging tests
- Lab Work/Pre-Admit testing check-in
- B6 Short Stay
- GI procedures
- ECHO or EEG
- Diabetes Education
- Nutrition
- Pre-Employment Screenings
- Employee Health
- Pulmonary Function Testing

D · E
Parking Garage

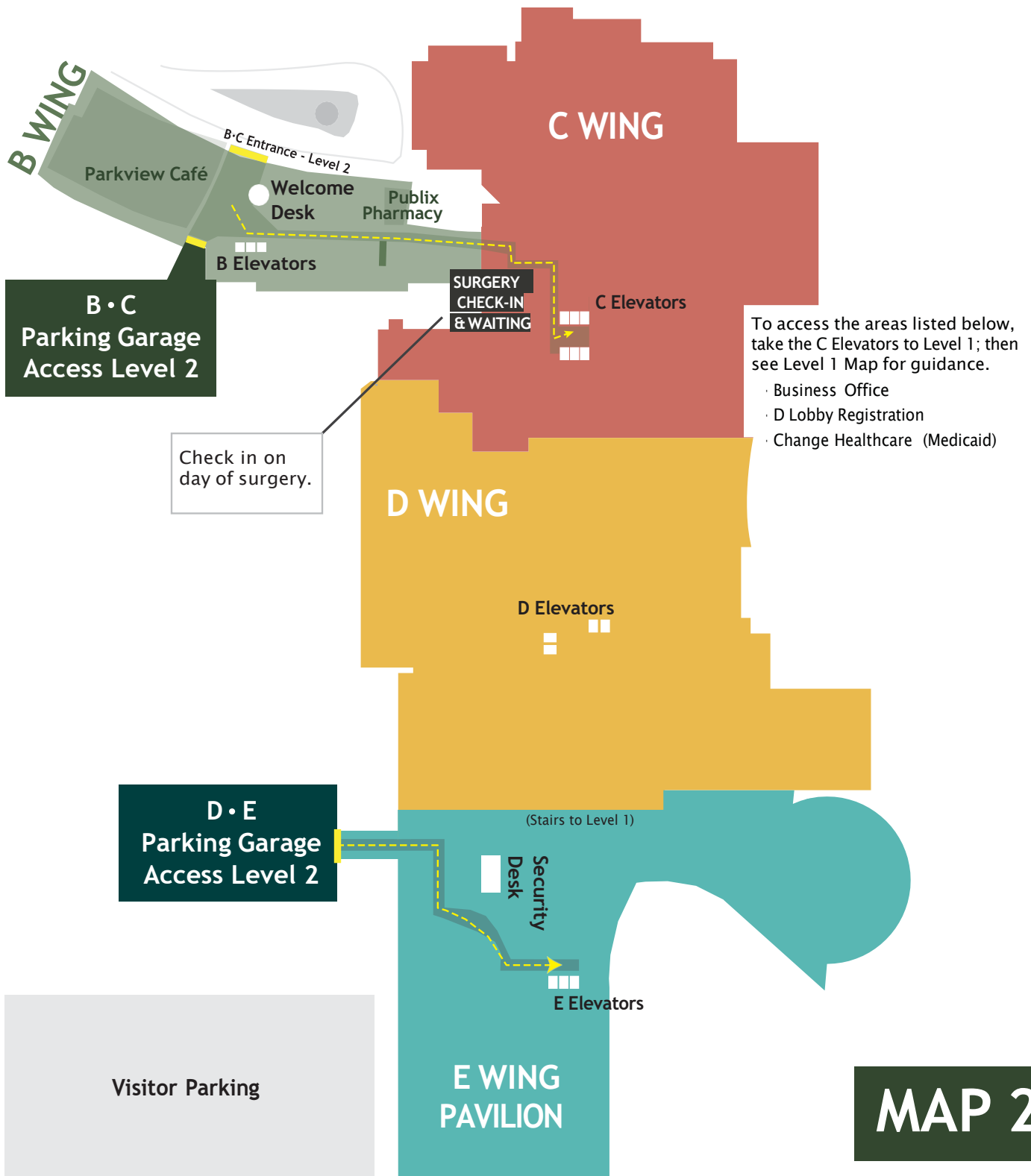
If you park in the D · E Garage, you will enter the E Wing on the second level and will need to go down to the first level to access the other wings.

