



Bariatric Surgery

Information Manual

Re-Shaping Bodies & Lives

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Welcome

We are very happy to welcome you to 360 Bariatrics. Our weight loss surgery program is a comprehensive program providing you with personalized attention as you work towards your weight loss goal. Our bariatric team consists of many disciplines including physicians, bariatric nurses, dietitians, counselors, exercise physiologists and a bariatric program coordinator. Together with your surgeon, the bariatric team will work with you and your family to provide extraordinary quality care.

Bariatric surgery (weight loss surgery) offers the morbidly obese more than just increased self-esteem and improved quality of life. The health benefits of weight loss surgery can be dramatic. According to a landmark study published in the journal of the American Medical Association in 2004, there are numerous health benefits of weight loss surgery.

- Type II diabetes is cured in 77 % of patients and resolved or improved in 86 % of patients.
- High blood pressure is cured in 62 % of patients and resolved or improved in 78.5% of patients.
- High cholesterol is reduced in more than 70% of patients.
- Obstructive sleep apnea is cured in 86% of patients.
- Risk of death is decreased by 89%.

At 360 Bariatrics we have created a comprehensive weight loss program designed to meet your every need. We believe that you and your family play a key role in promoting a successful recovery. Our goal is to involve you in your treatment every step of the way.

The purpose of this new patient orientation booklet is to prepare, educate and provide you with the tools to help you on your weight loss journey. The information in this booklet will help you safely and effectively transition into your life after surgery. Our goal is to help you not only achieve your weight loss goals but **maintain your weight loss** in the years to come. This booklet should serve as a guide and reference source.

Remember, this is just a guide. The surgeon may add to or change any of the recommendations that have been provided. Always use their recommendations first and ask questions if you are unsure of any information you receive.

Finally, weight loss surgery plus on-going support that helps you achieve and maintain a healthier weight!

Meet Your Team



Dr. Sheetal Patel is a board certified and **fellowship trained bariatric surgeon**. She completed a fellowship at Cleveland Clinic Florida and received specialized training in minimally invasive (laparoscopic) surgery for obesity and metabolic syndrome. She has been published in multiple medical journals including *Surgery for Obesity and Related Diseases*, *Obesity Surgery*, and *Bariatric Times*. She has also presented numerous research studies about revisional bariatric procedures at the American College of Surgeons and the American Society for Metabolic and Bariatric Surgery.

Licensed Professional Counselor



Dr. Patti Allard RN, LMFT, LPC is a registered nurse, licensed family therapist and licensed professional counselor. She completed a doctorate at Texas Woman's University. She has been published in nursing journals including *Nurse Leader* and *Critical Care Nursing Clinics of North America*. She has presented nationally and has done research in the area of therapist support in chronic illnesses.

Registered Dietitian



Joyce Schone RD, LD, is a registered and licensed dietitian. Her role is to help guide you through your nutrition journey before and after surgery. Her goal is to teach you how to eat healthier, monitor your vitamin and mineral levels, as well as recommend exercise to meet your needs. Joyce received her degree in dietetics and corporate and community fitness at North Dakota State University and has more than 20 years of experience in working with patients who are seeking medical or surgical weight management. She is dedicated to helping you make a difference towards your future health and happiness.

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Weight Loss Surgery

Indications and Important Considerations

Weight loss surgery, otherwise known as bariatric surgery, is intended for people who are approximately 100 pounds or more overweight, and who have not had success with other medical therapies such as diet, exercise, medications, etc.

Bariatric surgery is not cosmetic surgery and should not be thought of in any way as a cosmetic procedure. It does not involve the removal of adipose tissue (fat) by suction or surgical removal.

The patient and doctor should discuss the benefits and risks together. They should be aware that problems after surgery may require more operations to correct them.

The patient must commit to long-term lifestyle changes, including diet and exercise, which are the keys to the success of bariatric surgery.

Body Mass Index

Body Mass Index (BMI) is a measurement based on height and weight as it relates to body fat. It is used to determine how much risk a person has of developing certain health problems because of his or her weight. The higher the BMI the higher the risk a person has to develop additional health conditions such as diabetes, hypertension, high cholesterol, sleep apnea, etc.

Calculating BMI

$$\text{BMI} = \frac{\text{weight in pounds} \times 703}{(\text{Height in Inches})^2}$$

OR

$$\text{BMI} = \frac{\text{weight in kilograms}}{(\text{Height in Meters})^2}$$

Definition	BMI	Risk Level
Underweight	< 18.5	-
Preferred	18.5 – 24.9	Low
Overweight	25 – 29.9	Increased
Obese	> 30	High to Extremely High
Class I Obesity = Obesity	30 – 35	High
Class II Obesity = Severe Obesity	35 – 39.9	Very High
Class III Obesity = Morbid Obesity	> 40	Extremely High
Super Morbid Obesity	> 50	Extremely High

Minimally Invasive Surgery

Minimally Invasive or laparoscopic surgery eliminates the need for a large incision. Instead, five to seven small incisions are created, a camera and instruments are introduced into the abdominal cavity and the procedure is performed.

Advantages of the laparoscopic approach include:

1. Less pain which leads to decrease requirement of pain medication and earlier return of bowel function.
2. Earlier mobility whereby patients are ambulating the day of surgery which decreases the risk of deep venous thrombosis (clots in the lower extremities) and atelectasis (collapse of part of the lung) that can lead to lung infections.

Why would I have an open procedure?

Although the laparoscopic approach is feasible in 99% of the cases, in some patients this minimally invasive approach cannot be used. Some reasons are listed below:

- Prior abdominal surgery that has caused dense scar tissue
- Inability to see the organs
- Bleeding problems during the operation

The decision to perform the open procedure is a judgment call made by your surgeon either before or during the actual operation and is based on patient safety.

Abdominal Surgery

There are risks associated with any abdominal surgery. A patient's weight, age and medical history play a significant role in determining specific risks. Your surgeon will inform you about your specific risks for bariatric surgery. Risks associated with any abdominal surgery include:

1. Complications due to anesthesia
2. Wound infections
3. Deep Venous Thrombosis (DVT) – clots in the lower extremities
4. Pulmonary Embolism (PE) – clots that travel to the lungs
5. Pneumonia – infection of the lung
6. Atelectasis – collapse of part of the lung and decreased lung volume. Most often due to the patient taking incomplete breaths. It is prevented by encouraging deep breathing and early ambulation.
7. Stroke or heart attack
8. Intra-abdominal infections
9. Injury to intra-abdominal organs or structures
10. Death

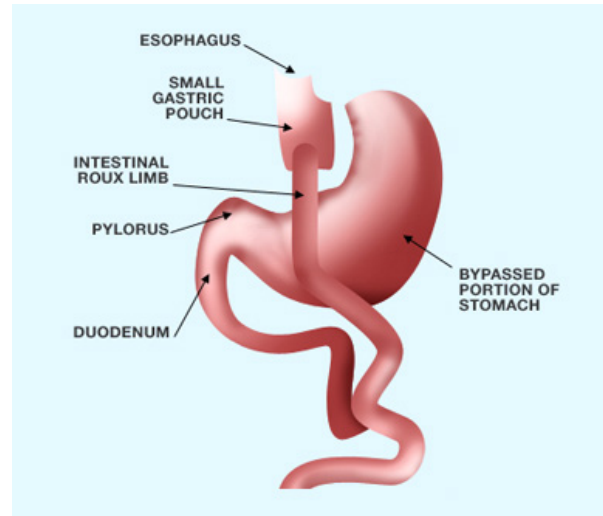
Roux-en-Y Gastric Bypass

The Roux-en-Y gastric bypass is a restrictive and malabsorptive procedure. It restricts food intake and the amount of calories and nutrients the body absorbs. This is accomplished without the need to implant or manipulate an artificial device.

According to the American Society for Bariatric Surgery and the National Institutes of Health, Roux-en-Y gastric bypass is the current gold standard procedure for weight loss surgery. It is one of the most frequently performed weight loss procedures in the United States.

The Procedure

The surgeon creates a small stomach pouch at the top of the stomach to restrict food intake. Then, a Y-shaped section of the small intestine is attached directly to the pouch. This allows food to bypass the lower stomach and a portion of the small intestine. You will feel full sooner, eat less and experience a diminished sensation of hunger. Bypassing a part of the small intestine means the body absorbs fewer calories. The hunger hormone Ghrelin has been found to be reduced after this procedure, thus decreasing the sensation of hunger.



Dietary Adjustments

Patients who have undergone Roux-en-Y gastric bypass surgery must change their food choices. When patients eat a meal high in carbohydrates, which contain sugars that are rapidly absorbed by the body, they may experience an unpleasant reaction known as “dumping syndrome.” Stomach contents move too quickly through the small intestine causing symptoms such as nausea, bloating, abdominal pain, weakness, sweating, faintness and sometimes diarrhea. Additionally, lifelong vitamin supplementation is also required for gastric bypass patients as the bypassed portion of the intestine is where the majority of calcium and iron absorption takes place.

Advantages and Results

The Roux-en-Y gastric bypass has been proven in numerous studies to result in durable weight loss and improve weight-related medical illnesses.

1. Weight loss begins immediately. Half of the weight loss often occurs during the first six months after surgery and usually peaks at 18 to 24 months.
2. Patients can expect to lose 80% or more of their excess weight at the end of one year.
3. Patient often feel less hungry and state the desire to eat is reduced.
4. Does not require implanting an artificial device in the abdomen.

5. Does not require manipulation as with the adjustable gastric band.
6. The obesity-related conditions that may be improved or cured include type II diabetes, hypertension, high cholesterol, arthritis, bladder incontinence, liver disease, certain types of headaches, heartburn, sleep apnea and many other disorders.

Possible Complications

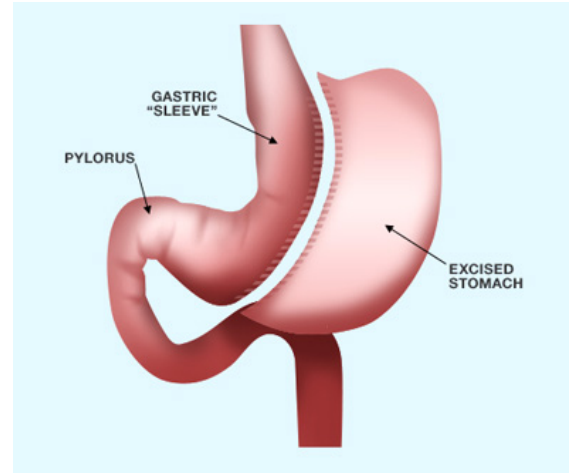
The various possible complications associated with the Roux-en-Y gastric bypass are listed below. It would be best to talk about these and other potential complications with your physician.

1. Leaks can occur and may be from staple lines or due to poor healing.
2. Marginal ulcers – ulcers in the gastric pouch that can bleed, perforate (create a hole in the gastric pouch) or heal and cause narrowing of the gastric pouch outlet.
3. Strictures or narrowing of the gastric pouch outlet. This can occur due to scar tissue or ulcer disease.
4. Obstructions can occur due to scar tissue or ulcer disease.
5. Vitamin and mineral deficiency. The gastric bypass is designed to limit absorption as a result vitamin and mineral deficiencies can occur. Patients will be on lifelong vitamin supplementation. It is recommended that all patients have their vitamin levels checked at regular intervals.
6. Dumping syndrome is an unpleasant side effect that may include vomiting, nausea, faintness, sweating and diarrhea. This occurs due to eating foods high in sugars or carbohydrates.
7. Hernias can develop in up to 10 to 20 percent of patients after any type of abdominal surgery. Internal hernias are unique to gastric bypass.
8. Gallstones can occur due to rapid weight loss.
9. Intolerance to certain foods can occur. It is recommended that patients speak with the Registered Dietitians at the Bariatric Surgery Institute at Medical City Plano if they are experiencing this.
10. Stretching and enlargement of the gastric pouch can occur over time. This can lead to weight gain.
11. Weight gain can occur if patients do not comply with the appropriate dietary guidelines. It is recommended that all patients follow up at regular intervals during the first year and yearly thereafter with the staff at the Bariatric Surgery Institute at Medical City Plano. The best prevention to weight gain is early identification of maladaptive behaviors and modifying them.
12. Due to the nature of this procedure it is not reversible.

Sources: American Society for Metabolic and Bariatric Surgery, National Institute of Diabetes & Digestive & Kidney Diseases

Sleeve Gastrectomy

The Sleeve Gastrectomy is a purely restrictive procedure, whereby it limits the amount of food that can be eaten at one time. For some patients the gastric sleeve is the first part of a two part surgical procedure. Like all weight loss surgeries, the gastric sleeve requires that patients follow a healthy diet and incorporate an exercise plan into their lifestyle in order to continue and then sustain weight loss.



The Procedure

The gastric sleeve procedure (also known as a vertical sleeve gastrectomy) involves removing two-thirds of the left side of the stomach. The stomach is reduced surgically by approximately 80% creating a gastric “sleeve.” No changes are made to the remainder of the intestines which allows for normal digestion and absorption. Ghrelin producing cells are reduced with the removal of a portion of the stomach thus diminishing the sensation of hunger.

Advantages and Results

1. Patients can expect to lose 70% of their excess weight at the end of one year.
2. Weight loss begins immediately.
3. The major part of the stomach that produces hormone responsible for stimulating hunger is removed thus reducing the sensation of hunger. Patient often feel less hungry and state the desire to eat is reduced.
4. Does not require implanting an artificial device in the abdomen.
5. Does not require manipulation as with the adjustable gastric band.
6. Far fewer restrictions are required on the foods that patients can eat following surgery, as compared to other bypass procedures, because the stomach continues to function normally.
7. Patients are not at greater risk for complications such as intestinal obstruction, anemia or vitamin deficiencies.

Possible Complications

The various possible complications associated with the sleeve gastrectomy are listed below. It would be best to talk about these and other potential complications with your physician.

1. Leaks can occur and may be from staple lines or due to poor healing.
2. Marginal ulcers – ulcers in the gastric sleeve that can bleed, perforate (create a hole in the gastric pouch) or heal and cause narrowing of the gastric sleeve.
3. Strictures or narrowing of the gastric sleeve. This can occur due to scar tissue or ulcer disease.
4. Obstructions can occur due to scar tissue or ulcer disease.

5. Vitamin and mineral deficiency can occur therefore patients are encouraged to take vitamin supplementation. It is recommended that all patients have their vitamin levels checked at regular intervals.
6. Hernias can develop in up to 10 to 20 percent of patients after any type of abdominal surgery.
7. Gallstones can occur due to rapid weight loss.
8. Intolerance to certain foods can occur. It is recommended that patients speak with the Registered Dietitians at the Bariatric Surgery Institute at Medical City Plano if they are experiencing this.
9. Stretching and enlargement of the gastric sleeve can occur over time. This can lead to weight gain.
10. Weight gain can occur if patients do not comply with the appropriate dietary guidelines. It is recommended that all patients follow up at regular intervals during the first year and yearly thereafter with the staff at the Bariatric Surgery Institute at Medical City Plano. The best prevention to weight gain is early identification of maladaptive behaviors and modifying them.
11. Due to the nature of this procedure it is not reversible.

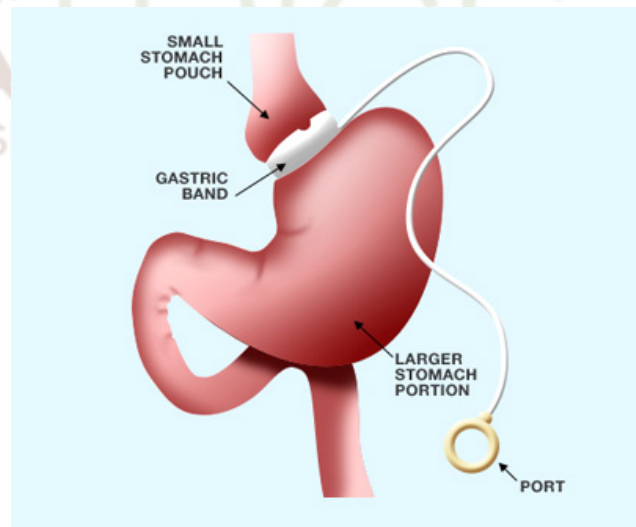
Sources: Medline Plus (National Institutes of Health), American Society for Metabolic & Bariatric Surgery

Laparoscopic Adjustable Gastric Band

The Adjustable Gastric Band is a purely restrictive procedure which does not involve cutting or stapling the stomach. It limits the amount of food that can be eaten at one time.

The Procedure

An adjustable gastric band is placed in the upper part of the stomach creating a small “pouch.” This is connected to an access port that is fixed to the left upper abdominal wall and sits deep under the skin. It is injected with saline six to eight weeks after placement. The adjustable balloon inflates and narrows the passage of food substances into the rest of the stomach. This causes a sensation of indigestion thus creating “restriction.” This reduces the amount of food that can be eaten at one time. We offer both the Lap Band® and the Realize Band®.



Dietary Adjustments

While adjustable gastric banding surgery allows for more flexibility in the diet than gastric bypass surgery, the procedure requires you to make good dietary choices to achieve weight loss success. Adjustable gastric banding surgery results in few nutritional deficiencies, according to

the National Institute of Diabetes and Digestive and Kidney Diseases. Patients who have had the adjustable gastric banding procedure experience slower but steady weight loss, losing the bulk of their weight over the first two years. Successful results from adjustable gastric banding surgery depend on your willingness to adopt a life style of healthy eating, regular physical exercise and follow-up with the surgeon.

Advantages and Results

1. The gastric band allows for normal digestion and absorption
2. It does not involve alteration to the natural gastrointestinal system
3. Patients can expect to lose 50% of their excess weight at the end of two years
4. Low risk of malnutrition
5. Reversible procedure

Possible Complications

The various possible complications associated with the adjustable gastric band are listed below. It would be best to talk about these and other potential complications with your physician.

1. Requires an implanted medical device that must be adjusted periodically or until appropriate restriction is achieved.
2. Access port issues - Leaking or twisting of the access port can occur and may require a corrective operation.
3. Tubing issues - Disconnection or kinking of the tubing can occur and may require a corrective operation.
4. Failure to provide the sensation that one has had enough to eat.
5. Injury to the stomach or esophagus.
6. Migration or slippage of the band. Patient will report increase sensation of reflux and the ability to eat larger quantities of food without restriction.
7. Erosion of the band into the stomach wall.
8. Enlargement or damage to the esophagus can occur if the band is too constrictive or if patients over eat and vomit on a regular basis.
9. A more gradual rate and less weight loss than that typically seen with other bariatric procedures.
10. Weight gain can occur if patients do not comply with the appropriate dietary guidelines. It is recommended that all patients follow up at regular intervals during the first year and yearly thereafter with the staff at the Bariatric Surgery Institute at Medical City Plano. The best prevention to weight gain is early identification of maladaptive behaviors and modifying them.
11. Regular follow-up is critical for optimal results.

Sources: American Society for Metabolic and Bariatric Surgery, National Institute of Diabetes & Digestive & Kidney Diseases

Frequently Asked Questions

Why do I have to take proton pump inhibitors such as Prevacid®, Nexium® or Prilosec® after surgery?

To prevent ulcer formation in the new stomach pouch, as well as prevent gastric reflux. It is recommended that you take one of these medications for 2 to 3 months after surgery even if you are not experiencing gastric reflux. If you ever have to take antibiotics or anti-inflammatory medications, it is recommended that you take one of these medications. If you should have any questions or concerns about prescribed or over-the-counter medications, always consult with your physician or pharmacist.

When can I start to exercise?

You can begin to walk as soon as you can tolerate it. This generally occurs soon after surgery. Clearance for heavy lifting, weight training and other exercises may be discussed at your first preoperative visit.

When can I go swimming?

You may resume swimming 6 weeks after surgery. Until that time, no pools, no spas, no Jacuzzis, no baths.

When can I drive?

There is typically no restriction to driving unless you are on pain medication. If you have questions about medications, please consult your physician or pharmacist.

When do I see my Primary Care Physician after surgery?

You should see your Primary Care Physician within the first 2 weeks after surgery. Any of your current medications for diabetes, high blood pressure, etc., may need to be changed or adjusted.

Will I go home with drains?

Drains will normally be removed before hospital discharge. However, if there is a large amount of fluid which still needs to be drained, they may remain until your first postoperative visit. This will be at the discretion of your surgeon. If you require drains at home you will be taught the appropriate drain care and if needed home health assistance will be arranged.

Can all or any of my prescription medications be crushed?

It is recommended that before you crush any prescription medication that you consult with the prescribing physician or pharmacist. Perhaps there is an alternative form such as liquid.

How long do I have to crush prescriptions or over-the-counter medications? When can I swallow my pills, vitamin and mineral supplements?

We recommend that you do not swallow any whole pills, capsules or other forms of medications, vitamins or minerals for 2 to 3 months after surgery.

When can I go back to work?

Typically, you can go back to work in 2 weeks. This will be assessed at your two week postoperative visit.

What is *Helicobacter pylori* (*H. pylori*)?

This is a bacteria found in the stomach and intestines that can cause ulcers. If you are positive for this bacteria, you will be prescribed antibiotics which you will have to take for 10-14 days.

Possible Symptoms After Surgery – Causes and Solutions

Constipation

May be caused by: decrease in the total food intake, inadequate total fluid intake, and a high protein, low fiber diet. Some vitamins, minerals or medications can also cause constipation. Inactivity may lead to constipation as well.

Possible solutions involve staying well hydrated. Fluid intake should be at least 65 ounces per day. If constipated try to increase fluid intake with an additional 8 to 10 cups per day. You may use over the counter laxatives, fivers or stool softeners such as Milk of Magnesia®, Metamucil®, Senokot®, or Colace®. If constipation persists contact your physician. Continue eating you proteins and taking all you medications, vitamins and minerals as directed.

Dumping syndrome

May be caused by: high sugar or fat intake.

Possible solutions include avoiding sugars, fried foods and high fat foods. Stay well hydrated.

Diarrhea

May be caused by: low fiber intake, lactose intolerance, food allergy, high sugar or fat intake, or food borne illness. During the liquid protein phase of your diet you may experience diarrhea.

Possible solutions involve staying well hydrated. Switch to lactose-free milk. Always check food tolerances. Limit sugar intake to no more than 5 grams per serving. Avoid fried foods and high fat foods. Do not eat food that you are allergic to. Always cook, cool and store your food appropriately to avoid food spoilage and food borne illness. Using bulking fibers such as Benefiber® may help. If diarrhea persists call your physician.

Vomiting

May be caused by: Eating too fast, not chewing well, swallowing large pieces of food, food intolerance, food borne illness, or overeating. If vomiting persists this can be due to a stricture or stenosis (narrowing) of the gastric pouch.

Possible solutions include chewing at least 30 times before swallowing. Cutting food into small pieces. Always check your food tolerances. Stop eating food that make you vomit. Stop eating if you are full. Always cook, cool and store your food appropriately to avoid food spoilage and food borne illness. Do not over eat. If vomiting persists, contact your physician.

Nausea

May be caused by: food intolerances, dehydration, or sensory change. Some vitamins and minerals can cause nausea. Having nausea is a common occurrence after surgery. This feeling is not permanent.

Possible solutions include staying well hydrated. Always check for food tolerances. Avoid extreme temperatures of hot and cold as this may trigger nausea. Do not skip meals, vitamins or minerals. If nausea progresses to vomiting see above.

Pain after eating or drinking

May be caused by: eating too fast, not chewing well, swallowing large pieces of food. Pain may also be caused by overeating or drinking carbonated or caffeinated beverages.

Possible solutions include chewing at least 30 times. Cutting food into smaller pieces. Stop eating when you feel the sensation of fullness or restriction. Avoid all caffeinated and carbonated beverages. If pain persists, contact your physician.

Gas

May be caused by: Eating too fast, drinking carbonated beverages, or eating gas-producing foods such as legumes (beans), broccoli, onions, cabbage or Brussels sprout.

Possible solutions include eating slowly. Slow down! Avoid all carbonated beverages. Soak beans in cool water overnight to reduce gas-producing enzymes found in legumes. Avoid gas producing vegetables. You may take anti-gas medications such as Beano® or Mylicon®.

Vitamin or mineral deficiency

May be caused by: malabsorption of nutrients and not taking the recommended types, dosage and timing of the recommended vitamins and mineral regimen. This may lead to other conditions that would not be healthy.

Possible solutions include adhering to the recommended vitamin and mineral protocol. Have your blood work done so the physician and dietitian can assess your vitamin and mineral levels. If you have any questions about vitamins and minerals contact your physician or dietitian.

Sensory changes (taste and smell)

May be caused by: strong food odors, spicy foods, or extreme temperatures of hot or cold. The exact physiological mechanism, however, is unknown

Possible solutions include avoidance of spicy foods, strong odors that are causing the aggravation, and temperature extremes. Do not skip meals and stay well hydrated.

Lactose Intolerance

May be caused by: milk and dairy products. This is common in patients after surgery. Lactose is a natural sugar found in milk. Lactose Intolerance means you cannot digest the lactose found in milk and dairy products.

Possible solutions include using lactose free products such as Lactaid®. Fermented dairy products such as cheese and yogurt have very little lactose in it. However, always check your tolerance to these foods when eating them for the first time after surgery.



Nutrition & Exercise Guidelines

Nutrition & Exercise Manual for Bariatric Surgery
Patients

BARIATRIC DIETS - General Guidelines



- ✓ While drinking liquids sip slowly, do not gulp, do not use a straw
 - Use a spoon to help you sip your liquids slower
- ✓ Avoid extreme temperatures (extreme hot or cold foods or liquids)
- ✓ **“30-Minute Rule”** – avoid drinking fluids for 30 minutes before or after eating solids or drinking protein shakes
- ✓ **“30-Second Rule”** – chew each bite 30 times or for 30 seconds before swallowing
- ✓ Always check your tolerance level when taking fluids or solids by mouth
- ✓ Stop drinking or eating when you **feel full**, do not force yourself to complete your meal or beverage
- ✓ Avoid carbonated beverages
- ✓ Avoid caffeinated beverages
- ✓ Limit sugar, sugar substitutes are permitted (Refer to the list of “Sugar-Substitutes”)
- ✓ Recommend avoiding alcoholic beverages for 6 months
- ✓ Do not skip meals, have 3 meals per day (breakfast, lunch and dinner)
 - Give yourself 30-45 minutes for each of your main meals
 - Avoid returning to your meal after a few hours
- ✓ Avoid “grazing” or eating constantly throughout the day
- ✓ Always remember to keep increasing physical activity as tolerated

DRINKING FLUIDS AFTER BARIATRIC SURGERY

Water and Other Fluids

Water is essential before and after surgery. It is found in every cell of your body and functions in many important ways.

Water:

- Helps break down stored fat.
- Promotes kidney function and helps rid the body of waste.
- Is the best treatment for fluid retention.
- Maintains proper muscle tone and helps prevent sagging skin.
- Helps relieve constipation.



After surgery it may be hard to keep up your fluids.

- Sip water and other fluids often between meals for the first few weeks.
- Keep a record of your fluid intake.
- Stop drinking about 30 minutes before meals. You may drink again 30 minutes after meals.
- Your initial goal is 32 to 48 ounces. A better level is 64 ounces.

Carbonated Drinks

Avoid carbonated drinks. Carbonated drinks may cause painful gas and give a false sense of fullness. Even flat carbonated drinks may cause discomfort.

Caffeine Drinks

Avoid caffeinated drinks.

Caffeine causes:

- Stomach irritation
- Increases acid production in the stomach
- Unwanted stimulation of the heart
- Loss of fluids

These drinks contain caffeine:

- Coffee, cappuccino, and other flavored coffee drinks
- Energy drinks
- Soft drinks
- Tea: black, green and oolong. Check with dietitian on herbal tea.

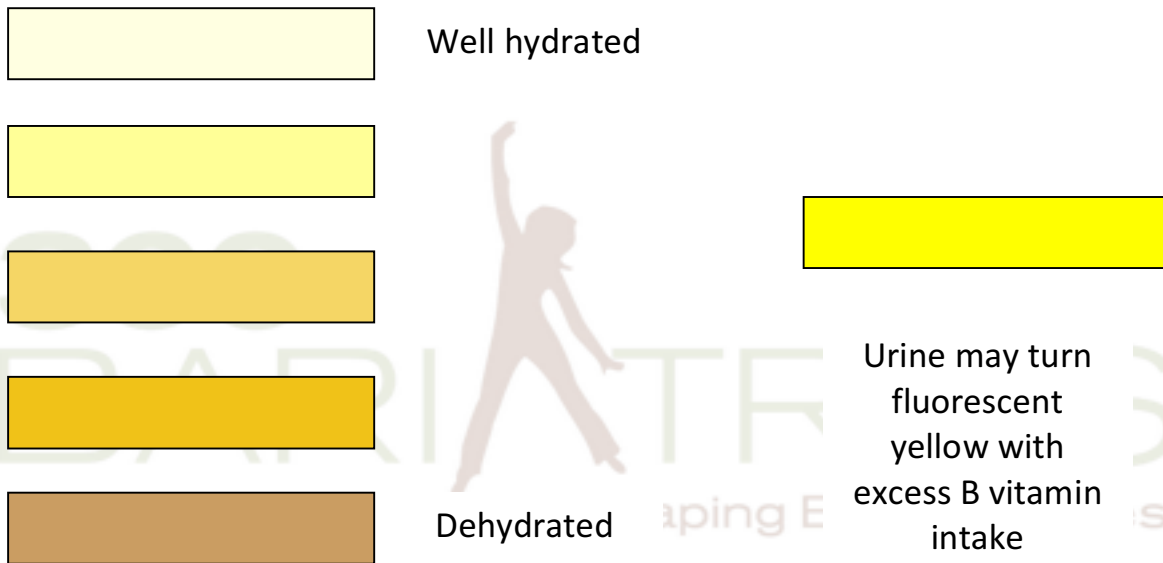
Alcohol

Avoid alcohol for at least the first six months after bariatric surgery. Alcohol is absorbed faster and results in a higher blood alcohol level. Also, alcoholic drinks are often high in calories and can contain sugars or carbonation. Use caution if you choose to drink. The effects of alcohol will be more intense. Always check with your physician before consuming alcohol after your surgery.

HYDRATION STATUS

To best determine your hydration status, look at the color of your urine. If you are well hydrated your urine will be a pale to light yellow color that looks like lemonade. If you are dehydrated your urine will be a darker, yellow/brown color that looks like apple juice. Your urine may also have a stronger smell if you are dehydrated. Certain foods, medications and vitamins (especially B vitamins) may change the color of your urine.

It is important to keep yourself well hydrated after surgery to prevent electrolyte imbalances that can lead to nausea.



PRE-OPERATIVE DIET

- Pre-operative diet should be started **2 weeks** prior to surgery
- Reason: Following this diet helps to reduce the size of your liver and reduces your risk for possible complications.
- Diet parameters:
 - Drink 1 protein drink as a meal replacement 3 times per day. **NO SOLID FOOD.**
 - Each drink must contain 20 g of protein and less than 5 g of sugar (Refer to “Protein Shakes, Powders, & Drinks”, pg 97).
 - Protein powders should be mixed with **SKIM MILK** or **WATER.**
 - Each drink should be 8-16 ounces of fluid.
 - Drink sugar free, caffeine free, carbonation free clear liquids between protein drinks (refer to “Clear Liquids”, pg 96).
 - **24 hours before** surgery, you **MUST** stop your protein drinks and drink **CLEAR LIQUIDS ONLY.**
 - Do not eat or drink **anything** after midnight the night before your surgery. See the pre-operative instruction sheet for medical instructions.
- Failure to follow the pre-operative diet may cause your surgery to be cancelled.



PHASE I BARIATRIC DIET

Sugar-Free, Carbonation-Free, Caffeine-Free, Clear Liquids

You will be on the Phase 1 Bariatric diet for **1-2 days** after your bariatric procedure or until tolerated.

Types of foods/liquids permitted:

Clear liquids – non-dairy fluids that cause minimal amount of residue in the digestive tract. Fluids that are see-through (when held in front of a piece of paper you should be able to read the text through the liquid).



Examples of Clear Liquids	
Water	Plain decaffeinated tea (no milk or creamer)
Crystal Light®	Plain decaffeinated coffee, black (no milk or creamer)
Sugar-free Snapple®	Clear flavored, low sodium broth (chicken, beef, seafood, vegetable)
Sugar-free Kool Aid®	Sugar free drink mixes

Clear “solids” – “solids” that become liquids at room temperature

Example of Clear Solids	
Sugar free (diet) Jello®	Sugar free popsicles

Sugar substitutes are permitted (please refer to the list of “Sugar-Substitutes” page 124)

Types of foods/liquids NOT permitted:

- No solid foods
- No carbonated beverages
- No caffeinated beverages
- No alcoholic beverages

- No dairy or milk
 - No fruit or juices
- No vitamin or mineral supplementation

Important Nutritional Considerations

- Try to drink **1 ounces (1/8 of a cup) of clear liquids every 30 minutes**
- The goal is to practice sipping fluids and stay hydrated
- Remember to sip slowly, do not gulp, do not use a straw
- Avoid extreme temperatures (extreme cold or hot)
- Always check your tolerance level and stop drinking when full
- Always remember to keep increasing physical activity as tolerated (as directed by physician)

Sample of a Phase I Bariatric Diet Menu

Morning	Decaffeinated coffee with Splenda [®] (without cream/milk/sugar)
Breakfast	Low sodium chicken broth
Mid-morning	Crystal Light [®] mixed with water
Lunch	Low sodium seafood broth
Mid-afternoon	Water (flavored if desired)
Dinner	Low sodium beef broth
Evening	Decaffeinated tea with Splenda [®]

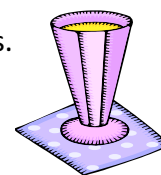
PHASE II BARIATRIC DIET

Sugar-Free, Carbonation-Free, Caffeine-Free, Clear Liquids and Protein Shakes

Phase II bariatric diet may begin while you are in the hospital if you have tolerated a Phase I Bariatric Diet. You should stay on the Phase II Bariatric Diet until **2 weeks after surgery**.

Types of foods/liquids permitted:

- Any protein shake that contains at least **20 grams of protein** per serving and **less than 5 grams of sugar** (see “Protein Shakes, Powders & Drinks” pg 97)
- The preferable protein source should be **whey protein**. Soy based, egg based or a combination of whey, soy or egg may be used.
- Collagen-based protein sources should be **avoided**.
- You may use water, skim milk or 1% milk to mix powder-based protein shakes.
 - Recommend using **lactose-free** milk at first.



Types of foods/liquids NOT permitted:

- No solid foods
- No caffeinated beverages

- No carbonated beverages
 - No juice with >5g of sugar
- No alcoholic beverages
 - No vitamin or mineral supplementation

Important Nutritional Considerations

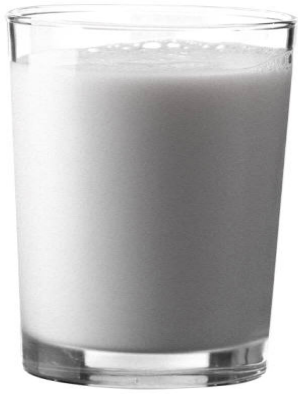
- Try to drink **4 – 8 ounces (1/2 to 1 cup) of protein shake 3 times per day** (breakfast, lunch and dinner – do not skip these meals)
- The goal is to consume **at least 60 grams of liquid protein per day** (high protein shakes)
- Do not use milk as a substitute for protein shakes (it does not provide enough protein per serving). You can mix protein powder with milk to make a protein shake.
- Drink sugar-free, carbonation-free, caffeine-free, clear liquids in between meals
 - Try to consume a **total of 64 ounces (8 cups) of fluid per day** (this includes any sugar-free, non-carbonated, decaffeinated clear liquids and protein shakes)

Important Reminders

- **“30-Minute Rule”**: Do not drink any clear liquids 30 minutes before or after consuming the protein shake
- Always check your tolerance level and stop drinking when full
- Avoid extreme temperatures (extreme cold or hot)
- Remember to sip slowly, do not gulp, do not use a straw
- Always remember to keep increasing physical activity as tolerated (as directed by physician)

Sample of a Phase II Bariatric Diet Menu

Morning	Decaffeinated coffee with Splenda [®] (without cream/sugar)
Breakfast	Whey protein mixed with 8 oz of skim milk (lactose free)
Mid-morning	8 oz Crystal Light [®]
Lunch	Whey protein mixed with 8 oz of skim milk (lactose free)
Mid-afternoon	8 oz low sodium chicken broth
Dinner	Whey protein mixed with 8 oz of skim milk (lactose free)
Evening	8 oz Crystal Light [®]



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BARIATRICS
Re-Shaping Bodies & Lives



PHASE III BARIATRIC DIET
Soft or Pureed, Protein Rich Foods
Start Vitamin and Mineral Supplements

Phase III bariatric diet may begin **approximately 2 weeks after surgery** once it is determined that you are tolerating a Phase II Bariatric Diet. You should stay on the Phase III Bariatric Diet for at least **6 – 8 weeks** to ensure proper tolerance of soft protein and ensure nutritional status.

Types of foods/liquids permitted: Soft or pureed proteins (Proteins should be moist and lean)

(Place food in a blender or food processor to create a soft/pureed consistency if desired. Otherwise it is imperative that all foods are chewed thoroughly.)

<i>Seafood (canned or fresh) – soft flaky fish</i>			
Tuna	Tilapia	Grouper	Salmon
White fish	Orange roughly	Flounder	Sole
Snapper	Catfish	Perch	Swordfish
Halibut	Cod	Haddock	Sea bass
<i>Shellfish (canned or fresh)</i>			
Scallops	Lobster	Shrimp	Crab
<i>Low fat Dairy Products</i>			
Low fat, sugar free or carb-controlled, Greek yogurt without visible fruit pieces			
Low fat cottage cheese		Low fat farmer cheese	
Low fat ricotta cheese		Low fat soft cheeses	
<i>Eggs</i>			
Eggbeaters [®]	Egg whites	Whole egg	
Boiled	Scrambled	Poached	Baked
Avoid fried or undercooked eggs			
<i>Poultry (canned or fresh, skin removed)</i>			
Turkey	Chicken	Game hen	Duck breast
Deli meats such as roast turkey breast or chicken breast			
<i>Meat (canned or fresh)</i>			
Low sodium, rind-less, no sugar added cold cuts and deli meats			
Ham, red meat and pork may be difficult to digest; always check your tolerance level			
<i>Legumes</i>			
Black beans	Kidney beans	Garbanzo beans	White beans
Lentils	Hummus and pureed beans may be well tolerated		
<i>Soy and Tofu</i>			
Tofu burgers	Boca-burgers [®]	Morningstar [®] brand soy products	
Soy beans (edamame unshelled)			
*** All burgers must be without the bun or lettuce, tomato etc.			
<i>Nuts and Nut butters (May consume ~1 month out from surgery)</i>			
Soft nuts such as walnuts and pistachios		Natural whipped, low sugar peanut butter	

Proteins should be moist and lean and low in fat. Trim visible fat from meats.

You may add low sodium broth or low fat, low sugar dressings to prepare proteins and add moisture

Types of foods/liquids NOT permitted: No starchy carbohydrates, no high fiber fruits or vegetables

Bread	Cereals	Crackers
Noodles	Pasta	Rice
Potatoes	Corn	Peas
Fruits	Vegetables	

- No juices with >5g of sugar
- No red meat for 6 months
- Do not fry or put “breeding” on the protein
- Monitor tolerance to spicy foods
- Avoid soups that are cream based. If high protein soups are consumed drain off the broth to ensure adequate protein intake.
- Avoid dried out, over-cooked meats
- No carbonated beverages
- No caffeinated beverages
- No alcoholic beverages for 6 months

Important Nutritional Considerations

- Try to consume **3 – 4 ounces of protein 3 times per day** (breakfast, lunch and dinner – do not skip these meals)
- The goal is to consume at **least 60-80 grams of protein per day** (soft or pureed high protein foods)
 - As an estimate, 1 ounce of protein is approximately 7 grams of protein
 - For example, 3 ounces of protein is approximately 21 grams of protein
 - All meals and snacks should include protein
- You may continue to use protein shakes as a meal replacement if you find that you cannot consume enough solid proteins.
- Try to consume a total of **64 ounces (8 cups) of fluid per day** (this includes any sugar-free, non-carbonated, decaffeinated clear liquids and protein shakes)
- Use moist cooking methods such as boiled, baked, sautéed, poached, stewed or braised
- Choose low fat proteins and choose other healthy fats such as avocado, oils, olive oil

Start vitamin and mineral supplementation (see Vitamin and Mineral Supplementation page 107)



Important Reminders

- **“30-Minute Rule”**: Do not drink any liquids 30 minutes before or after consuming “solid” proteins
- **“30-Second Rule”**: chew each bite 30 times or for 30 seconds before swallowing
 - Even though food is soft and pureed, take small bites and chew well
 - Start with a bite the size of a pencil eraser
- **Introduce one “new” food item at a time**
- Always check your tolerance level and stop drinking or eating when full
- Do not use milk as a substitute for protein shakes (it does not provide enough protein per serving)
- Monitor tolerance to extreme temperatures (extreme cold or hot)
- Remember to sip slowly, do not gulp, do not use a straw
- Do not skip meals, have 3 meals per day (breakfast, lunch and dinner)
 - Give yourself 30-45 minutes for each of your main meals
 - Avoid returning to your meal after a few hours
- Always remember to keep increasing physical activity as tolerated
- Eat from smaller plates (salad plates) and use smaller utensils to assist with portion control
 - You will only be able to eat a few tablespoons at a time

Remember

Inadequate protein intake can lead to:

- ***fatigue***
- ***loss of lean body mass and***
- ***increase your risk of infection and other illnesses***

Sample of a Phase III Bariatric Diet Menu

Morning	Decaffeinated coffee with Splenda [®] (without cream /sugar)
Breakfast	4 ounces of scrambled egg
Mid-morning	8 oz Crystal Light [®]
Lunch	3-4 ounces of pureed tuna fish made with 1 tablespoon of low fat mayonnaise
Mid-afternoon	8 oz Crystal Light [®]
Dinner	3-4 ounces of low fat, low sodium turkey deli slice
Evening	8 oz Crystal Light [®]
Remember: do not consume any liquids 30 minutes before or after consuming "solid" proteins	

Phase III Breakfast Ideas

- Protein shakes are a great way of getting some of your daily protein intake, they maybe a more convenient way to consume your breakfast.
- Remember to follow the guidelines for choosing the appropriate protein shake.
- Low fat, carbohydrate controlled or sugar free yogurt
- Low fat cottage cheese, farmer's cheese or ricotta cheese
- Low fat string cheese
- Eggs: whole, egg whites or EggBeaters[®] scrambled, baked, pouched or made into an omelet
- You may add cheese or ham, but no vegetables
- Low fat turkey or tofu breakfast sausage; baked or microwaved, do NOT fry
- Low fat tofu hotdogs

Phase III Lunch and Dinner Ideas

- Homemade chili made with ground turkey, chicken or ground tofu crumbles
- Grilled, baked, poached seafood or shellfish, do NOT fry or bread the seafood or shellfish

- Egg salad, Tuna salad, Crab salad, Chicken salad
- You may use light or fat free mayo or salad dressing
- Do NOT use celery, relish, onion
- Grilled, baked, poached, braised, sautéed poultry (chicken, game hen, turkey, duck)
- Legumes (black beans, navy beans, pinto beans, white beans) made into dip or hummus or can be added to chili

- Grilled tofu burgers
- Deli meats (turkey, chicken, ham etc.) make roll-ups with a piece of cheese
- Baked, crust less cheese quiche (Do not add any vegetables)
- Turkey or tofu meat balls
- Plain turkey or tofu meatloaf (use eggs or milk to bind it together)
- Egg and cheese frittata



PHASE IV BARIATRIC DIET

High Protein Foods and Vegetables Vitamin and Mineral Supplements

Start approximately **2-3 months after surgery** once the Phase III bariatric diet is well tolerated. You will continue the Phase IV bariatric diet until you have reached your goal of 75% excess body weight loss or via conversation with the registered dietitians or your medical doctor based on your nutritional status and food tolerance.