MAP 1

MEDICAL CENTER CAMPUS - LEVEL 2 MAP

If you were told to arrive at the B Wing on the day of surgery, you are encouraged to enter through the B Entrance or from the B-C Garage for easiest access to your check-in area.

(During your pre-op phone call from the hospital, we will tell you where to arrive for your surgery or procedure.)



WELCOME | HCA FLORIDA BRANDON HOSPITAL



119 Oakfield Dr

Brandon, FL 33511

Our 436-bed acute care facility offers a wide range of specialty services, including a 24/7 emergency rooms for adults and children, Bariatric Center, Heart and Vascular Center, Level III neonatal intensive care unit (NICU) and pediatric intensive care unit (PICU). We are also home to The Women's Center and The Baby Suites, offering complete care for the whole family.

Bariatric Surgery Center

The Bariatric Center at HCA Florida Brandon Hospital offers bariatric (weight loss) surgery and a comprehensive approach to managing obesity and the health-related issues that accompany it.

In our program, our bariatric doctors, surgeons, and weight loss specialists will support you throughout your surgical weight loss journey to a healthier lifestyle. Our center is a Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) Accredited Comprehensive Center, marking our dedication to high-quality care and long-term weight loss.

Brandon Regional Hospital



POST-OPERATIVE | CARE



After your surgery, you will remain in the Recovery Room for up to two hours before going back to your room. Nurses will be monitoring your breathing, blood pressure, and heart rate closely. You will be asked to rate your pain on a scale of 0-10 with a "0" representing no pain and "10" representing severe pain. It is important for you to communicate this information to your nurse. You will become aware of monitors and tubes such as intravenous (IV), oxygen or drainage tubes as you wake up. You may feel somewhat groggy, nauseated, and/or dizzy. Once you have met the discharge criteria, you will be transferred to your room.

The following pages will go over your post-operative surgery procedures.

Most metabolic and bariatric patients are brought back to their room on the 2S surgical unit once fully awake. Upon arrival, the staff will be closely monitoring your vital signs and pain level. The staff will provide you with a copy of "Your Daily Recovery Goals" checklist. This will guide you and your family through your hospitalization.

INTRAVENOUS THERAPY

You will have an intravenous line for hydration and administration of medication.

PAIN

The staff will assess your pain level on a scale of 1-10 with "0" being no pain and "10" being severe pain. Good pain control is important to ensure a quick recovery. It is our goal to keep your pain level less than "3" or at a level that is acceptable to you.

DVT (Deep Vein Thrombosis) PREVENTION

You will have compression devices on your lower limbs. These devices are designed to compress the superficial veins in your legs to prevent blood clots from developing in your lower extremities. The compression devices will be removed while you are up and walking. Early ambulation is very important in preventing DVT's. You will also receive daily doses of a blood thinner to help prevent blood clots.

ACTIVITY

Early activity is very important in preventing severe postoperative complications such as DVT's, pneumonia, and pulmonary embolism (a blood clot which develops in your legs and then travels to your lungs). You will be required to walk in the hall the first evening on your day of surgery. You will then be expected to walk in the halls at least 5-7 times daily.

RESPIRATORY CARE

You will have oxygen delivered through a pair of small nasal cannulas placed in your nostrils.

The staff will be monitoring your oxygen levels using an oximeter. This is a small clip like device which can be placed on a finger or earlobe.

Patients with sleep apnea will be instructed on how to use their CPAP/BIPAP at night. You will also be placed on telemetry monitoring with continuous pulse oximetry. This means that both your heart rhythm and oxygen levels will be continuously monitored by staff in the critical care units.

All patients will be expected to take deep breaths and cough every hour. The respiratory therapist or nursing staff will provide you with an incentive spirometer and Vibratep. This deep breathing device is intended to assist you in your recovery and prevent respiratory complications. You will be expected to use your incentive spirometer and Vibratep 10x every hour while awake as directed.