Types of foods/liquids permitted: Soft proteins (Proteins should be moist and lean)

<i>Seafood (canned or fresh) – soft flaky fish</i>			
Tuna	Tilapia	Grouper	Salmon
White fish	Orange roughly	Flounder	Sole
Snapper	Catfish	Perch	Swordfish
Halibut	Cod	Haddock	Sea bass
<i>Shellfish (canned or fresh)</i>			
Scallops	Lobster	Shrimp	Crab
<i>Low fat Dairy Products</i>			
Low fat, sugar free or carb-controlled, Greek yogurt without visible fruit pieces			
Low fat cottage cheese		Low fat farmer cheese	
Low fat ricotta cheese		Low fat soft cheeses	
<i>Eggs</i>			
Eggbeaters®	Egg whites	Whole egg	
Boiled	Scrambled	Poached	Baked
Avoid fried or undercooked eggs			
<i>Poultry (canned or fresh, skin removed)</i>			
Turkey	Chicken	Game hen	Duck breast
Deli meats such as roast turkey breast or chicken breast			
<i>Meat (canned or fresh)</i>			
Low sodium, rind-less, no sugar added cold cuts and deli meats			
Ham, red meat and pork may be difficult to digest; always check your tolerance level			
<i>Legumes</i>			
Black beans	Kidney beans	Garbanzo beans	White beans
Lentils	Hummus and pureed beans may be well tolerated		
<i>Soy and Tofu</i>			
Tofu burgers	Boca-burgers®	Morningstar® brand soy products	
Soy beans (edamame unshelled)			
*** All burgers must be without the bun or lettuce, tomato etc.			
<i>Nuts and Nut butters (May consume ~1 month out from surgery)</i>			
Soft nuts such as walnuts and pistachios		Natural whipped, low sugar peanut butter	

Proteins should be moist and lean

You may add low sodium broth or low fat, low sugar dressings to prepare proteins and add moisture

Vegetables are permitted

FACTS about VEGETABLES
Start with soft, cooked vegetables first
Avoid vegetables that do not become soft when cooked
Avoid fibrous stalks like those found in asparagus, broccoli, celery, stalks of romaine lettuce, kale, etc.
Avoid seeds and peels
You may introduce raw vegetables only after you can tolerate a variety of cooked vegetables
When eating raw vegetables try softer vegetables like broccoli florets, bibb lettuce, red-leaf lettuce or boston lettuce. Remember to chew vegetables thoroughly (“30 second rule”- chew 30 times) and swallow only when it has been made into a mushy consistency
If you have trouble with gas avoid eating gas-producing vegetables like onions, cauliflower, garlic, scallions, leeks, brussel sprouts, cabbage

Types of foods/liquids NOT permitted: No starchy carbohydrates, starchy vegetables or high fiber fruits

Bread	Cereals	Crackers
Noodles	Pasta	Rice
Potatoes	Corn	Peas
Fruits		

- No juices with >5g of sugar
- No red meat for 6 months
- Do not fry or put “breading” on the protein
- Monitor tolerance to spicy foods
- Avoid soups that are cream based. If high protein soups are consumed drain off the broth to ensure adequate protein intake.
- Avoid dried out, over-cooked meats
- No carbonated beverages
- No caffeinated beverages
- No alcoholic beverages for 6 months

Important Nutritional Considerations

- The goal is to consume at **least 60-80 grams of protein per day** with the addition of vegetables
- Consume **3 – 4 ounces of protein 3 times per day** (breakfast, lunch and dinner – do not skip these meals)
- Always eat **your PROTEIN foods first** before eating the vegetables
 - Vegetables contain ~2g of protein per ½ cup serving

- Continue to consume sugar-free, non-carbonated, decaffeinated clear liquids in between the high protein meals for a total of **64 ounces (8 cups) of liquids per day**
- Use moist cooking methods such as boiled, baked, sautéed, poached, stewed or braised
- Choose low fat proteins and choose other healthy fats such as avocado, oils, olive oil

***** Continue vitamin and mineral supplementation with adjustments per the registered dietitians, or your medical doctor.**

Important Reminders

- **“30-Minute Rule”**: Do not drink any liquids 30 minutes before or after consuming “solid” proteins
- **“30-Second Rule”**: chew each bite 30 times or for 30 seconds before swallowing
- Take small bites and chew well
- **Introduce one “new” food item at a time**
- Always check your tolerance level and stop drinking or eating when full
- Monitor tolerance to extreme temperatures (extreme cold or hot)
- Remember to sip slowly, do not gulp, do not use a straw
- Do not skip meals. Have 3 meals per day (breakfast, lunch and dinner)
- Give yourself 30-45 minutes for each of your main meals
 - Avoid returning to your meal after a few hours
- Always remember to keep increasing physical activity as tolerated
- Eat from smaller plates (salad plates) and use smaller utensils to assist with portion control
 - You will only be able to eat a few tablespoons at a time

Sample of a Phase IV Bariatric Diet Menu

Morning	Decaffeinated coffee with Splenda® (without cream/sugar)
Breakfast	4 ounces of Eggbeater® omelet with sautéed mushrooms, scallions and cheese
Mid-morning	8 oz Crystal Light®
Lunch	1 Boca burger without the bun, steamed broccoli
Mid-afternoon	8 oz Crystal Light®
Dinner	3-4 ounces baked tilapia fish, green beans
Evening	8 oz Crystal Light®
Remember: do not consume any liquids 30 minutes before or after consuming “solid” foods	

PHASE V BARIATRIC DIET

High Protein Foods and Complex Carbohydrates **Whole Grains, Starchy Vegetables and Fruit** **Vitamin and Mineral Supplements**

Phase V begins **after you have reached 75% of your excess body weight loss** or via conversation with the registered dietitians or your medical doctor based on your nutritional status and food tolerances. This may be anywhere from 6 to 12 months after surgery.

Types of foods/liquids permitted: Soft proteins (Proteins should be moist and lean)

<i>Seafood (canned or fresh) – soft flaky fish</i>			
Tuna	Tilapia	Grouper	Salmon
White fish	Orange roughly	Flounder	Sole
Snapper	Catfish	Perch	Swordfish
Halibut	Cod	Haddock	Sea bass
<i>Shellfish (canned or fresh)</i>			
Scallops	Lobster	Shrimp	Crab
<i>Low fat Dairy Products</i>			
Low fat, sugar free or carb-controlled, Greek yogurt without visible fruit pieces			
Low fat cottage cheese		Low fat farmer cheese	
Low fat ricotta cheese		Low fat soft cheeses	
<i>Eggs</i>			
Eggbeaters [®]	Egg whites	Whole egg	
Boiled	Scrambled	Poached	Baked
Avoid fried or undercooked eggs			
<i>Poultry (canned or fresh, skin removed)</i>			
Turkey	Chicken	Game hen	Duck breast
Deli meats such as roast turkey breast or chicken breast			
<i>Meat (canned or fresh)</i>			
Low sodium, rind-less, no sugar added cold cuts and deli meats			
Ham, red meat and pork may be difficult to digest; always check your tolerance level			
<i>Legumes</i>			
Black beans	Kidney beans	Garbanzo beans	White beans
Lentils	Hummus and pureed beans may be well tolerated		
<i>Soy and Tofu</i>			
Tofu burgers	Boca-burgers [®]	Morningstar [®] brand soy products	
Soy beans (edamame unshelled)			
*** All burgers must be without the bun or lettuce, tomato etc.			
<i>Nuts and Nut butters (May consume ~1 month out from surgery)</i>			
Soft nuts such as walnuts and pistachios		Natural whipped, low sugar peanut butter	

Proteins should be moist and lean

You may add low sodium broth or low fat, low sugar dressings to prepare proteins and add moisture

You may add Complex Carbohydrates

FACTS about COMPLEX CARBOHYDRATES
Complex carbohydrates are found in whole grains, fruits, legumes and vegetables
It is recommended that you begin with peeled fruit (raw or cooked)
You can have canned fruits that are without syrup and have “no-added sugar”
Fruit juice is not recommended
Avoid white flours, rice, pastas or bread that are “gummy” or “doughy” they are hard to tolerate
Choose 100% whole wheat, 100% multigrain when selecting whole grains. These are rich in fiber, vitamins and minerals

*** For more information on COMPLEX CARBOHYDRATES see page 123

Starchy vegetables are permitted

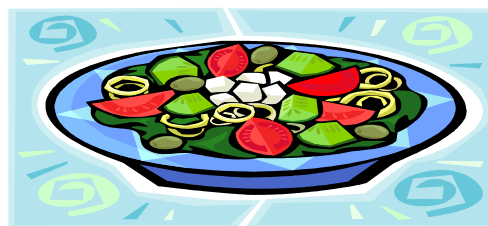
FACTS about STARCHY VEGETABLES
Limit portion sizes of starchy vegetables (peas, potatoes, corn)
Protein powder can be added to mashed potatoes to increase their protein content
Choose starchy vegetables without added salt and butter

Types of foods/liquids NOT permitted:

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> ▪ No juices with >5g of sugar ▪ No red meat for 6 months ▪ Do not fry or put “breading” on the protein ▪ Monitor tolerance to spicy foods ▪ Avoid soups that are cream based. If high protein soups are consumed drain off the broth to ensure adequate protein intake. | <ul style="list-style-type: none"> ▪ Avoid dried out, over-cooked meats ▪ No carbonated beverages ▪ No caffeinated beverages ▪ No alcoholic beverages for 6 months |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Important Nutritional Considerations

- The goal is to consume at **least 60-80 grams of protein per day** with the addition of vegetables, fruit and complex carbohydrates
- Consume **3 – 4 ounces of protein 3 times per day** (breakfast, lunch and dinner – do not skip these meals)
- Always eat **your PROTEIN foods first** before eating the vegetables, fruits or complex carbohydrates
 - Vegetables contain ~2g of protein per ½ cup serving
 - Do not begin by eating your complex carbohydrates first. They contain little to no protein and protein is essential



- Add a variety of complex carbohydrates into your meal plan including vegetables, fruit and whole grain to ensure nutritional adequacy
- Continue to consume sugar-free, non-carbonated, decaffeinated clear liquids in between the high protein meals for a total of **64 ounces (8 cups) of liquids per day**
- Use moist cooking methods such as boiled, baked, sautéed, poached, stewed or braised
- Choose low fat proteins and choose other healthy fats such as avocado, oils, olive oil

***** Continue vitamin and mineral supplementation with adjustments per the registered dietitian**

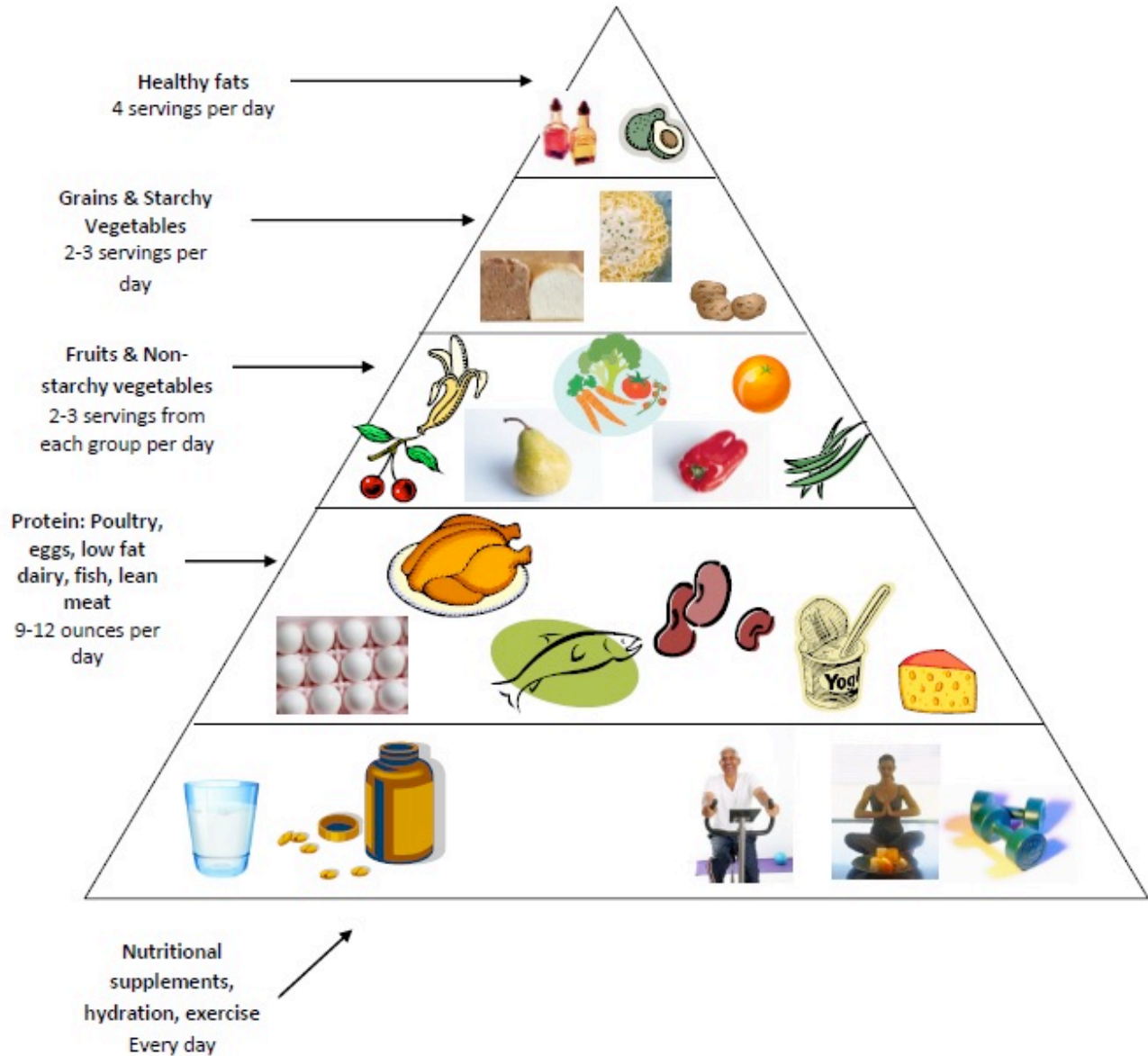
Important Reminders

- **“30-Minute Rule”**: Do not drink any liquids 30 minutes before or after consuming “solid” proteins
- **“30-Second Rule”**: chew each bite 30 times or for 30 seconds before swallowing
 - Take small bites and chew well
- **Introduce one “new” food item at a time**
- Always check your tolerance level and stop drinking or eating when full
- Do not use milk as a substitute for protein shakes (it does not provide enough protein per serving)
- Monitor tolerance extreme temperatures (extreme cold or hot)
- Remember to sip slowly, do not gulp, do not use a straw
- Do not skip meals. Have 3 meals per day (breakfast, lunch and dinner)
 - Give yourself 30-45 minutes for each of your main meals
 - Avoid returning to your meal after a few hours
- Always remember to keep increasing physical activity as tolerated.
- Eat from smaller plates (salad plates) and use smaller utensils to assist with portion control
 - You will only be able to eat a few tablespoons at a time

****For long term success and nutritional health it is important to consume a healthy balanced diet that is adequate in protein and includes fruit, vegetables, and whole grains. Nutritional supplements may be needed long term to prevent nutritional deficiencies due to malabsorption and decreased intake from the surgery. Adequate hydration is also important.****

It is important that protein should be consumed throughout the day at all meals and snacks versus attempting to obtain all your protein at one time. This will ensure that you are promoting your metabolism and fueling your body appropriately.

BARIATRIC FOOD GUIDE PYRAMID AND PLATE MODEL



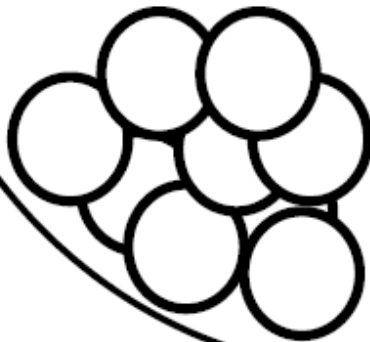
References:

Moize et al, Nutritional Pyramid for Post-gastric Bypass Patients
MacKechnie The Bariatric Food Guide Pyramid

Always ensure protein is eaten before meal is complete. Only eat to the point of restriction/fullness.

**3 ounces
protein**

**¼-½ cup whole grain, starchy
vegetable or fruit**



**¼-½ cup non-starchy
vegetables**



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BARIATRIC FOOD GUIDE PYRAMID AND PLATE MODEL

- Protein
 - 9-12 ounces per day
 - Serving size
 - Meat/poultry/fish/eggs (1 oz =7 g protein)
 - Dairy (1 cup milk, 1 oz cheese, ¼ cup cottage cheese, ½ cup yogurt= 8 g protein)
 - Nuts (¼ cup=5-6 g protein)
 - Beans/legumes (½ cup=7 g protein)
 - Soy (½ cup=14-20 g protein)
- Fruits
 - 2-3 servings per day
 - Serving Size
 - 1 cup berries
 - 1 small banana
 - 1 small apple
 - ¼-½ cup fruit
- Vegetables (non starchy)
 - 2-3 servings per day
 - Serving Size
 - ½ cup cooked
 - 1 cup raw
- Grains and starchy vegetables
 - 2-3 servings per day
 - Serving Size
 - ½ cup oatmeal or whole grain cereal
 - 4 whole grain crackers
 - 1 4 in whole wheat pita
 - 1 whole wheat tortilla
 - 1 piece whole grain bread
 - 1 small sweet potato
 - 1/3 cup brown rice or whole wheat pasta
- Healthy fats
 - 4 servings per day
 - Serving Size
 - 1 tsp olive or canola oil
 - 1/8 avocado
 - 1 Tbsp natural peanut butter

Limit intake of added sugars, saturated and trans fats, carbonated and caffeinated beverages.

Everyday-take your nutritional supplements, exercise, and hydrate.

WebMD Portion Size Guide

BASIC GUIDELINES

1 cup = baseball



½ cup = lightbulb



1 oz or 2 tbsp = golf ball



1 tbsp = poker chip



3 oz chicken or meat = deck of cards



3 oz fish = checkbook



GRAINS

1 cup of cereal flakes = baseball

1 pancake = compact disc

½ cup cooked rice = lightbulb

½ cup cooked pasta = lightbulb

1 slice bread = cassette tape

1 bagel = 6 oz can of tuna

3 cups popcorn = 3 baseballs

DAIRY & CHEESE

1 ½ oz cheese = 3 stacked dice

1 cup yogurt = baseball

½ cup of frozen yogurt = lightbulb

½ cup of ice cream = lightbulb

FATS & OILS

1 tbsp butter or spread = poker chip

1 tbsp salad dressing = poker chip

1 tbsp mayonnaise = poker chip

1 tbsp oil = poker chip

WebMD Portion Size Guide

FRUITS & VEGETABLES

1 medium fruit = baseball

½ cup grapes = about 16 grapes

1 cup strawberries = about 12 berries

1 cup of salad greens = baseball

1 cup carrots = about 12 baby carrots

1 cup cooked vegetables = baseball

1 baked potato = computer mouse

MEATS, FISH & NUTS

3 oz lean meat = deck of cards

3 oz fish = checkbook

3 oz tofu = deck of cards

2 tbsp peanut butter = golf ball

2 tbsp hummus = golf ball

¼ cup almonds = 23 almonds

¼ cup pistachios = 24 pistachios

MIXED DISHES

1 hamburger (without bun) = deck of cards

1 cup fries = about 10 fries

4 oz nachos = about 7 chips

3 oz meatloaf = deck of cards

1 cup chili = baseball

1 sub sandwich = about 6 inches

1 burrito = about 6 inches

www.webmd.com

EXERCISE

Exercise is critical after bariatric surgery. It will help you not only attain your weight loss goals, but also maintain them. Do not rely on the bariatric surgery alone to achieve your weight loss.

You should obtain your doctor's approval for any strenuous exercise, otherwise, start physical activity AS SOON as you can tolerate it. Establishing an exercise routine **before** the surgery will help in the recovery phase.

Fitness plans will vary depending on the individual's needs. Here are some steps and tips to a lifestyle of physical activity:

- Set your personal fitness goals. Why do you want to exercise? What benefits do you hope to achieve from your exercise program?
- Establish your own fitness program by following the next steps
 - Choose an exercise from each of the following categories
 - Cardiovascular: walking, treadmill, dancing, water exercise
 - Strength: resistance bands, free weights, medicine balls
 - Flexibility: assisted or self stretching before and after exercises
 - Schedule timing of exercise: if your fitness level is low, start with 5-10 minutes, 3 times per day and increase as tolerated. The goal is to accumulate 45 minutes of exercise daily.
 - Set up frequency of exercise: number of exercise sessions per week. The goal is 5 times per week.
 - Increase the intensity of exercise as tolerated. For instance, start walking at 2.5 mph, and increase the speed to 3.0 mph as your fitness level improves.

****Make sure that you receive clearance from your physician before starting an exercise program, especially if you have heart disease, diabetes, or other chronic diseases.****

**Implement your fitness plan as soon as you can....
START NOW !!!
Be consistent it will help you overcome barriers.
Monitor your progress by keeping an exercise log.**

AEROBIC EXERCISE

Aerobic exercise is an important part of your exercise regimen. Aerobic exercise involves repetitive movement of large muscle groups that increases your heart rate, breathing, and blood flow. Performing aerobic exercise helps to strengthen the heart, burn calories, provide health benefits such as lowering blood pressure and helping diabetes patients, and promotes overall health and wellness. After surgery, this type of exercise helps to maintain weight loss and provide overall health.

Recommendations:

General Health Benefit

- 150 minutes per week
 - Moderate intensity exercise 5 days per week for 30 minutes
 - or
 - Vigorous intensity exercise 3 days per week for 20 minutes
 - or
 - A mix of both intensities for 3-5 days per week



Prevent weight gain and help with active weight loss

- 150-250 minutes per week

Prevention of weight regain

- 200-300 minutes per week

10 minute bouts of exercise added up throughout the day is a great way to start!

Intensity

- Moderate intensity:
 - Perceived exertion of 5-6 on scale of 1-10
 - Heart rate and breathing elevated, but able to hold a conversation, unable to sing
- High intensity
 - Perceived exertion of 7-8 on scale of 1-10
 - Heart rate and breathing elevated, unable to hold a conversation

Types of aerobic exercise:

- Walking
- Running
- Swimming
- Water Aerobics

- Zumba
- Stair Climbing
- Biking
- Ice skating/Roller Skating
- Any exercise that raises your heart rate and breathing

Try different modes of aerobic exercise to make exercise fun and challenge your body. Don't forget to give yourself 2 days of rest each week for your body to recover and build new muscle.

Equipment you will need:

- Yourself
- Outside path or trail
- Exercise equipment—treadmill, bike, stair climber, elliptical
- Appropriate shoes and socks
- Comfortable exercise clothes
- Water bottle

Starting and progressing your aerobic exercise routine

- If you are new to exercise, start with 3 bouts of 10 minutes of aerobic exercise 2-3 days per week.
- Progress to 2 bouts of 15 minutes of continuous exercise, then to 1 bout of 30 minutes of continuous exercise 2-3 days per week.
- Once you are able to do 30 minutes of continuous exercise continue to add 5-10 minutes every week to each exercise session until you are able to continuously exercise for 60 minutes for 5 days per week.
- Challenge yourself by adding interval training into your aerobic exercise. Do this by increasing the intensity of your exercise every 5-10 minutes for 1-2 minutes by moving faster or adding incline/hills.

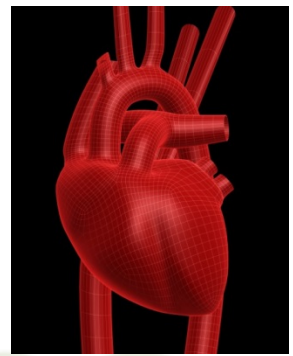




HEART RATE AND EXERCISE

Finding your heart rate

- Find your pulse by placing 1 or 2 fingers (normally your 2nd and 3rd fingers) on the inside of your wrist on the side closest to your thumb or on your carotid artery which is on either side of your neck close to your wind pipe
- Press firmly until you can feel your pulse. Do not push too hard so as not to affect the pulse.
- For 10 seconds count the number of beats you feel. Multiply this number by 6 to get your heart rate
- For example if you counted 10 beats in the 10 seconds you would multiply $10 \times 6 = 60$ beats per minute
- Never check both carotid arteries at once to prevent cutting off blood flow to the brain
- When you are at rest your heart rate will be lower, when you start exercising your heart rate should increase since your heart has to pump more blood



Target heart rate

- Take $220 - \text{your age}$ to get your max heart rate
 - Multiply your max heart rate by 0.5 to get your heart rate for 50% or low intensity exercise
 - Multiply your max heart rate by 0.7 to get your heart rate for 70% intensity or moderate intensity exercise
 - Multiple your max heart rate by 0.85 to get your heart rate for 85% intensity or vigorous intensity exercise
- Start with low intensity and progress yourself to more vigorous intensity exercise

Age	Target HR Zone 50-85%	Average Maximum Heart Rate, 100%
20 years	100-170 beats per minute	200 beats per minute
30 years	95-162 beats per minute	190 beats per minute
35 years	93-157 beats per minute	185 beats per minute
40 years	90-153 beats per minute	180 beats per minute
45 years	88-149 beats per minute	175 beats per minute
50 years	85-145 beats per minute	170 beats per minute
55 years	83-140 beats per minute	165 beats per minute
60 years	80-136 beats per minute	160 beats per minute
65 years	78-132 beats per minute	155 beats per minute
70 years	75-128 beats per minute	150 beats per minute

RESISTANCE EXERCISE

Resistance exercise is an important part of your exercise regimen. Resistance exercise involves challenging your muscles through performing repeated exercises with weights. Performing resistance exercise helps increase lean body mass which increases metabolism, promotes muscle toning, and increases strength. After surgery, this type of exercise promotes maintenance of muscle mass, strengthens bones, helps with loose skin and increases metabolism.

Recommendations: 2 days per week

- Exercise each major muscle group
- Perform 8-10 different exercises
- 3 sets of each exercise
- 8-12 repetitions

Major muscle groups:

- Arms
- Shoulders
- Chest
- Back
- Legs
- Abs



What are your goals?

Toning and endurance: more repetitions, light weight

Strength and bulking: less repetitions, heavy weight

Equipment you will need:

- Yourself
- Free weights
- Resistance bands
- Medicine ball

Starting and progressing your resistance exercise routine

- Perform 8-10 different exercises of the major muscle groups-changing exercises every few exercise sessions.
- Perform 3 sets of each exercise with a 30 seconds to 1 minute rest in between sets starting with 12-15 repetitions of a low weight, 3-5 pounds, until your muscles are tired at the end of each set
- If you are new to resistance exercise-start with your body weight as the amount of resistance and work up to adding weights. You may also want to start with seated exercises and progress to standing exercises.
- Start with a light weight that you can do 12-15 repetitions with. Your muscle should be tired at the end of the 12-15 repetitions.
- Once your strength has increased (takes about 1-2 weeks) and you are able to perform 12-15 repetitions with a specific weight, then increase the weight you use by 2-5 pounds performing 10-12 repetitions.
- Progress yourself by adding 2-5 pounds and decreasing your repetitions by 2-5 every few weeks as you become stronger.
- As the amount of weight you lift increases the amount of repetitions you do should decrease by 2-3 not going less than 2-4 repetitions.
- Discuss your goals with an exercise professional to determine what your ideal weight and repetitions should be.
- Switch up your routine by using your body weight, resistance bands, free weights or weight machines at the gym.
- Challenge yourself by doing circuit training. Do this by making a circuit of three exercises such as squats, bicep curls, and rows-perform one set of each exercise with no rest between exercises. Once you finish a circuit (have done all 3 exercises), rest for 30 seconds to 1 minute and repeat the circuit 3 times.

Performing upper and lower body exercises at the same time or doing circuit training will increase heart rate and provide a higher intensity workout.



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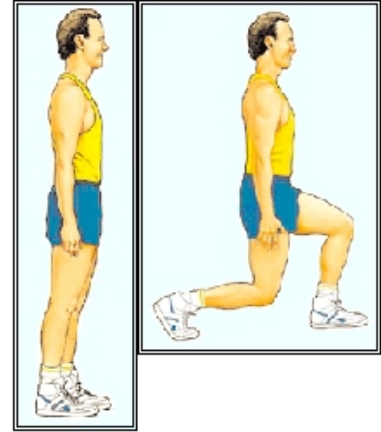
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EXAMPLE of RESISTANCE EXERCISES

Leg and Knee Exercises: Leg Lunge

This exercise is designed to stretch and strengthen your knee. Before beginning, read through all the instructions. While exercising, breathe normally and use smooth movements. If you feel any pain, stop the exercise. If pain persists, call your healthcare provider.

1. Stand with your feet shoulder-width apart.
2. With your _____ foot, step out and lower yourself into a comfortable position. Keep your back straight and your feet pointing straight ahead. As you step, the heel of the other foot lifts off the floor.
3. Return smoothly to your starting position.
4. Repeat _____ times. Do _____ sets a day.



CAUTION

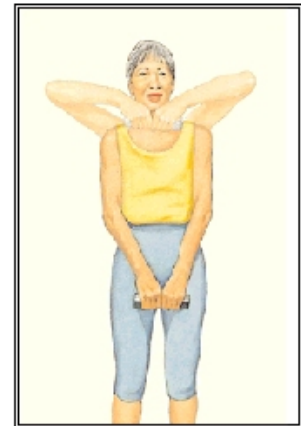
- Don't let your forward knee go past your toes.
- Don't lunge so far that your rear knee touches the floor.

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BARIATRICS

Upper Body Exercises: Upright Row

This exercise stretches and strengthens your upper body. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Stand with your feet shoulder-width apart. Grasp a _____ pound weight in front of you with both hands, palms facing the body, and elbows straight.
- Keep the weight close to your body. Raise the weight along the midline of your body to your collarbone. Your elbows should extend out to the sides. Return to the starting position.
- Repeat _____ times. Do _____ sets _____ times a day.



CAUTION: If you have shoulder problems, consult your healthcare provider before doing this exercise. If you have a hard time keeping correct form, use a lighter weight.

Back Exercises: Bridge

The Bridge exercise strengthens your abdominal, buttocks, and hamstring muscles. This helps keep your back stable and aligned when you walk.

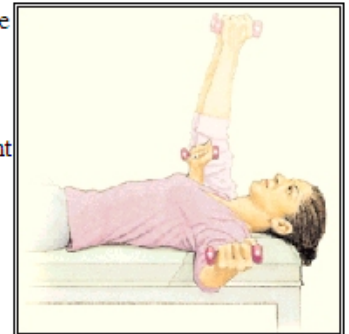
- Lie on the floor with your back and palms flat. Bend your knees. Keep your feet flat on the floor.
- Contract your abdominal and buttocks muscles. Slowly lift your buttocks off the floor until there is a straight line from your knees to your shoulders.
- Hold for 5 seconds. Repeat 10 times.



Chest Exercises

This exercise stretches and strengthens your upper body. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Lie face up on a flat bench or on the floor with knees bent. Hold a ____ pound weight in each hand. Extend your arms out to the side, with elbows slightly bent, and palms facing up.
- Keeping your elbows bent, raise your arms upward until the weights touch. Return to starting position.
- Repeat ____ times. Do ____ sets ____ times a day.

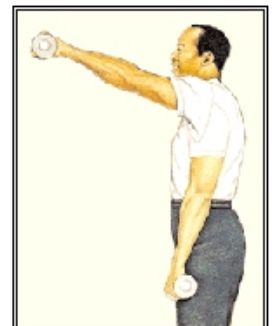


CAUTION: Work slowly, using controlled movements. Keep your knees bent.

Upper Body Exercises: Front Raise

This exercise stretches and strengthens your upper body. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Stand with your legs shoulder-width apart. Hold a ____ pound weight in each hand, with palms facing your body. Extend your arms straight down so the weights touch your thighs.
- Raise one arm upward to shoulder or eye level. Hold for a second, then lower your arm. As you lower, raise the opposite arm to shoulder or eye level.
- Repeat ____ times with each arm. Do ____ sets ____ times a day.



CAUTION: Don't swing the weights. Use slow, controlled movements.

Shoulder Exercises: Biceps Curl

This exercise stretches and strengthens your shoulders. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Hold a ____ pound weight in each hand, with your palms facing your body. Tuck your arms close to your sides.
- Bend your left elbow and raise the weight to your left shoulder. As you lower that weight, bend your right elbow and raise the weight to your right shoulder. Continue to alternate arms.
- Repeat ____ times. Do ____ sets ____ times a day.

CAUTION: Keep arms close to your body throughout the exercise. Keep your wrists straight.



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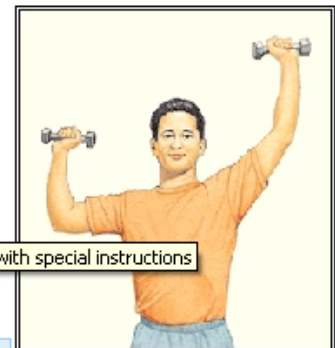


Shoulder Exercises: Shoulder Press

This exercise stretches and strengthens your shoulders. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Hold a ____ pound weight in each hand, elbows at shoulder level, palms facing forward.
- Raise one arm up until it's almost straight. Hold for a second. Lower the weight, extending the other arm up.
- Repeat ____ times with each arm. Do ____ sets ____ times a day.

CAUTION: If you have shoulder problems, consult your healthcare provider before doing this exercise. Keep your head and body still during the exercise. Only your arms should move.



Personalize with special instructions

Shoulder Exercises: Triceps Press

This exercise stretches and strengthens your shoulders. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Grasp a ____ pound weight in each hand. Raise one arm overhead. Hold that arm close to your ear. Bend your elbow and lower the weight behind your head, as far as you can.
- Slowly straighten your elbow, extending your arm upward. Return to starting position.
- Repeat ____ times with each arm. Do ____ sets ____ times a day.

CAUTION: Keep your head still and neck straight. Keep your arm close to your ear. Don't arch your back.



Leg and Knee Exercises: Heel Raise

This exercise is designed to stretch and strengthen your knee. Before beginning, read through all the instructions. While exercising, breathe normally and use smooth movements. If you feel any pain, stop the exercise. If pain persists, inform your healthcare provider.

CAUTION

- Don't lock your knees.
- Don't arch your back.

- Stand with both feet flat on the floor, shoulder-width apart.
- If you need support, steady yourself with your hand on a ledge, wall, or table.
- Raise both heels so you're standing on your toes.
- Hold for ____ seconds. Slowly lower your heels to the floor.
- Repeat ____ times. Do ____ sets a day.

Note: As you become stronger, stand on one foot at a time, and raise that heel off the floor.



Leg and Knee Exercises: Leg Raise

This exercise is designed to stretch and strengthen your knee. Before beginning, read through all the instructions. While exercising, breathe normally and use smooth movements. If you feel any pain, stop the exercise. If pain persists, call your healthcare provider.

CAUTION

- Don't arch your back.
- Don't hunch your shoulders.



- Sit on the floor with your _____ leg straight, the other bent.
- Tighten the thigh muscles on the top of your straight leg. You should feel the muscles contract. Raise that leg 6–8 inches. Then lower it slowly and steadily to the floor. Relax.
- Repeat _____ times. Do _____ sets a day.

Shoulder Exercises: Side Raise

This exercise stretches and strengthens your shoulders. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Stand straight, holding a ____ pound weight in each hand, arms at sides, feet shoulder-width apart.
- Slowly extend your arms up and out until weights are at shoulder level. Slowly return to starting position.
- Repeat _____ times. Do _____ sets _____ times a day.

CAUTION: Don't swing the weights or raise weights above shoulder level.



Back Exercises: Arm Reach

Do this exercise on your hands and knees. Keep your knees under your hips and your hands under your shoulders. Keep your spine in a neutral position (not arched or sagging). Be sure to maintain your neck's natural curve.

- Stretch one arm straight out in front of you. Don't raise your head or let your supporting shoulder sag.
- Hold for 5 seconds.
- Return to starting position.
- Repeat 5 times.
- Switch arms.



Wall Squats

This exercise stretches and strengthens your lower body to help your back. Do the exercise as often as suggested by your healthcare provider. As you work out, don't rush or strain. Use an exercise mat, pillow, or folded towel to protect your knees and other sensitive areas.



- Stand with hips and shoulders touching a wall. Keep your feet hip-width apart and your ears, shoulders, hips, and feet in a line. If needed, place a rolled-up towel behind the small of your back.
- Step forward about 2 feet, keeping your back against the wall. Slide down into a sitting position. Don't let your hips go below your knees.
- Hold for 5 seconds, then slide up. As you get stronger, hold the position longer.

Back Exercises: Leg Reach

Do this exercise on your hands and knees. Keep your knees under your hips and your hands under your shoulders. Keep your spine in a neutral position (not arched or sagging). Be sure to maintain your neck's natural curve.

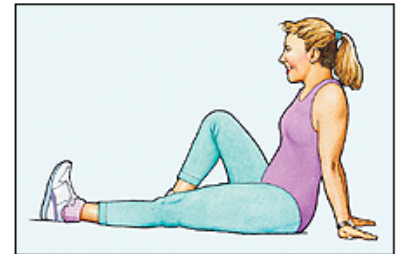
- Extend one leg straight back. Don't arch your back or let your head or body sag.
- Hold for 5 seconds. Return to starting position.
- Repeat 5 times.
- Switch legs.



Quad Set for Leg and Knee

This exercise is designed to stretch and strengthen your knee. Before beginning, read through all the instructions. While exercising, breathe normally and use smooth movements. If you feel any pain, stop the exercise. If pain persists, call your healthcare provider.

1. Sit on the floor with one leg straight, the other bent.
2. Flex the foot of your straight leg by pointing your toes toward you. Press the back of your knee into the floor while tightening the muscle on the top of your thigh. Hold for _____ seconds. Then relax.
3. Repeat _____ times. Do _____ sets a day.



CAUTION

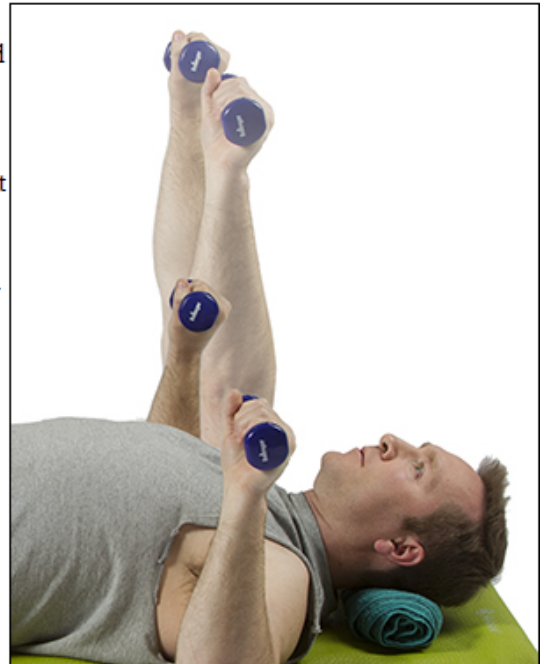
- Don't arch your back.
- Don't hunch your shoulders.

Upper Body Exercises: Chest Press

This exercise stretches and strengthens your upper body. Before starting, read through all the instructions. During the exercise, breathe normally and use smooth movements. Stop if you feel any pain. If pain persists, call your healthcare provider.

- Hold a ____ pound weight in each hand. Lie on your back on a flat bench with knees bent. Hold your arms straight up with weights in line with your chest.
- Lower your arms down and out until your elbows are bent at a 90-degree angle. Return to starting position.
- Repeat ____ times. Do ____ sets ____ times a day.

CAUTION: Don't arch your back. Keep your knees bent.



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Example exercises from Medical Center of Plano Krames On Demand

FLEXIBILITY EXERCISE

Flexibility exercise is an important part of your exercise regimen. Flexibility involves stretching muscles and tendons through controlled stretching. Performing flexibility exercises helps to stretch the muscle groups to prevent injury, promote range of motion and flexibility of joints, help with activities of daily living, and provide pain relief.

Recommendations:

- Perform after every aerobic and resistance exercise session
- Only stretch warm muscle
- Stretch major muscle and tendon group
- 10 minutes
- 10-30 seconds for each stretch
- Repeat each stretch 3-4 times

Equipment you will need:

- Yourself
- Foam roller (if needed)
- Resistance Bands (if needed)

Check out a Yoga or Pilates class to help change up your stretching and flexibility routine.





EXAMPLE FLEXIBILITY EXERCISES

Lower Body Exercises: Quad Stretch

This exercise stretches and strengthens your lower body to help your back. Do the exercise as often as suggested by your healthcare provider. As you work out, don't rush or strain. Use an exercise mat, pillow, or folded towel to protect your knees and other sensitive areas.

- Stand arm's length from a wall. Place one hand on it.
- With your other hand, grasp your ankle on the same side. Pull the heel toward your buttocks. Don't arch your back.
- Hold for 30-60 seconds. Repeat 2 times. Switch legs.