INSTRUCTIONS FOR USING A SPIROMETER

1. Follow these simple instructions:
2. Sit up as straight as possible. While in bed, sit up as far as you can.
3. Hold the incentive spirometer upright
4. Breathe out normally.
5. Place mouthpiece in your mouth and tightly seal your lips around it.
6. Inhale slowly and deeply to raise the small floating disk as high as you can.
7. Hold your breath for 5 seconds. Remove the mouthpiece from your lips and exhale normally.
8. Allow the floating disk to fall back to the bottom of the chamber.
9. Hold your breath for 5 seconds. Remove the mouthpiece and exhale normally
10. Allow the floating disk to fall back to the bottom of the chamber. Rest for a few seconds and repeat.

Remember this must be done at least 10 times per hour. As you work at it, the distance you move the floating disk will increase. This means you are moving larger volumes of air in and out of your lungs. This is what we want! It is important to continue with your deep breathing and coughing and your incentive spirometer once you are discharged home.

DIET & DISCHARGE INSTRUCTIONS

DIET

You will not be able to take anything by mouth for the day of surgery except for ice chips. On Post Op Day 1. You will be advanced to a Clear Bariatric Liquid Diet. You will be given small medicine cups to drink from. These cups are graduated so you can keep track of how much you are drinking. The small cups also ensure that you are sipping small amounts at a time. **NO STRAWS ARE ALLOWED. SOME MEDICATIONS WILL BE CUT, CRUSHED, OR IN LIQUID FORM.** Let the staff know if you are experiencing any nausea. Your physician will have ordered medication to help alleviate and prevent nausea.

FOLEY CATHETER

A foley catheter may be inserted while in the operating room. These catheters are inserted into the urinary bladder for the elimination of urine. The staff will be paying close attention to the volume of urine being produced.

SURGICAL DRAIN

A surgical drain is placed in all patients, a thin plastic tube drains into a small suction bulb. Gauze pads will cover the site of your surgical drain. It is not uncommon for the pads to become saturated since drain sites will usually leak.

The nursing staff may either reinforce or change the gauze dressing. The amount and type of drainage will be closely monitored by your physician and RN.

DISCHARGE

You will be discharged, provided that all the discharge criteria have been met:

- Tolerating liquids with no nausea or vomiting
- Voiding adequately
- Vital signs have returned to pre-op baseline
- Temperature is less than 100°F
- There is no increase in abdominal pain, tenderness, or distention.

Prior to your discharge from the hospital, the nursing staff will provide you with specific discharge instructions. They will review this information with you and answer any questions. You will receive specific instructions regarding activity, diet, incision care, medications, and respiratory care. You will be instructed when your follow up appointment is set with your surgeon. This follow up appointment is usually made during your pre-op visit.

ALL PATIENTS ARE INSTRUCTED TO CONTACT THEIR SURGEON IF ANY OF THE FOLLOWING SYMPTOMS OCCUR:

- Pain is unrelieved by the prescribed pain medication
- Vomiting occurs and persists for more than 24 hours
- Any redness or increase in drainage from your incision
- Temperature greater than 101°F

DIET & DISCHARGE INSTRUCTIONS

LAPBAND

DIET

You will be allowed noncarbonated, unsweetened clear liquids. NO STRAWS ARE ALLOWED. ALL MEDICATIONS WILL BE CUT, CRUSHED, OR IN LIQUID FORM. Let your nurse know immediately if you are experiencing any nausea. Your surgeon will have ordered anti-nausea medication.

DISCHARGE

You will be discharged home once you meet the following criteria:

- Tolerating liquids with no nausea or vomiting
- Voiding adequately
- Ambulating
- Vital signs have returned to pre-op baseline
- Temperature is less than 100°F
- There is no increase in abdominal pain, tenderness, or distention

Prior to your discharge from the hospital, the nursing staff will provide you with specific discharge instructions. They will review this information with you and answer any questions. You will receive specific instructions regarding activity, diet, incision care, medications, and respiratory care. Your post-op appointment is set with your surgeon for continued care.

ALL PATIENTS ARE INSTRUCTED TO CONTACT THEIR SURGEON IF ANY OF THE FOLLOWING SYMPTOMS OCCUR:

- Pain is unrelieved by the prescribed pain medication
- Vomiting occurs and persists for more than 24 hours
- Any redness or increase in drainage from your incision
- Temperature greater than 101.5°F