For your safety, check with your healthcare provider before starting an exercise program.

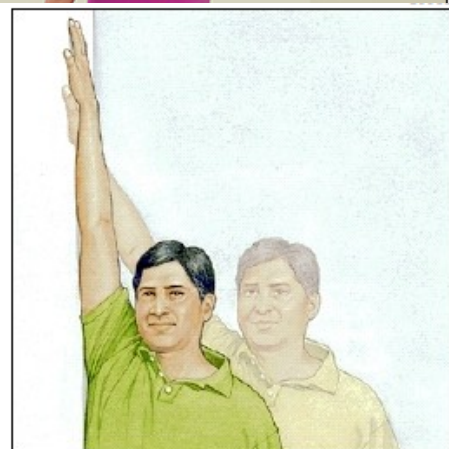


Exercises for Shoulder Flexibility: Wall Walk

Improving your flexibility can reduce pain. Stretching exercises also can help increase your range of pain-free motion. Breathe normally when you exercise. And try to use smooth, fluid movements.

Note: Follow any special instructions you are given. If you feel pain, stop the exercise. If the pain continues after stopping, call your healthcare provider.

- Stand with your shoulder about 2 feet from the wall.
- Raise your arm to shoulder level and gently "walk" your fingers up the wall as high as you can.
- Hold for a few seconds. Then walk your fingers back down.
- Repeat 3 times. Move closer to the wall as you repeat.
- Build up to holding each stretch for 30 seconds.

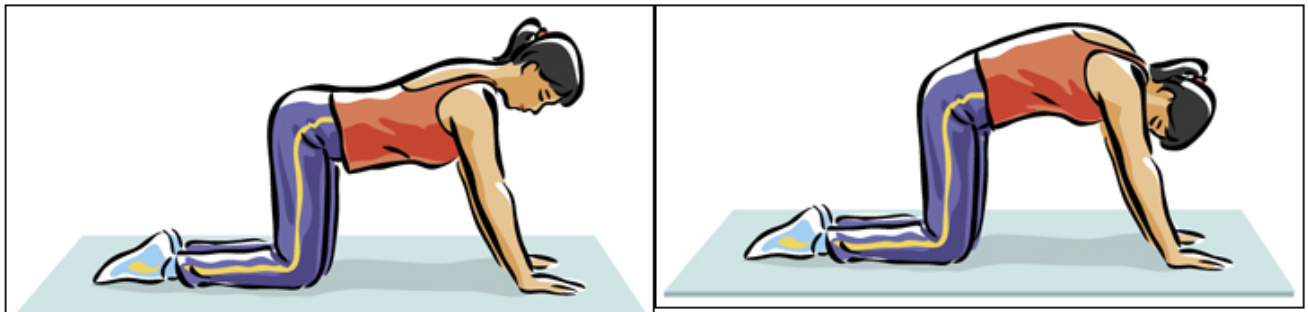


CAUTION: Do this stretch only if your healthcare provider recommends it. Don't do it when you are first injured.

Back Exercises: Back Press

Do this exercise on your hands and knees. Keep your knees under your hips and your hands under your shoulders. Keep your spine in a neutral position (not arched or sagging). Be sure to maintain your neck's natural curve.

- Tighten your abdominal and buttocks muscles to press your back upward. Let your head drop slightly.
- Hold for 5 seconds. Return to starting position.
- Repeat 5 times.



Back Exercises: Side Stretch

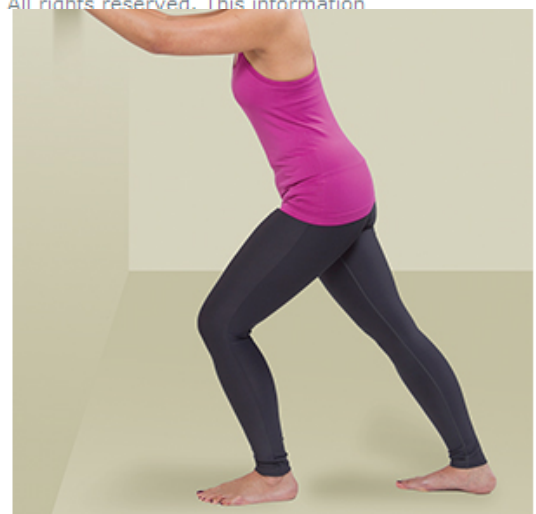
To start, sit in a chair with your feet flat on the floor. Shift your weight slightly forward to avoid rounding your back. Relax. Keep your ears, shoulders, and hips aligned.

- Stretch your right arm overhead.
- Slowly bend to the left. Don't twist your torso.
- Hold for 20 seconds. Return to starting position.
- Repeat 2 times. Then, switch to the other side.



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- Face a wall 2 feet away. Step toward the wall with one foot.
- Place both palms on the wall and bend your front knee.
- Lean forward, keeping the back leg straight and the heel on the floor.
- Hold for 20 seconds. Switch legs.



Exercises for Shoulder Flexibility: Adduction (Reaching Across)

This stretch can help restore shoulder flexibility and relieve pain over time. When stretching, be sure to breathe deeply. And follow any special instructions from your doctor or physical therapist.

1. Put the hand from the side you want to stretch on your opposite shoulder. Your elbow should point away from your body. Try to raise your elbow as close to shoulder height as you can.
2. With your other hand, push the raised elbow toward the opposite shoulder. Avoid turning your head. Stop when you feel the stretch. Try to hold the stretch for 5 seconds.
3. Work up to doing 3 sets of this stretch, 3 times a day. Work up to holding the stretch for 30–60 seconds.



Note: Be sure to push your elbow across your chest, not up toward your chin. Over time, try to push your elbow farther across your chest to enhance the stretch.

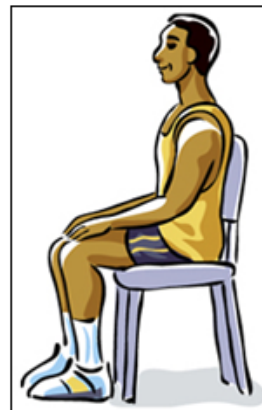
Frozen Shoulder

Frozen shoulder is another name for adhesive capsulitis, which causes restricted movement in the shoulder. If you have frozen shoulder, this stretch may cause discomfort, especially when you first get started. A few months may pass before you achieve the results you want. But once your shoulder heals, it almost never becomes frozen again. So stick to your stretching program. If you have any questions, be sure to ask your doctor.

Back Exercises: Lower Back Stretch

To start, sit in a chair with your feet flat on the floor. Shift your weight slightly forward to avoid rounding your back. Relax, and keep your ears, shoulders, and hips aligned.

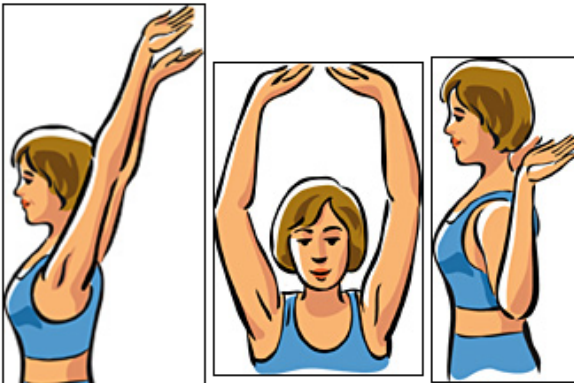
- Sit with your feet well apart.
- Bend forward and touch the floor with the backs of your hands. Relax and let your body drop.
- Hold for 20 seconds. Return to starting position.
- Repeat 2 times.



Shoulder and Upper Back Stretch

To start, stand tall with your ears, shoulders, and hips in line. Your feet should be slightly apart, positioned just under your hips. Focus your eyes directly in front of you. Stand in this position for a few seconds before starting your exercise. This helps increase your awareness of proper posture.

- Reach overhead and slightly back with both arms. Keep your shoulders and neck aligned and your elbows behind your shoulders.
- With your palms facing the ceiling, turn your fingers inward.
- Take a deep breath. Breathe out and lower your elbows toward your buttocks. Hold for 5 seconds, then return to starting position.
- Repeat 3 times.



Back Exercises: Hip Rotator Stretch

To start, lie on your back with your knees bent and feet flat on the floor. Don't press your neck or lower back to the floor. Breathe deeply. You should feel comfortable and relaxed in this position.

- Rest your right ankle on your left knee.
- Place a towel behind your left thigh and use it to pull the knee toward your chest. Feel the stretch in your buttocks.
- Hold for 30-60 seconds. Release.
- Repeat 2 times.
- Switch legs.

For your safety, check with your healthcare provider before starting an exercise program.



Seated Hamstring Stretch

The following flexibility exercise may be suggested by your therapist. Repeat as many times as instructed. Stop the exercise if it causes pain and discuss it with your physical therapist or doctor. During the exercise, be sure not to bounce.

- Sit with one leg extended and your back straight. Bend your other leg so that the sole of your foot rests against your mid-thigh.
- Reach toward your ankle. Keep your knee, neck, and back straight.
- Feel the stretch in the back of your thigh.
- Hold for 30-60 seconds. Repeat 2 times.



For your safety, check with your healthcare provider before starting an exercise program.

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EXAMPLE EXERCISE SCHEDULE

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<u>AEROBIC EXERCISE</u> 30-60 minutes Bike, walk, swim etc.	<u>AEROBIC EXERCISE</u> 30-60 minutes Bike, walk, swim etc.	<u>AEROBIC EXERCISE</u> 30-60 minutes Bike, walk, swim etc.	<u>REST</u>	<u>AEROBIC EXERCISE</u> 30-60 minutes Bike, walk, swim etc.	<u>AEROBIC EXERCISE</u> 30-60 minutes Bike, walk, swim etc.	<u>REST</u>
<u>FLEXIBILITY EXERCISE</u>	<u>FLEXIBILITY EXERCISE</u>	<u>FLEXIBILITY EXERCISE</u>		<u>FLEXIBILITY EXERCISE</u>	<u>FLEXIBILITY EXERCISE</u>	
<u>RESISTANCE EXERCISE</u>				<u>RESISTANCE EXERCISE</u>		
<u>Arms</u> Bicep Curls Tricep Press				<u>Arms</u> Hammer curls Triceps with resistance band		
<u>Legs</u> Bridge Calf raises				<u>Legs</u> Seated leg raise Leg lunge		
<u>Chest</u> Push ups (wall or on floor)				<u>Chest</u> Chest press		
<u>Shoulders</u> Front raise Shoulder press				<u>Shoulders</u> Side Raise Upright Row		
<u>Back</u> Rows				<u>Back</u> Back fly		
<u>Abs*</u> Crunches or sit ups Arm reach				<u>Abs*</u> Side to side with weighted ball		

*Do not perform abdominal exercises until cleared by your physician (usually 4-6 weeks after surgery)

Make sure that you are staying hydrated before, during and after exercise with plain cool water. If you are exercising for more than an hour you may need an electrolyte replacement drink and some more nutrition. Please talk with your Registered Dietitian for sports nutrition recommendations.

Websites for more information on exercise with examples and videos

<http://go4life.nia.nih.gov/try-these-exercises>

www.fitness.gov

<http://www.cdc.gov/physicalactivity/>

<http://www.cdc.gov/physicalactivity/everyone/videos/index.html#MuscleHome>

www.acsm.org

www.americanheart.org

www.hhs.gov

www.justmove.org

<http://www.nia.nih.gov/health/topics/exercise>

www.presidentschallenge.org

www.shapeup.org

<http://nhlbisupport.com/bmi/>

EXERCISE PROGRESSION AFTER SURGERY

Pre surgical – Begin an exercise program TODAY***

Exercise	Time	Frequency	Intensity	Strength Exercise
Walk Cycle Swim Row Stair climbing	15-30 minutes	3-5 times per week With one day of rest in between	As tolerated	Alternate cardio with strength exercises as able to tolerate

*** Do not start until medically cleared by your Primary Doctor

Post-op – week 1 ***

Exercise	Time	Frequency	Intensity	Strength Exercise
Walk	5 to 10 minutes	3 times per day Every day	As tolerated	none

*** Do not start until medically cleared by your Primary Doctor

Post-op – week 2

Exercise	Time	Frequency	Intensity	Strength Exercise
Walk	15-20 minutes	2 times per day Every day	As tolerated	none

Post-op – week 3

Exercise	Time	Frequency	Intensity	Strength Exercise
Walk	15 to 30 minutes Increase time by 5 minutes	3 times per week	Moderate intensity progressing to a few days per week of vigorous intensity. Increase intensity by adding	May begin weight training after your doctor's approval. Add 2 days of light weight training as follows:

			hills/resistance or moving faster	Day 1: Upper body Day 2: Lower body Or total body both days As tolerated
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Post-op – week 4 to 2 months

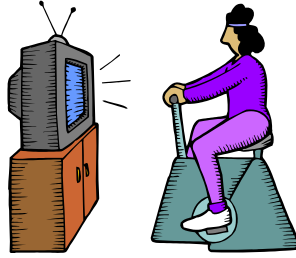
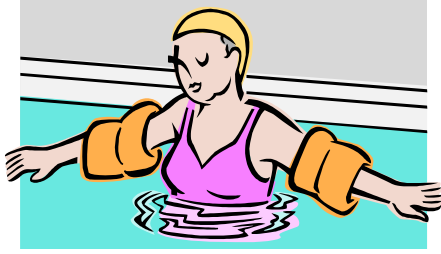
Exercise	Time	Frequency	Intensity	Strength Exercise
Walk or start other cardio exercises* with surgeon's approval	30 to 45 minutes	3-5 times per week	Moderate intensity progressing to a few days per week of vigorous intensity. Increase intensity by adding hills/resistance or moving faster	Add a 3 rd day of light weight training, alternating upper and lower body weight 15-30 minutes OR 2 days per week of total body work out As tolerated

Re-Shaping Bodies & Lives

Post-op – Month 2 and beyond

Exercise	Time	Frequency	Intensity	Strength Exercise
Walk or start other cardio exercises* with surgeon's approval	30 to 45 minutes	3-5 times per week	Moderate intensity progressing to a few days per week of vigorous intensity. Increase intensity by adding hills/resistance or moving faster	Add a 4 th day of light weight training, alternating upper and lower body weight 15-30 minutes OR 2 days per week of total body work out As tolerated

*Swimming may typically be started 6 weeks after surgery



360
BARIATRICS
Re-Shaping Bodies & Lives

MY EXERCISE LOG

My Goal:

(Describe your goal in terms of type of exercise, frequency, or duration of activity, how much weight you want to lift, etc. Then mark which days you met your goal.)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1							
Week 2							
Week 3							
Week 4							
Week 5							
Week 6							
Week 7							
Week 8							
Week 9							
Week 10							
Week 11							
Week 12							
Week 13							
Week 14							
Week 15							
Week 16							
Week 17							

Week 18							
Week 19							
Week 20							



REFERENCES AND TIPS

CLEAR LIQUIDS

Non Carbonated, sugar free, caffeine free clear liquids

Water

Crystal Light[®]

Wylers Light[®]

Diet Snapple[®]

Diet Iced Tea

Propel[®]

Glaceau Smart Water[®]

Walgreen Natural Flavor H2O Plus[®]

Country Time Sugar Free Pink Lemonade Mix[®]

Sugar Free Kool-Aid Mix[®]

Caffeine free coffee

Caffeine free tea

Sugar free drink mixes

Sugar free Jell-O[®]

Sugar Free popsicles

Broth (chicken, beef, vegetable)



PROTEIN SHAKES, POWDERS AND DRINKS

Preferably choose a protein shake that is:
 High in protein – 20 grams or more per serving
 Low in sugar – less than 5 grams per serving

<u>PROTEIN POWDERS</u> <u>Whey Protein ISOLATE</u>	Serving Size	Sugar (grams)	Protein (grams)	Store
Bariatric Advantage High Protein	1 scoop	1	20	Online at Bariatric Advantage.com
Body Fortress Super Advanced Whey Protein	1 scoop	1	30	Walmart
Celebrate Vitamins ENS plus protein	2 scoops	4-5	25	Online at Celebratevitamins.com
Clean Series Whey Protein Isolate	1 scoop	2	23	Online at www.cleanseries.twinlab.com
Jay Robb Whey Protein (sweetened with Stevia)	1 package or 1 scoop	0	25	Vitamin Shoppe, Kroger
Klean Athlete Klean Isolate	1 scoop	1	20	Online at kleanathlete.com
Optimum Nutrition Performance Whey 100%	1 scoop	1	30	Online at optimumnutrition.com
Unjury	1 scoop	0 – 3	21	Online at Unjury.com

<u>PROTEIN POWDERS</u> Whey Protein <u>ISOLATE/CONCENTRATE</u> MIX	Serving Size	Sugar (grams)	Protein (grams)	Store
COR-Performance Whey	1 scoop	1	25	Online at Cellucor.com Amazon.com
EAS 100% Whey Protein	1 scoop	2	26	Walmart, Walgreens, Target
GNC Pro Performance 100% Whey Protein	1 scoop	2	24	GNC
GNC Total Lean Lean Shake 25	1 packet	3	25	GNC
Monster Protein	1 scoop	2	25	Vitamin Shoppe, Walmart, Target
Muscle Milk (Lactose free)	2 scoops	4	32	Vitamin Shoppe, Walmart, Target
Muscle Milk Light (Lactose free)	2 scoops	2	25	Vitamin Shoppe, Walmart, Target
TwinLab 100% Whey Protein Fuel	1 scoop	2-3	25	Walmart

<u>READY TO DRINK</u> <u>PROTEIN SHAKES</u> Whey Protein <u>ISOLATE</u>	Serving Size	Sugar (grams)	Protein (grams)	Store
Boost Calorie Smart	1 container	4	16	Kroger, Walmart, Target
Muscle Milk	1 container	0-1	20-40	Vitamin Shoppe, Target, Walmart

<u>READY TO DRINK</u> <u>PROTEIN SHAKES</u> Whey Protein <u>ISOLATE/</u> <u>CONCENTRATE</u> MIX	Serving Size	Sugar (grams)	Protein (grams)	Store
Boost Glucose Control	1 container	4	16	Kroger, Walmart, Target

<u>READY TO DRINK PROTEIN SHAKES</u> Whey Protein ISOLATE/ CONCENTRATE MIX	Serving Size	Sugar (grams)	Protein (grams)	Store
(Lactose free)				
EAS Myoplex Carb Control	1 container	0	17	Vitamin Shoppe, Target, Kroger
Ensure High Protein	1 container	4	16	Target, Walmart, Kroger
Pure Protein	1 bt	1	23	Walmart

<u>PROTEIN POWDERS AND READY TO DRINK SHAKES</u> Other forms of protein	Serving Size	Sugar (grams)	Protein (grams)	Store
Clean Series Soy Protein	2 scoops (powder)	0	30	Online at www.cleanseries.twinlab.com
EAS AdvantEDGE (Soy and pea protein)	1 container (ready to drink)	0	17	Vitamin Shoppe, Target, Walmart, Kroger
EAS Myoplex Lite (Whey protein concentrate, soy and pea protein)	1 packet	1	20	Vitamin Shoppe, Target, Walmart, Kroger
Premier Protein	1 (ready to drink)	1	30	WalMart, Target, Costco, Kroger
EAS Myoplex Original powder	1 scoop (powder)	1	42	Vitamin Shoppe, Target, Walmart, Kroger

<u>PROTEIN POWDERS AND READY TO DRINK SHAKES</u> Other forms of protein	Serving Size	Sugar (grams)	Protein (grams)	Store
(Whey protein concentrate and soy protein)				
GNC Pro Performance 100% Soy Isolate	1 scoop (powder)	2	25	GNC

<u>CLEAR PROTEIN DRINKS</u> Whey Protein	Serving Size	Sugar (grams)	Protein (grams)	Store
Unjury-Chicken Soup and Unflavored (whey protein isolate)	1 scoop	0 – 1	21	Online at www.unjury.com Amazon.com

<u>UNFLAVORED PROTEIN POWDERS</u>	Serving Size	Sugar (grams)	Protein (grams)	Store
Beneprotein (whey protein isolate)	1 scoop (1.5 tablespoons)	0	6	Online at Walmart.com, Walgreens.com, nestlenutritionstore.com, amazon.com
Bipro Whey Protein Isolate	1 scoop or 1 packet	0	20	Online at www.biprousa.com Amazon.com
GNC Pro Performance 100% Whey Protein	1 scoop	2	24	GNC

UNFLAVORED PROTEIN POWDERS	Serving Size	Sugar (grams)	Protein (grams)	Store
(Whey protein isolate and concentrate)				
Twin lab Clean Series Soy Protein Isolate Unflavored	1 scoop	0	30	Vitamin Shoppe, Amazon.com
Unjury Unflavored Protein	1 scoop	0	21	Online at www.unjury.com Amazon.com

***** Please note: 360 Bariatrics or Dr. Patel are not affiliated with or derive any financial benefits from the promotion or sale of any of the above entities or sources.**

Nutritional supplements are not tested for accuracy of ingredients, safety or potency by any regulatory body. There are a few third party companies that will test supplements for the items listed above. These companies include NSF, Informed Choice and Consumerlab.com. It is important that you take a supplement from a reputable company for your safety.



Whey protein is the protein best utilized by the body and is a complete protein containing all of the essential amino acids your body needs. Egg protein is also a complete protein. Other proteins are available such as soy, hemp, rice, and pea proteins. These other proteins are not as well utilized by the body and other changes may need to be made in your eating plan to ensure adequate nutritional intake. Please talk with your Registered Dietitian if you have questions about the type of protein you are using.

Whey protein isolate is recommended because it contains minimal amounts of lactose and fat.

****Please read product labels for the serving size to meet 20 g of protein as products change****

PROTEIN SHAKE RECIPES

Tips

- Use a blender or shaker
 - To decrease air incorporated into shake try pulsating instead of continuously blending
- Thicker consistency: use yogurt (low sugar), cottage cheese, or ice
- Thinner consistency: Use milk or water
- For a slushy-add ice to any shake and blend or try frozen milk ice cubes
- Add flavor to any shake with
 - Sugar free extracts (raspberry, banana, orange, vanilla, coconut, almond, peppermint)
 - Cinnamon
 - Sugar free syrups
 - Fresh squeezed lemon or lime juice
 - Sugar substitutes

CLEAR LIQUID RECIPES

Basic Clear Protein Shake

Unflavored protein powder (Amount to obtain 20g of protein)

8 ounces of water

Sugar free flavoring (Crystal Light, lemon or lime juice, etc)

Can add ice to make it more slushy

Chicken Soup

Unjury Chicken Soup Flavored protein powder

8 ounces of warm water or milk to make cream of chicken soup

OR

Unflavored protein powder (Amount to obtain 20g of protein)

8 ounces of low sodium chicken broth

High Protein Jello

Dissolve sugar free Jello per package directions

After dissolving, cool for 3-5 minutes

While cooling, mix protein powder (any flavor) with 1 cup cold water, stirring to dissolve powder

Stir protein and water into cooling Jello

Chill

FULL LIQUID RECIPES

Chocolate

Chocolate protein powder (Amount to obtain 20g of protein)

8 ounces of water or skim milk

Vanilla

Vanilla protein powder (Amount to obtain 20g of protein)

8 ounces of water or skim milk

Strawberry

Strawberry protein powder (Amount to obtain 20g of protein)

8 ounces of water or skim milk

Vanilla and coffee

Vanilla protein powder (Amount to obtain 20g of protein)

8 ounces of warm decaf coffee

Orange Cream

Vanilla protein powder (Amount to obtain 20g of protein)

8 ounces of water

Orange Crystal Light or other sugar free orange flavoring

Mint Chocolate Shake

Chocolate protein powder (Amount to obtain 20g of protein)

3/4 cup ice

1/4 cup milk

1 drop peppermint extract

Strawberry Lemonade

Strawberry protein powder (Amount to obtain 20g of protein)

8 ounces of water

Packet of sugar free lemonade

Mocha

Vanilla or chocolate protein powder (Amount to obtain 20g of protein)

8 ounces of milk

1 tablespoon decaf coffee

Pumpkin Spice Latte

½ scoop vanilla protein powder

½ scoop unflavored protein powder

¼ tsp pumpkin pie spice

1 Tb pumpkin pie spice sugar free syrup

¼ cup skim milk

¾ cup coffee

Make coffee, add milk, make sure temperature is <140 degrees F before adding protein powder, spice and syrup

High-Protein Cream Soup

Unflavored protein powder (Amount to obtain 20g of protein)

1/3 cup nonfat dry milk powder

Hot water to make 1 cup (Do not mix powder with water >140 degrees F)

Yogurt Shake

Vanilla or unflavored protein powder (Amount to obtain 20g of protein)

1/4 cup low sugar yogurt (try different flavors)

1/4 cup ice

1/4 cup milk

Peanut Butter Chocolate Shake

Chocolate protein powder (Amount to obtain 20g of protein)

3/4 cup ice

1/4 cup milk

1-2 teaspoons low sugar whipped peanut butter

Hot Chocolate

1 scoop chocolate protein powder

1 cup water

Heat water not hotter than 140 degrees F

Mix in protein powder

Sprinkle with cinnamon or nutmeg, top with 1 Tb sugar free cool whip

PUDDING POP RECIPES

Strawberry Banana

Ingredients:

Sugar free instant pudding banana, 1 oz box

2 cups skim milk

Directions:

Add 2 scoops strawberry protein powder to 2 cups milk, stir

Put sugar free pudding mix in a bowl

Add milk and protein powder to sugar free instant pudding

Stir for 2 minutes

Pour into small paper cups, add popsicle stick

Put in freezer for 4 hours

Peel away paper and eat

Creamsicle

Ingredients:

Sugar free instant pudding vanilla, 1 oz box

2 cups skim milk

1 teaspoon orange extract or Crystal Light

Directions:

Add 2 scoops vanilla protein powder to 2 cups milk, stir

Put sugar free pudding mix in a bowl

Add milk and protein powder to sugar free instant pudding

Stir for 2 minutes

Add 1 teaspoon orange extract to taste

Pour into small paper cups, add popsicle stick

Put in freezer for 4 hours

Peel away paper and eat

Fudgesicle

Ingredients:

Sugar free instant pudding chocolate, 1 oz box

2 cups skim milk

Directions:

Add 2 scoops unflavored protein powder to 2 cups milk, stir

Put sugar free pudding mix in a bowl

Add milk and protein powder to sugar free instant pudding

Stir for 2 minutes

Pour into small paper cups, add popsicle stick

Put in freezer for 4 hours

Peel away paper and eat

HIGH PROTEIN PUDDING (this could be consumed on phase III)

Protein Pumpkin Pudding

1 package sugar free Vanilla instant pudding mix

¾ cup water

2 scoops vanilla protein powder

2 Tbsp canned pumpkin (not pumpkin pie mix)

¼-1/2 teaspoon pumpkin pie spice

Directions:

Measure ¾ cup water, add 2 scoops protein powder mix by shaking or stirring

Follow pudding package directions

Empty pudding mix into bowl, add pumpkin spice and mix

Pour in water and protein powder mix

Add canned pumpkin

Beat/stir until mixed

Chill in fridge

Serve with low fat cool whip

Chocolate Peanut Butter Balls

¾ cup low sugar, natural peanut butter

3 scoops chocolate protein powder

Mix peanut butter with one scoop of protein powder at a time until dough formed

Roll into balls and freeze overnight

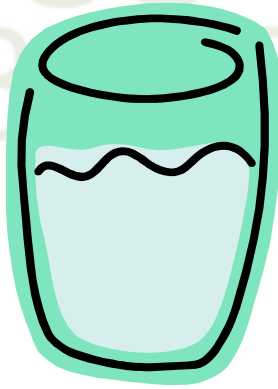
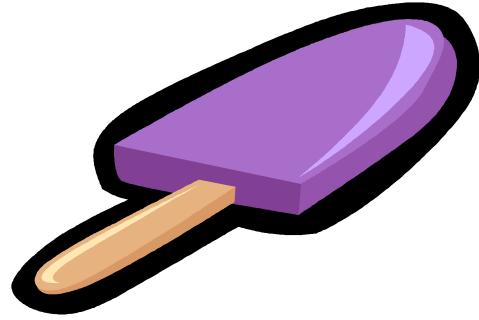
Vegetable Dip

½ cup plain Greek yogurt

1 scoop chicken soup or unflavored protein powder

****Protein powder can be added to many foods to help increase the protein content of the food****

****Visit unjury.com for more recipe ideas****



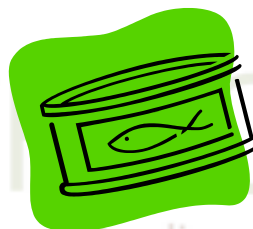
PROTEIN ON THE GO

We live very hectic and busy lifestyles and find ourselves spending a lot of time away from home when it is time to eat. Make sure that you have some protein foods that you can take with you on the go to ensure that you will be able to eat nutritiously.

Many high protein foods are perishable and must be refrigerated. Please remember food safety when traveling with perishable foods. Make sure that you always have a cooler or insulated bag with ice packs that you can take with you in your car or to have at work so you can keep your perishable protein foods at the correct temperature.

Protein ideas for on the go:

- Mozzarella string cheese
- Cheese cubes
- Greek yogurt—don't forget a spoon!
- Natural, whipped peanut butter
- Nuts
- Prepackaged milk
- Protein shakes or powders
- Meat and cheese roll ups
- Low sodium canned tuna or chicken
- Hard boiled egg
- Turkey jerky—once drier foods are tolerated
- Cottage cheese
- Hummus



A few words on protein bars.....

It is recommended to eat natural, whole foods as much as possible versus packaged processed foods. Many protein bars are high in sugar, contain additives and don't contain adequate protein. A good rule of thumb is, if the amount of sugar is more than the amount of protein the bar is not a protein bar. Choose protein bars that contain a protein source as the first ingredient such as nuts, soy, whey protein isolate, etc. Below is a list of protein bars that would be a better choice:

Brand	Sugar	Protein	Comments
Pure Protein	3 grams	31 grams	Does contain sugar alcohols that may cause gastrointestinal discomfort
KIND Bars	4 grams	7 grams	Pick their nut based bars
Power Bar Nut Naturals	7 grams	10 grams	
PowerBar Protein Plus	13 grams	20 grams	
The Simply Bar	3 grams	16 grams	www.celebratevitamins.com

VITAMINS AND MINERAL SUPPLEMENTATION

For the first 2-3 months after any bariatric procedure all medications need to be **CHEWABLE**, **CRUSHED** or in **LIQUID FORM**. Pill crushers can be purchased at your local pharmacy.

Vitamin or Mineral	Dosage	Application
Multivitamin/Multimineral with or without iron—please see recommendations below for total iron needed per day (Do not take with Calcium)	It should contain 100% of the Daily Value (DV) of 2/3 of the nutrients & contain selenium, zinc, copper, folic acid	One dose by mouth daily *Be sure to read the label of your supplement for amount of chews needed to meet the dosage recommendations*
Iron taken with Vitamin C (Do not take with Calcium)	<u>Iron</u> –36-45mg <u>Vitamin C</u> – 500 mg	One pill by mouth daily
Calcium Citrate with Vitamin D (Do not take with iron)	<u>Calcium</u> total 1200-1500 mg *Be sure to include calcium rich foods in your diet such as milk, cheese, yogurt, soymilk or tofu* <u>Vitamin D</u> total 400-800 IU *More may be needed with deficiency*	250 mg 5 pills per day -or- 500 mg 3 pills per day -or- 500 mg 2 pills per day + one high calcium food source such as milk, cheese, yogurt, soymilk or tofu.
Vitamin B 12 Choose one of the application methods listed to the right	500 micrograms (sublingual)	Place one pill under the tongue (sublingual) daily
	1 ml injection	One injection per month
	500 micrograms nasal spray	One spray in one nostril once a week
Vitamin B Complex	One pill to include 50-100 mg of Thiamine (B1)	One pill by mouth daily
Zinc (optional)*	15 mg (Most multivitamins contain 15 mg of zinc)	One pill by mouth daily
Biotin (optional)*	3000 micrograms	One pill by mouth daily

* Zinc and Biotin are optional medications used to minimize temporary hair thinning.

Vitamins and minerals pose toxicity risks if taken in very high doses. Please do not take higher doses of the vitamins/minerals listed above unless you have discussed this with your registered dietitian or physician.

Remember no single vitamin contains everything you need!!!

You should take your vitamin and mineral supplements DAILY
You should have your vitamin and mineral levels checked and adjusted:

- 3 months after surgery
- 6 months after surgery
- Yearly after surgery

Nutritional supplements are not tested for accuracy of ingredients, safety or potency by any regulatory body. There are a few third party companies that will test supplements for the items listed above. These companies include NSF, USP, Informed Choice and Consumerlab.com. It is important that you take a supplement from a reputable company for your safety.



SUGGESTED VITAMIN AND MINERAL SUPPLEMENTATION SCHEDULE

OPTION 1: Spread out throughout the day

Time	Vitamin or Mineral	Dosage	Application
At breakfast: ~8 AM	Multivitamin with/without Iron (Do not take with Calcium)	One pill	One pill by mouth daily
	Iron taken with Vitamin C (Do not take with Calcium)	Iron – 36-45 mg (may need 60 mg if iron deficient) Vitamin C – 500 mg	One pill by mouth daily
2 Hours after breakfast: ~10 AM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)
At lunch: ~noon	Vitamin B 12	500 mcg	Place one pill under the tongue (sublingual) daily
	Vitamin B Complex	One pill to include 50-100 mg of Thiamine (B1)	One pill by mouth daily
Afternoon snack: 3 PM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium -or- High calcium food source	One pill three times a day (total of 1500 mg daily)
After dinner: ~8 PM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)

* Zinc and Biotin are optional medications used to minimize temporary hair thinning.

** If taking Synthroid, iron and calcium supplements need to be separated from the Synthroid by 4 hours before or after taking

OPTION 2: All in the morning

Time	Vitamin or Mineral	Dosage	Application
At breakfast: ~8 AM	Multivitamin with/without Iron (Do not take with Calcium)	One pill	One pill by mouth daily
	Iron taken with Vitamin C (Do not take with Calcium)	Iron – 36-45 mg (may need 60 mg if iron deficient) Vitamin C – 500 mg	One pill by mouth daily
	Vitamin B 12	500 micrograms (sublingual)	Place one pill under the tongue (sublingual) daily
	Vitamin B Complex	One pill to include 50-100 mg of Thiamine (B1)	One pill by mouth daily
2 Hours after breakfast: ~10 AM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)
Afternoon snack: ~3 PM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium -or- High calcium food source	One pill three times a day (total of 1500 mg daily)
After dinner: ~8 PM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)

* Zinc and Biotin are optional medications used to minimize temporary hair thinning.

** If taking Synthroid, iron and calcium supplements need to be separated from the Synthroid by 4 hours before or after taking

OPTION 3: All in the evening

Time	Vitamin or Mineral	Dosage	Application
Breakfast: ~8 AM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)
Morning snack: ~11 AM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium -or- High calcium food source	One pill three times a day (total of 1500 mg daily)
Afternoon snack: ~3 PM	Calcium Citrate with Vitamin D (Do not take with iron)	250 mg calcium x 2 -or- 500 mg calcium	One pill three times a day (total of 1500 mg daily)
At dinner: ~6 PM	Multivitamin with/without Iron (Do not take with Calcium) Iron taken with Vitamin C (Do not take with Calcium) Vitamin B 12 Vitamin B Complex	One pill Iron – 36-45 mg (may need 60 mg if iron deficient) Vitamin C – 500 mg 500 micrograms (sublingual) One pill to include 50-100 mg of Thiamine (B1)	One pill by mouth daily One pill by mouth daily Place one pill under the tongue (sublingual) daily One pill by mouth daily

* Zinc and Biotin are optional medications used to minimize temporary hair thinning.

** If taking Synthroid, iron and calcium supplements need to be separated from the Synthroid by 4 hours before or after taking

RECOMMENDED MULTIVITAMINS

Supplement Brand	Iron	Vit C	Vit D	Calcium	Zinc	Folic Acid	Thiamin	Dosage	Store
21 st Century Sentry Multivitamin and Multimineral	18 mg	60 mg	400 IU	200 mg	11 mg	400 mcg	1.5 mg	1 Tablet	Online at www.amazon.com
Bariatric Advantage Complete Chewable Multivitamin	0 mg	120 mg	1000 IU	200 mg calcium citrate	15 mg	800 mcg	6 mg	2 Chewable Tablets	Online at Bariatric Advantage
Bariatric Advantage Complete Multi-Formula Crystals Drink Mix	0 mg	60 mg	300 IU	500 mg Calcium citrate	8 mg	270 mcg	3 mg	1 Packet	Online at Bariatric Advantage
Celebrate Bariatric Supplements chewable multi-complete- 36	36 mg Ferrous Fumarate	180 mg	3000 IU	0 mg	30 mg	800 mcg	12 mg	2 Chewable Tablets	Online at Celebrate Bariatric Supplements
Celebrate Bariatric Supplements Chewable Multivitamin	0 mg	180 mg	3000 IU	0 mg	30 mg	800 mcg	12 mg	3 Chewable Tablets	Online at Celebrate Bariatric Supplements
Celebrate Bariatric Supplements Capsule Multivitamin	0 mg	180 mg	3000 IU	0mg	30 mg	800 mcg	12 mg	3 Capsules	Online at Celebrate Bariatric Supplements
Celebrate Bariatric Supplements Soft Chew Multivitamin	0 mg	180 mg	3000 IU	0 mg	30 mg	800 mcg	12 mg	2 Chews	Online at Celebrate Bariatric Supplements

Supplement Brand	Iron	Vit C	Vit D	Calcium	Zinc	Folic Acid	Thiamin	Dosage	Store
Cooper Clinic Basic Multivitamin/ Multimineral iron free	0 mg	150 mg	2000 IU	0 mg	15 mg	200 mcg	1.5 mg	1 tablet	Tom Thumb or online at cooperconcepts.com
Cooper Clinic Basic Multivitamin/ Multimineral with iron	18 mg carbonyl iron	150 mg	2000 IU	0 mg	15 mg	200 mcg	1.5 mg	1 tablet	Tom Thumb or online at cooperconcepts.com
Nature Made Multi Complete with iron	18 mg Ferrous Fumarate	180 mg	1000 IU	162 mg Calcium carbonate	15 mg	400 mcg	1.5 mg	1 tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons, Amazon
Nature Made Multi for Her	18 mg Ferrous Fumarate	180 mg	1000 IU	250 mg Calcium carbonate	15 mg	600 mcg	1.5 mg	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature Made Multi for Him	0 mg	18 mg	1000 IU	162 mg Calcium carbonate	15 mg	400 mcg	1.5 mg	1 tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
One A Day Women's Multivitamin	18 mg ferrous fumarate	60 mg	1000 IU	500 mg	15 mg	400 mcg	1.5 mg	1 Tablet	Wal-mart, Walgreens, CVS
Opurity Bypass and Sleeve Optimized Multivitamin	30 mg ferronyl iron	180 mg	1600 IU	50 mg Calcium	20 mg	800 mcg	6 mg	1 Tablet	Online at Opurity.com
Up & Up (Target) Women's Daily Multivitamin	18 mg ferrous fumerate	60 mg	1000 IU	500 mg	15 mg	500 mcg	1.5 mg	1 tablet	Target

Supplement Brand	Iron	Vit C	Vit D	Calcium	Zinc	Folic Acid	Thiamin	Dosage	Store
Walgreens One Daily For Women	18 mg	60 mg	1000 IU	500 mg	15 mg	400 mcg	1.5 mg	1 Tablet	Walgreens

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RECOMMENDED CALCIUM SUPPLEMENTS

Supplement Brand	Calcium	Vitamin D	Dosage	Store
Bariatric Advantage Chewable Calcium Citrate	500 mg calcium citrate	300 IU	1 Chew (2-3 per day)	Online at Bariatric Advantage.com
Bariatric Advantage Citrate Chewy Bites-250 mg	250 mg Calcium citrate	125 IU	1 Chew (5-6 per day)	Online at Bariatric Advantage.com
Celebrate Calcet creamy bites	500 mg calcium citrate	400 IU	1 Chew (2-3 per day)	Online at Celebrate Bariatric Supplements
Celebrate Calcium Plus	167 mg calcium citrate	167 IU	1 Tablet (7-9 per day)	Online at Celebrate Bariatric Supplements
Celebrate Calcium Plus 500 Chewable	500 mg calcium citrate	333 IU	1 Chew (2-3 per day)	Online at Celebrate Bariatric Supplements
Celebrate Soft Chews	500 mg calcium citrate	500 IU	1 Chewable (2-3 per day)	Online at Celebrate Bariatric Supplements
Citracal Calcium Citrate + D3 petites	400 mg Calcium Citrate	500 IU	2 Tablets (6-7 per day)	Target, Walgreens, Kroger
Cooper Clinic Calcium Citrate	500 mg Calcium Citrate		2 Tablets (4-6 per day)	Tom Thumb or online at coopercomplete.com
Douglas Laboratories Calcium Citrate	250 mg Calcium Citrate		1 Tablet (5-6 per day)	www.douglaslabs.com
GNC CalciMate Plus 800	800 mg calcium citrate	2,000 IU	4 caplets (6-7 per day)	GNC

Supplement Brand	Calcium	Vitamin D	Dosage	Store
Opurity Calcium Citrate Plus Chewable	300 mg calcium citrate	200 IU	1 Chewable (4-5 per day)	Online at Opurity.com
Solgar Calcium Citrate with Vitamin D	1,000 mg calcium citrate	600 IU	4 Tablets	Vitamin Shoppe, Herbmart, Sprouts, Central Market, Amazon, Whole Foods
Swanson Calcium Citrate & Vitamin D	1260 mg calcium citrate	800 IU	4 Tablets	Swansonvitamins.com
Vitamin Shoppe Calcium Citrate plus Magnesium and Vitamin D	333 mg calcium citrate	204 IU	2 Capsules (4 per day)	Vitamin Shoppe

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RECOMMENDED VITAMIN D SUPPLEMENTS

Supplement Brand	Vitamin D	Dosage	Store
Bariatric Advantage Dry Vitamin D	5000 IU	1 Capsule	Online at Bariatric Advantage.com
Celebrate Vitamin D3 (Quick melt)	5000 IU	1 Tablet	Online at Celebrate Bariatric Supplements
Cooper Clinic Vitamin D soft gels	1000 IU	1 soft gel	Tom Thumb or online at coopercomplete.com
Country Live Vitamin D3 soft gels	5000 IU	1 Soft get	Vitamin Shoppe, Whole foods
CVS Vitamin D	1000 IU	1 Soft gel	CVS
Finest Nutrition Vitamin D	1000 IU	1 Soft gel	Walgreens
GNC vitamin D	1000-2000 IU	1 Tablet	GNC
Jamieson D	1000 IU	1 Tablet	Online at www.jamiesonvitamins.com
Kirkland Signature Vitamin D	2000 IU	1 Soft gel	Costco, Amazon
Nature Made Vitamin D	400, 1000, or 2000 IU	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons

Supplement Brand	Vitamin D	Dosage	Store
Opurity Vitamin D	5000 IU	1 Tablet	Online at www.opurity.com
Rexell Vitamin D3	400 IU	1 Soft Gel	Dollar General
Simply Right (Sam's Club) Vitamin D-3	2000 IU	1 Soft Gel	Sam's Club
Solgar Vitamin D	1000 IU	1 Soft gel	Vitamin Shoppe
Source Naturals Vitamin D3	2000 IU	5 Drops	Online at www.sourcenaturals.com
Spring Valley Vitamin D	1000 IU	1 Soft Gel	Walmart
The Vitamin Shoppe Vitamin D3	2000 IU	1 Soft Gel	The Vitamin Shoppe

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RECOMMENDED VITAMIN B SUPPLEMENTS

Thiamin (B1) or B Complex

Supplement Brand	Thiamin	Biotin	Folic Acid	Vit B12	Dosage	Store
Bariatric Advantage Thiamin (B1)	100 mg				1 Capsule	Online at Bariatric Advantage.com
Bariatric Advantage B-50 Complex	50 mg	500 mcg	400 mcg	250 mcg	2 Capsules	Online at Bariatric Advantage.com
Celebrate B-50 complex	50 mg	600 mcg	400 mcg	150 mcg	1 Capsule	Online at Celebrate Bariatric Supplements
GNC B-Complex	75 mg	75mcg	400 mcg	250 mcg	2 Capsule	GNC
Nature Made B-1 (Thiamin)	100 mg				1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature Made Super B-Complex	100 mg	30 mcg	400 mcg	15 mcg	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Simply Right Super B Complex with C	100 mg	45 mcg	400 mcg	30 mcg	1 Tablet	Sam's

Supplement Brand	Thiamin	Biotin	Folic Acid	Vit B12	Dosage	Store
Swanson Premium Brand Super Stress B Complex with Vitamin C	50 mg	100 mcg	400 mcg	250 mcg	2 Tablets	Online at www.swansonvitamins.com
Twin Lab Stress B-Complex	50 mg	100 mcg	400 mcg	250 mcg	2 Capsules	Vitamin Shoppe
Vitamin Shoppe B-Complex 100 vegetarian	100 mg	100 mcg	400 mcg	100 mcg	1 Capsule	Vitamin Shoppe

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Vitamin B12

Supplement Brand	Folic Acid	Vit B12	Dosage	Store
Bariatric Advantage B12 with folic acid speedy melts	200 mcg	1000 mcg	1 Sublingual	Online at Bariatric Advantage.com
Celebrate B-12 sublingual quick melts	200 mcg	1000 mcg	Sublingual (1)	Online at Celebrate Bariatric Supplements
Cooper Clinic Vit B12		1000 mcg	1 dropper (1 ml)	Tom Thumb or online at coopercomplete.com
CVS Timed Release B 12		1000 mcg	1 Tablet	CVS

Supplement Brand	Folic Acid	Vit B12	Dosage	Store
Nature Made B-12		1000 mcg	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature's Bounty Sublingual B12		2500 mcg	1 Lozenge	CVS, Walgreens, Kroger, Albertsons, amazon
Opurity Vitamin B-12 Plus Folic Acid	200 mcg	1000 mcg	1 Tablet	Online at www.opurity.com
Rexall Sublingual High Potency B-12 2500 mcg		2500 mcg	1 Tablet	Online at www.drugstore.com www.iherb.com www.amazon.com or Dollar General
Solgar Vitamin B-12		1000 mcg B-12	1 Sublingual	Vitamin Shoppe
Spring Valley Sublingual B12 Dots		500 mcg	1 Tablet	Wal-Mart, Amazon

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Biotin

Supplement Brand	Biotin	Dosage	Store
Bariatric Advantage Biotin	5 mg (5000 mcg)	1 Capsule	Online at www.bariatricadvantage.com
Bluebonnet Biotin	5000 mcg	1 Capsule	Online at www.bluebonnetnutrition.com
Nature's Life Biotin 2,500 mcg Hair, Skin & Nails Formula	2500 mcg	1 Capsule	Online at www.amazon.com www.walmart.com

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RECOMMENDED IRON SUPPLEMENTS

Supplement Brand	Iron	Vitamin C	Dosage per day	Store
Bariatric Advantage Chewable Iron	18 mg Ferronyl iron	30 mg	1 Chewable	Online at Bariatric Advantage.com
Bariatric Advantage Chewable Iron	29 mg Ferronyl iron	60 mg	1 Chewable	Online at Bariatric Advantage.com
Bariatric Advantage Chewable Iron	60 mg Ferronyl iron	250 mg	1 Chewable	Online at Bariatric Advantage.com
Celebrate Iron + C Chewable	18 mg Carbonyl iron	36 mg vitamin C	1 Chewable	Online at Celebrate Bariatric Supplements
Celebrate Iron +C	30 mg Carbonyl iron	60 mg vitamin C	1 Tablet	Online at Celebrate Bariatric Supplements
Fergon	27 mg Ferrous gluconate		1 Tablet	Walgreens, CVS, Amazon
Ferro-Sequels	50 mg Ferrous fumarate		1 Time release Tablet	Walgreens, CVS
Life Extension Iron Protein Plus	15 mg Iron protein succinylate		1 Capsule	Online at www.lifeextension.com
Nature Made Iron	65 mg Ferrous Sulfate		1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature's Bounty Gentle Iron	28 mg Ferrous Bisglycinate	60 mg vitamin C	1 Tablet	CVS, Walgreens, Kroger, Albertsons, Amazon
Solgar Gentle Iron	25 mg Ferrous Bisglycinate		1 Capsule	Vitamin Shoppe, herbmart, Central Market, Walmart
Slow Fe	45 mg Ferrous sulfate		1 Tablet	Walmart, Walgreens, Amazon
Vitamin Shoppe Comfort Iron	25 mg Ferrous Bisglycinate		1 Capsule	Vitamin Shoppe

Supplement Brand	Iron	Vitamin C	Dosage per day	Store
Walgreens slow release iron	45 mg Ferrous Sulfate		1 Tablet	Walgreens

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RECOMMENDED VITAMIN C SUPPLEMENTS

Supplement Brand	Vitamin C	Dosage per day	Store
CVS Vitamin C	1000 mg	1 Caplet	CVS
GNC vitamin C (time release vegetarian)	1000 mg	1 Caplet	GNC
Kirkland Signature vitamin C	1000 mg	1 Tablet	Costco, Amazon
Nature Made Vitamin C	500 mg	1 Tablet or Chewable	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature Made Vitamin C	1000 mg	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons
Nature's Bounty Pure vitamin C	1000 mg	1 Capsule	CVS, Walgreens, Kroger
Natures Plus Super C complex	1000 mg	1 Capsules	Vitamin Shoppe, Sprouts, Central Market, herbmart
Spring Valley Natural C	1000 mg	1 Tablet	Wal-Mart
Sunkist chewable orange vitamin C	500 to 1000 mg	1 Chewable	Wal-Mart
Trader Joe's Chewable Oranges & C	500 mg	1 Chewable	Trader Joe's
Twin Lab Vitamin C	500 mg	1 Capsule	Vitamin Shoppe
Walgreens Vitamin C	1000 mg	1 Capsule	Walgreens

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RECOMMENDED ZINC SUPPLEMENTS

Supplement Brand	Zinc	Dosage per day	Store
Country Life Zinc Picolinate 25 mg	25 mg	1 Tablet	Online at www.swansonvitamins.com
Nature Made Zinc	30 mg	1 Tablet	Wal-Mart, Target, CVS, Walgreens, Kroger, Albertsons

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Please keep in mind that product information is subject to change per manufacturer discretion. Always check supplement facts label to verify supplement contents. Consult with your Registered Dietitian to discuss appropriate supplement intake.

Products above have been tested by NSF, USP, Consumer Lab, or by a third party confirmed via contact with the supplement company.

*Updated September 2016



VITAMINS AND MINERAL DEFICIENCY AND OVERDOSE SIGNS AND SIDE EFFECTS

Vitamin or Mineral	Physical Signs of Deficiency	Vitamin Overdose Side Effects
Vitamin A	<ul style="list-style-type: none"> • Hair follicle blockage with a permanent “goose-bump” appearance • Dry, rough, skin • Small, grayish, foamy deposits on the conjunctiva adjacent to the cornea • Drying of the eyes and mucous membranes • Night blindness • Decreased immunity 	<ul style="list-style-type: none"> • Headache • Birth defects • Liver problems • Osteoporosis and bone problems • Central nervous system disorders • Dry, scaly skin • Yellow/orange skin with toxicity of betacarotene
Vitamin D	<ul style="list-style-type: none"> • Weakness of muscles • Hypocalcemia • Decreased bone density 	<ul style="list-style-type: none"> • Hypercalcemia • Weakness • Calcifications in the kidney and other soft tissues • Polyuria • Arrhythmias
Vitamin E	<ul style="list-style-type: none"> • Peripheral neuropathy • Impaired immune system • Ataxia, eye issues • Red blood cell problems 	<ul style="list-style-type: none"> • Bleeding • Hemorrhagic stroke • Premature death • Diarrhea
Vitamin K	<ul style="list-style-type: none"> • Small hemorrhages in the skin or mucous membranes • Bleeding • Decreased bone density 	<ul style="list-style-type: none"> • Blood clots • Impairs action of anticoagulants

Vitamin or Mineral	Physical Signs of Deficiency	Vitamin Overdose Side Effects
Vitamin B₁ (Thiamine)	<ul style="list-style-type: none"> • Weight loss • Muscular wasting • Sometimes edema (wet beriberi) • Malaise • Tense calf muscles • Distended neck veins • Jerky movement of eyes • Staggering gait and difficulty walking • Round, swollen (moon) face • Foot and wrist drop 	<ul style="list-style-type: none"> • No toxicity risk as been determined
Vitamin B₂ (Riboflavin)	<ul style="list-style-type: none"> • Tearing, burning, and itching of the eyes with fissuring in the corners of the eyes • Soreness and burning of the lips, mouth, and tongue with fissuring and/or cracking of the lips and corners of the mouth • Purple swollen tongue • Seborrhea of the skin in the nasolabial folds, scrotum, or vulva • Capillary overgrowth around the corneas 	<ul style="list-style-type: none"> • No toxicity risk as been determined
Vitamin B₃ (Niacin)	<ul style="list-style-type: none"> • Dermatitis or skin eruptions • Tremors • Sore tongue • Skin that is exposed to sunlight will develop cracks and a scaly form of dermatitis with pigmentation • May also show signs of riboflavin deficiency 	<ul style="list-style-type: none"> • Stomach pain • Flushing • Yellow skin (jaundice) • Blurred vision • Hyperglycemia
Vitamin B₆ (Pyridoxine)	<ul style="list-style-type: none"> • Tongue inflammation 	<ul style="list-style-type: none"> • Peripheral neuropathy

Vitamin or Mineral	Physical Signs of Deficiency	Vitamin Overdose Side Effects
	<ul style="list-style-type: none"> • Inflammation of the lining of the mouth • Fissures in the corners of the mouth • Microcytic anemia 	<ul style="list-style-type: none"> • Sensory ataxia, impairment of sensation of vibrations • Decreased sense of touch, temperature, and pain
Folate	<ul style="list-style-type: none"> • Weakness, fatigue, and depression • Change in skin, hair and fingernail pigmentation • Dermatologic lesions • Megaloblastic anemia • Soreness and ulcerations in the tongue and oral mucosa 	<ul style="list-style-type: none"> • Provokes seizures in those taking anti-convulsion medications • Masks vitamin B12 deficiency
Vitamin B₁₂ (Cobalamin)	<ul style="list-style-type: none"> • Smooth, red, thickened tongue • Megaloblastic anemia, fatigue, weakness • Numbness and tingling of extremities 	<ul style="list-style-type: none"> • No toxicity risk as been determined
Vitamin C	<ul style="list-style-type: none"> • Impaired wound healing • Edema • Swollen, bleeding, and/or retracted gums or tooth loss; mottled teeth; enamel erosion • Lethargy and fatigue • Skin lesions • Small red or purplish pinpoint discolorations on the skin or mucous membranes (petechiae) • Darkened skin around the hair follicles • Corkscrew hair or unemerged, coiled hair 	<ul style="list-style-type: none"> • Acidic urine, nausea, and diarrhea • Impaired antioxidant-prooxidant balance in the body • Iron overload in patients with thalassemia or hemochromatosis
Iron	<ul style="list-style-type: none"> • Skin pallor • Pale conjunctiva • Fatigue • Thin, concave nails with raised edges 	<ul style="list-style-type: none"> • Nausea/vomiting/diarrhea • Difficulty breathing • Vertigo • Headache • Appetite loss

Vitamin or Mineral	Physical Signs of Deficiency	Vitamin Overdose Side Effects
		<ul style="list-style-type: none"> • Grey color to skin • High doses may interact with calcium and zinc
<p style="text-align: center;">Zinc</p>	<ul style="list-style-type: none"> • Delayed wound healing • Hair loss • Skin lesions • Eye lesions • Nasolabial seborrhea • Impaired growth • Appetite loss, taste changes 	<ul style="list-style-type: none"> • General body pain • Vomiting/diarrhea/nausea • Fever • Metallic taste • No urine output • Shortness of breath • High doses may interact with iron and copper
<p style="text-align: center;">Copper</p>	<ul style="list-style-type: none"> • Hair and skin depigmentation • Pallor 	<ul style="list-style-type: none"> • Stomach pain • Vomiting/diarrhea • Coughing • Yellow skin (jaundice) • Fever • Chills • Metallic taste • Soreness of muscles • No urine output
<p style="text-align: center;">Calcium</p>	<ul style="list-style-type: none"> • Muscle cramps • Convulsions • Lethargy • Abnormal heart rhythm • Decreased bone density 	<ul style="list-style-type: none"> • Constipation • Kidney stones • High doses may interact with iron and copper

COMPLEX CARBOHYDRATES

Type	Examples
Cereals and Grains	<p>Amaranth, Bran, Barley, Brown Rice, Bulgur, Buckwheat, Cornmeal, Couscous, Grits, Kasha, Kamut, Millet, Muesli, Oats, Quinoa, Rye, Semolina, 100% Whole Wheat, Wheat Germ, Wild Rice</p> <ul style="list-style-type: none"> ▪ When choosing a cereal, choose one that has less than 5 grams of sugar per serving and has at least 5 grams of fiber per serving.
Breads, Crackers, Pita, Tortilla, Pastas and Rice	<p>Look for 100% whole grain or stone-ground breads, crackers and pastas. Brown rice.</p>
Starchy Vegetables	<p>Corn, Peas, Plantains, Potato (sweet and white), yam, squash and yucca</p>
Legumes and Beans	<p>Soybeans (edamame), lentils, peas, beans (black, red, white, navy, pinto, kidney, lima)</p> <ul style="list-style-type: none"> ▪ soak dried beans overnight to reduce gas-production
Fruits	<p>Use fresh or frozen, without added sugar, syrup or cream. Peel fresh fruit. Healthy examples are: Peaches, apples, nectarines, plums, cherries, bananas, berries, pears, melons</p> <ul style="list-style-type: none"> ▪ Avoid fruit that is too fibrous or hard to chew such as coconut or the rind of an orange. ▪ Use caution when eating fruits with seeds or pits
Vegetables	<p>Use fresh or frozen without added sauces, cheeses or gravies. Healthy examples are: Broccoli and cauliflower florets, tender green beans, soft yellow squash, zucchini, soft</p>

Type	Examples
	eggplant, cucumbers, soft asparagus, Brussels sprouts, carrots, parsnip, rutabaga, beets, snow peas, onions, kale, collards, cabbage, mushrooms, peppers, tomatoes, herbs <ul style="list-style-type: none"> ▪ If using canned, choose low sodium and rinse under cool water ▪ Avoid tough stalks and vegetables that are too fibrous or hard to chew ▪ If experiencing gas, avoid onions, garlic, leeks, cabbage, broccoli, cauliflower and other gas producing vegetables

SUGAR AND SUGAR SUBSTITUTES

Limit SUGAR

Reasons to limit your intake of sugar:

- Avoid unnecessary EMPTY calories
- Reduce your risk of Dumping Syndrome

Choose products that are labeled “sugar-free.” They will have **less than ½ gram of sugar** per serving.

- Choose beverages with <5 grams of added sugar
- Choose solid foods with <15 grams of added sugar

Limits on added sugars per day for health:

- Men: 9 teaspoons (45 grams sugar)
- Women: 6 teaspoons (30 grams sugar)

Read food labels and ingredient lists. Ingredients are always listed from most to least by weight in the product. Avoid products that have sugar listed in the first 5 ingredients.

Other names for sugar are:

Corn Syrup	Molasses	Dextrose	Granulated Sugar
High Fructose Corn Syrup	Honey	Fructose	Confectioner’s Sugar
Corn Sweetener	Syrup	Glucose	Raw Sugar
Turbinado	Levulose	Sucrose	Brown Sugar

Avoid SUGAR ALCOHOLS

Sugar alcohols can cause gas and diarrhea and are not well tolerated

These are often referred to as “**Sugar Replacers**”

Sorbitol	Xylitol	Mannitol	Maltitol
Lactitol	Erythritol	Isomalt	

Artificial Sweeteners (Sugar Substitutes) are permitted

Examples of artificial sweeteners:

Generic Name	Brand Name	Acceptable Daily Intake	Mg/packet
Aspartame	NurtaSweet [®] , Equal [®]	40 mg/kg	40
Saccharin	Sweet'n Low [®]	5 mg/kg	40
Sucralose	Splenda [®]	15 mg/kg	11
Stevia	Herbal Sweetener	4 mg/kg	9
Acesulfame – K	Acesulfame Potassium	15 mg/kg	50

Information from NonNutritive Sweeteners:Current Use and Health Perspectives, A Scientific Statement from the AHA and the ADA

NUTRITION LABELS

What to look for on a Nutrition Fact Label after Bariatric Surgery

Choose foods that have **less than 5 grams of sugar per serving**

Choose foods that are **high in protein**. Aim for at least **60 grams of protein intake per day**

Look for foods that are good sources of **fiber** and have at least **3 grams per serving**

Choose food that is low fat and **contains less than 30% of calories from fat**

- Choose food that has **less than 10% of calories from saturated fat**

- Choose food that has less than 1% of trans fat

Choose foods that are low in cholesterol

Choose foods that have less than 300 mg of sodium per serving

Nutrition Facts	
Serving Size 1 cup (240mL)	
Servings Per Container 4	
Amount Per Serving	
Calories 90 Calories from Fat 15	
% Daily Value*	
Total Fat 2g	3%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 460mg	19%
Total Carb. 18g	6%
Dietary Fiber 2g	8%
Sugars 7g	
Protein 0g	
Vitamin A 35% • Vitamin C 0%	
Calcium 4% •	Iron 4%
*Percent Daily Values are based on a 2,000 calorie diet	

Be sure to read the ingredients list to determine what the food is mostly made of. It is important to choose foods that are nutrient dense, meaning they contain many healthy nutrients per calorie.

COOKING MEASUREMENTS AND TERMINOLOGY

Measurement Conversions

tsp = teaspoon

T = tablespoon

ml = milliliter

oz = ounce

g = gram

kg = kilogram

lb = pound

fl oz = fluid ounce

$\frac{1}{4}$ tsp = 1 ml $\frac{1}{2}$ tsp = 2 ml 1 tsp = 5 ml 1 T = 15 ml = 3 tsp 2 T = 30 ml = 6 tsp = 1 fl oz	$\frac{1}{4}$ cup = 60 ml or 2 oz $\frac{1}{2}$ cup = 120 ml or 4 oz $\frac{3}{4}$ cup = 180 ml or 6 oz 1 cup = 240 ml or 8 oz	1 oz = 30 g 2 oz = 60 g 4 oz = $\frac{1}{4}$ lb = 115 g 8 oz = $\frac{1}{2}$ lb = 230 g 12 oz = $\frac{3}{4}$ lb = 340 g 16 oz = 1 lb = 455 g 2.2 lbs = 1 kg
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Estimates of Standard Portions

Household Item	Approximate Size
Tip of thumb to first joint	1 teaspoon (tsp) = 5 ml
Golf ball	1 Tablespoon = 15 ml
Deck of playing card	3 ounces
Tennis ball	$\frac{2}{3}$ cup
Tube of lipstick	1 ounce
2 dominos	1 ounce
4 dice	1 ounce
CD disc	1 ounce "slice"
Match box	1 ounce

* These are approximate measurements. For accurate measurements use standard measuring utensils

Cooking Terminology

Bake: Cooking food uncovered in an oven with a small amount of liquid or fat (dry heat)

Barbecuing: A combination of covered grilling and smoking

Boiling/Blanching: Cooking food in hot water

Braising: Simmering food in a small amount of fluid

Broiling: Cooking food under a heat source, such as the broiler setting of an oven

Grilling: Cooking food over a heat source that is open to air (radiant heat)

Poaching: Cooking food in a fluid that is heated to a gentle simmer, but not boiled

Roasting: Cooking food in a hot oven and surrounded by hot, dry heat

Sautéing: Cooking food quickly in an open hot pan with a small amount of fat until lightly brown

Steaming: Cooking food with pressurized water vapor (moist heat)

HEALTHY RECIPE SUBSTITUTIONS

All-purpose (plain) flour	Whole-wheat flour for half of the called-for all-purpose flour in baked goods Note: Whole-wheat pastry flour is less dense and works well in softer products like cakes and muffins.
Bacon	Canadian bacon, turkey bacon, smoked turkey or lean prosciutto (Italian ham)
Butter, shortening or oil in baked goods	Applesauce or prune puree for half of the called-for butter, shortening or oil Note: To avoid dense, soggy or flat baked goods, don't substitute oil for butter or shortening.
Butter, margarine, shortening or oil to prevent sticking	Cooking spray or nonstick pans
Cream	Evaporated milk
Dry bread crumbs	Rolled oats or crushed bran cereal
Eggs	Two egg whites or 1/4 cup egg substitute for each whole egg, ½ tsp ground flax seed + ¼ cup boiling water mixed and cooled
Enriched pasta	Whole-wheat pasta
Evaporated milk	Evaporated skim milk
Fat and flour gravy	Cornstarch and broth
Fruit-flavored yogurt	Plain yogurt with fresh fruit slices
Full-fat cream cheese	Fat-free or low-fat cream cheese, Neufchatel or low-fat cottage cheese pureed until smooth
Full-fat sour cream	Fat-free or low-fat sour cream, plain fat-free or low-fat yogurt
Ground beef	Extra-lean or lean ground beef, chicken or turkey breast (make sure no poultry skin has been added to the product)
Heavy Creamed soups	Fat-free milk-based soups, half chicken broth and half light cream , half-n-half

Margarine in baked goods	Trans fat-free butter spreads or applesauce (i.e-Promise light spread, Smart Balance light spread, Brummel and Brown spread with yogurt, Benecol light spread)
Mayonnaise	Reduced-calorie mayonnaise-type salad dressing or reduced-calorie, reduced-fat mayonnaise, or plain low-fat/fat-free yogurt
Meat as the main ingredient	Three times as many vegetables as the meat on pizzas or in casseroles, soups and stews
Oil	Low fat yogurt or mayo
Oil-based marinades	Wine, balsamic vinegar, fruit juice or fat-free broth
Pastry crust	Graham cracker crust
Salad dressing	Fat-free or reduced-calorie dressing or flavored vinegars
Soy sauce	Sweet-and-sour sauce, hot mustard sauce or low-sodium soy sauce
Syrup	Pureed fruit, such as applesauce, or low-calorie, sugar-free syrup
Table salt	Herbs, spices, fruit juices or salt-free seasoning mixes or herb blends
Vegetable Oil	Non-stick spray
White bread	Whole-wheat bread
White rice	Brown rice, wild rice, bulgur or pearl barley
Whole milk	Reduced-fat or fat-free milk

EATING OUT

It may seem hard to eat out healthfully before or after bariatric surgery. But eating away from home or on the run can still be healthy, it just takes planning and preparation.

Healthy options buzzwords

Steamed
Garden fresh
Broiled
Baked
Roasted
Poached
Lightly sautéed or stir-fried

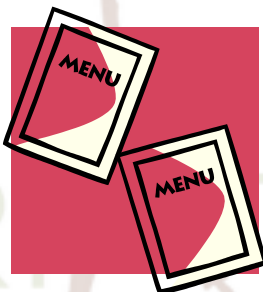
Foods with hidden calories and fat

Gravies
Sauces
Cream based soups
Creamy pasta sauces
Dressings
**Ask for all of these on the side

Healthy Protein Options

Lean meats-chicken, turkey, fish
Low fat yogurts
Egg white omelets
Beans
Low fat cheese
Low fat cottage cheese
Soy or tofu dish
Lean sausage or pork
Fish

Be prepared! You may want to have a protein option that you bring with you just in case there is not a healthy protein you can eat when you are away from home.



What meals should consist of:

Phase III-lean protein

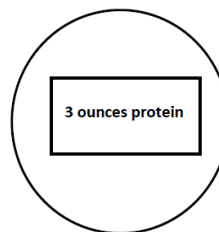
Phase IV-lean protein + veggie

Phase V-lean protein + veggie + whole grain starch or fruit

Meal ideas:

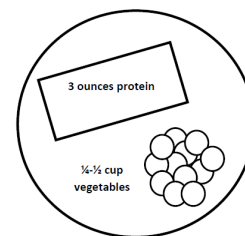
Phase III

Grilled salmon -OR-
Scrambled egg w/low fat mozzarella cheese + lean ham



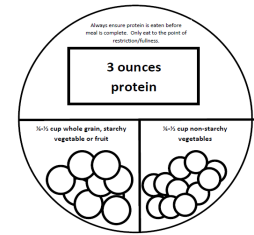
Phase IV

Grilled chicken with green beans -OR-
Egg white omelet with veggies & low fat mozzarella cheese



Phase V

Grilled shrimp taco with bell peppers + lettuce, on whole wheat tortilla -OR-
Low fat Greek yogurt parfait with mixed berries + granola



GROCERY / PANTRY LIST

The following are some recommendations of items to have on hand after bariatric surgery. Please remember these are only suggestions and you should always comply with the guidelines for the phase of the diet you are currently following.

Phase I

- Crystal Lite, decaf teas, Kool-aid sugar-free, flavored waters,
- Broth or bouillon*
- Jell-o (sugar-free)
- Popsicles (sugar-free)

Phase II

- Creamed soups* (strained)
- Dry milk (nonfat)
- Fudgsicles (sugar-free)
- Instant breakfast drink (no sugar added)
- Milk (skim, 1%, Lactaid)
- Protein drinks (low sugar type)
- Low sodium tomato Juice* or V 8* or Diet V8 Splash

Phase III

- Baby food (strained)
- Canned chicken, tuna, salmon (in water)
- Cottage cheese
- Eggs and Egg substitutes (liquid)
- Peanut butter (smooth, low sugar, whipped)
- Puddings (low sugar type)
- Refried beans* (fat free or vegetarian)
- Yogurt (Greek, low sugar)

Phase IV

- Frozen and low sodium canned veggies

Phase V

- Applesauce (no sugar added)
- Canned lite fruit (in own juice)
- Cream of wheat (plain)
- Low sugar smoothies



- Mashed potatoes (instant boxed or frozen low fat)
- Oatmeal (instant, plain)

* These foods are high in sodium.

Small plates and utensils



DUMPING SYNDROME AFTER GASTRIC BYPASS SURGERY

What is dumping syndrome?

After surgery, the size of your stomach is much smaller. It is reduced from the former football size down to the size of an egg. It cannot hold as much food and fluids as you ate at meals before surgery and it cannot regulate the food entering the intestine. When you eat a regular size meal now, the food in the stomach may be “dumped” too quickly into the bowel. In addition, when sugars that you have eaten are dumped into the bowel, they may act like sponges. They rapidly absorb water from the body in the intestine.

What are the signs of dumping syndrome?

A person with dumping syndrome begins to feel weak, dizzy and flushed about 30 minutes after eating. Cramping, pain, nausea, diarrhea or sweating may occur. Lying down for 30 to 60 minutes helps to slow down the stomach emptying and the signs begin to go away. If they do not, call a doctor or nurse.

How can I prevent dumping syndrome?

Avoid sugar and sweets.

After gastric reduction surgery, sugar and sweets tend to enter the bowel too quickly. This can lead to diarrhea.

- Limit combined intake of sugars and sugar alcohols to 5 grams **per meal**.
- Sugar substitutes such as Splenda, Sweet’N Low, Equal, Stevia and Sweet One may be used in place of sugar.

Eat small meals frequently.

Small meals will make you feel full and are easier to digest.

- Eat 3 small meals each day.
- Keep portion sizes small. For example, at meals eat 1 ounce of meat, ¼ cup of vegetables and ¼ cup of unsweetened fruit or starch.
- Eat slowly. Cut foods into pieces smaller than a dime. Chew food thoroughly.
- When you first begin to feel full, **stop eating**. Never force yourself to finish a meal. Let your stomach be the guide.

Keep meals dry.

- Do not drink with meals. Drinking fluids at meals has the same effect as eating large amounts of foods. It may cause dumping syndrome.
- Count soups, broths and foods that are liquid at room temperature such as ice and sugar-free Jell-o as part of your fluid at meals.
- Do not drink for about ½ hour before or ½ hour after eating meals.



- Throughout the day drink more than 4 cups water or other sugar-free, decaffeinated, noncarbonated beverages. This will help prevent dehydration which can occur easily and lead to serious problems.



TEN COMMANDMENTS OF WEIGHT LOSS SURGERY

1. **THOU SHALL NOT DRINK with thy meals.**

This means never! This is cheating...cheating yourself. It washes the food out of your pouch and allows you to eat more. This will slow and eventually stop your weight loss. PLUS you will not be getting all the benefits of the wise choices you have filled your little pouchy with.

2. **THOU SHALL EAT SLOWLY, very slowly.**

This is not a rule for the first few months post op. This rule is for the rest of your life. If you eat too quickly, you will surely stretch your pouch. Eat too quickly and you will learn the hard way...the nausea is stifling. And CHEW CHEW CHEW!! And when you think you are done, CHEW SOME MORE. Or your food will keep coming back to visit you.

3. **THOU SHALL TAKE THY VITAMINS.**

This surgery is a great tool for weight loss. But, as with all benefits, there are costs...and malnutrition is one of the potential prices of this surgery. Take a multivitamin supplement every day for the rest of your life and it is one you may never have to pay.

4. **THOU SHALL EAT ADEQUATE PROTEIN.**

5. **THOU SHALL EXERCISE.**

Just do SOMETHING. Even if it means starting off simply...take the stairs instead of the escalator or elevator. Park at the furthest spot in the parking lot. Carry your shopping basket instead of pushing the cart (on small shopping days of course...).

6. **THOU SHALL DRINK**

At least 64 ounces of water, everyday. It seems that some people have problems doing this. Use a water bottle and carry it with you everywhere. Sip all day long. Or refill a gallon jug and drain it every day. Do it in 2 pitchers. Do it with 2-32oz sport water bottles. Please note however, that if you are drinking coffee or tea with caffeine, you will have to compensate for the diuretic effects of the caffeine. Caffeine robs your body of water, therefore, you will not only be unable to count the coffee or tea, but you will have to drink an extra cups of fluid for every cup of regular coffee or caffeinated tea that you drink to compensate for the diuretic effects of the caffeine.

7. **THOU SHALL EAT WELL BALANCED MEALS.**

A doctor said it best: Protein first and foremost, then green/yellow vegetables, then fruit, then starches.

8. **THOU SHALL NOT EAT SUGAR, in ANY form....no candy!!!**

Treat yourself with some fresh fruit!!

9. **THOU SHALL NOT** modify these commandments to suit thy needs. It will not work. You will only defeat yourself physically.

10. **THOU SHALL LOVE THYSELF** and be happy with the body you have. Happiness comes from within. Be happy with who and what you are. Or you will defeat yourself mentally. Then the battle will be lost before it is even begun.

Author Unknown



2 Week Post-Operative Visit

Date: _____ Weight: _____ BMI: _____

Questions to ask:

Instructions/ Notes:

*** It is recommended that you schedule an appointment with your Primary Care Physician within 2 weeks after surgery.

*** Do not forget to get your blood work done approximately 2 weeks prior to your 3 month follow up visit.



3 Month Post-Operative Visit

Date: _____ Weight: _____ BMI: _____

Questions to ask:

Vitamin and Mineral Status

Vitamin/Mineral	Normal Value Range	My Level
B12	200-1000 pg/mL	
Thiamine	10-64 ng/mL	
Folate	5-25 ng/mL	
Vitamin A	30-95 ug/dL	
Vitamin D	30-75 ng/mL	
Iron	80-180 mcg/dL (males) 60-160 mcg/dL (females)	
Ferritin	15-300 ng/mL (male) 12-150 ng/mL (female)	
TIBC	250-460 mcg/dL	
% Saturation	20-50%	
Zinc	60-130 mcg/dL	
Calcium	8.5-10.1 mg/dL	
Prealbumin	16-35 mg/dL	

Instructions/ Notes:

*** It is recommended that you schedule an appointment with your Primary Care Physician every 3-4 months in the first year after surgery.

*** Do not forget to get your blood work done approximately 2 weeks prior to your 6 month follow up visit.

6 Month Post-Operative Visit

Date: _____ Weight: _____ BMI: _____

Questions to ask:

Vitamin and Mineral Status

Vitamin/Mineral	Normal Value Range	My Level
B12	200-1000 pg/mL	
Thiamine	10-64 ng/mL	
Folate	5-25 ng/mL	
Vitamin A	30-95 ug/dL	
Vitamin D	30-75 ng/mL	
Iron	80-180 mcg/dL (males) 60-160 mcg/dL (females)	
Ferritin	15-300 ng/mL (male) 12-150 ng/mL (female)	
TIBC	250-460 mcg/dL	
% Saturation	20-50%	
Zinc	60-130 mcg/dL	
Calcium	8.5-10.1 mg/dL	
Prealbumin	16-35 mg/dL	

Instructions/ Notes:

***** It is recommended that you schedule an appointment with your Primary Care Physician every 3-4 months in the first year after surgery.**

***** Do not forget to get your blood work done approximately 2 weeks prior to your 1 year follow up visit.**

1 Year Post-Operative Visit

Date: _____ Weight: _____ BMI: _____

Questions to ask:

Vitamin and Mineral Status

Vitamin/Mineral	Normal Value Range	My Level
B12	200-1000 pg/mL	
Thiamine	10-64 ng/mL	
Folate	5-25 ng/mL	
Vitamin A	30-95 ug/dL	
Vitamin D	30-75 ng/mL	
Iron	80-180 mcg/dL (males) 60-160 mcg/dL (females)	
Ferritin	15-300 ng/mL (male) 12-150 ng/mL (female)	
TIBC	250-460 mcg/dL	
% Saturation	20-50%	
Zinc	60-130 mcg/dL	
Calcium	8.5-10.1 mg/dL	
Prealbumin	16-35 mg/dL	

Instructions/ Notes:

***** It is recommended that you schedule an appointment with your bariatric surgeon once a year.**

***** Do not forget to get your blood work done approximately 2 weeks prior to your yearly follow up visits to assess your vitamin and mineral levels.**

TRACKING TOOL PHASE II

Fluid Goal: 64 ounces of fluid per day

Protein goal: 60 grams liquid protein per day



Exercise goal: Being physically active as able (light aerobic exercise, no lifting)



Medication goal: Take medication per physician prescription

TRACKING TOOL PHASE III

Fluid Goal: 64 ounces of fluid per day

Protein goal: 60-80 grams protein per day



Breakfast _____g protein

Snack _____g protein

Lunch _____g protein

Snack _____g protein

Dinner _____g protein

Total _____g protein

Fats goal: Use healthy fats-olive oil, avocados, olives



Exercise goal: Progress to 150 minutes per week with 2 days of resistance training

Aerobic exercise _____ minutes

Resistance training today? Yes No

Stretching today? Yes No



Medication goal: Take medication per physician prescription

Supplementation goal: Take recommended vitamin and mineral supplements per Dietitian



Multivitamin/mineral with or without iron



Total iron 36-45 mg



B-complex or thiamin 50-100 mg thiamin



B 12 500 mcg sublingual



Calcium 500 mg 3x per day

TRACKING TOOL PHASE IV

Fluid Goal: 64 ounces of fluid per day

Protein goal: 60-80 grams protein per day

Vegetable goal: 2-3 serving per day



Breakfast _____ g protein

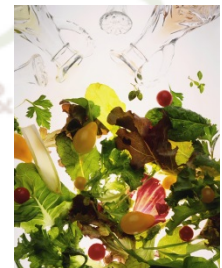
Snack _____ g protein

Lunch _____ g protein

Snack _____ g protein

Dinner _____ g protein

Total _____ g protein



Fats goal: Use healthy fats-olive oil, avocados, olives



Exercise goal: Progress to 150 minutes per week with 2 days of resistance training



Aerobic exercise _____ minutes
Resistance training today? Yes No
Stretching today? Yes No



Medication goal: Take medication per physician prescription

Supplementation goal: Take recommended vitamin and mineral supplements per Dietitian



Multivitamin/mineral with or without iron



Total iron 36-45 mg



B-complex or thiamin 50-100 mg thiamin



B 12 500 mcg sublingual



Calcium 500 mg 3x per day



TRACKING TOOL PHASE V

Fluid Goal: 64 ounces of fluid per day

Protein goal: 60-80 grams protein per day



Vegetable goal: 2-3 serving per day

Breakfast _____g protein

Snack _____g protein

Lunch _____g protein

Snack _____g protein

Dinner _____g protein

Total _____g protein



Fruit goal: 2-3 serving per day



Grains goal: 2-3 servings per day



Fats goal: Use healthy fats-olive oil, avocados, olives



Exercise goal: Progress to 150 minutes per week with 2 days of resistance training

Aerobic exercise _____ minutes

Resistance training today? Yes No

Stretching today? Yes No



Medication goal: Take medication per physician prescription

Supplementation goal: Take recommended vitamin and mineral supplements per Dietitian



Multivitamin/mineral
with or without iron



Total iron 36-45
mg



B-complex or
thiamin 50-100
mg thiamin



B 12 500 mcg
sublingual



Calcium 500 mg
3x per day



Helpful Websites:

- **www.asmbms.org** - The American Society for Metabolic and Bariatric Surgery is an organization dedicated to educating the public about this specialty. The site is filled with information and educational videos. Resources provided include definition of terms, procedures descriptions, a BMI calculator, and inspiring testimonials to the procedure.
- **http://theworldaccordingtoeggface.blogspot.com/** - This blog is run by a woman named Shelly who had great success with bariatric surgery. She had a 158 pound weight loss which helped her no longer need the eight prescription drugs that she was previously having to take. She realizes that healthy eating is imperative for successful bariatric surgery. She has dedicated this site to sharing creative ideas with bariatric patients. She has many creative recipes, product recommendations, and information about the surgery process. This fun blog offers a great outlet into the life of bariatric surgery success.
- **http://www.bariatricpal.com/** - This website provides an outlet to openly discuss concerns or thoughts about the bariatric surgery. The website consists of multiple forums where you can log in under a username. They have different forums for different surgery options and a general forum for all who have had weight loss surgery. You can ask questions, discuss concerns, share testimonials, and seek support through others going through a similar situation. They even have a buddies/mentor system that you can sign up for. This will pair you with someone also going through the process or who has had a previous success. It is very helpful to talk about concerns, gain support, and keep accountable.
- **www.obesityhelp.com** - This website provides a forum for obese individuals seeking bariatric surgery. The forums are divided by surgery types, but also by medical conditions that may be present. They also have forums dedicated to nutrition/food, exercise, and even for spouses of weight loss surgery patients. This diverse forum group is great to get information from other patients on a variety of need-to-know topics.
- **www.myfitnesspal.com** - *also available as an app on Android and Apple products*- This website is a great tool for tracking dietary intake. Similar to a food diary, you can track all of your daily intake. The best part is that it adds up the calorie and nutrition content for you. You can search thousands of products, or you can add your own recipes. This app is great either before or after your surgery takes place to accurately log your food intake.

Be aware that public information posted on online forums or blogs may not always be accurate. Ask your dietitian or doctor about any concerns involving the accuracy of any information that goes against what is written in this manual.

***** Please note: 360 Bariatrics or Dr. Patel are not affiliated with or derive any financial benefits from the promotion or sale of any of the above entities or sources.**

Books:

***Eating Well After Weight Loss Surgery – The Delicious Way to Eat in the Months and Years After Surgery* by Pat Levine, William B. Inabnet and Meredith Urban**

After having the lap band placed herself, Pat Levine compiled a collection of recipes that can be chopped or pureed to fit all stages of the bariatric diet.

***Exodus From Obesity: Guide to Long-Term Success After Weight Loss Surgery* by Paula F. Peck, RN**

This book is a great resource that includes information on different bariatric surgeries, lifestyle changes needed after surgery, tips for preventing binge eating after surgery, skills for eating out, identifications of out-of-control eating, how to change distorted self-image, how to improve relationships pre- and post- surgery, and how to increase your self-esteem. These tools are key to successful weight loss and improved emotional health.

***Gastric Bypass Surgery* by Mary McGowan, MD**

Written by a medical doctor who specializes in the field. She discusses the benefits and risks of weight loss surgery. This book also includes the answers to 150 most wondered questions about bariatrics.

***Getting to Goal and Staying There: Lessons from Successful Patients* by Terry Simpson, MD**

This is a workbook designed by a medical doctor who has been doing weight loss surgery since 1991. This guide will help you use the weight loss surgery as a tool for success.

***Recipes for Life After Bariatric Weight-Loss Surgery: Delicious Dishes for Nourishing the New You* by Margaret Furtado, MS, RD, LDN and Lynette Schulz**

Weight loss surgery is only the first step. What you put in your body post-operatively is even more important. This book includes recipes that are tailored to all the stages of the bariatric diet. It includes recipes, meal plans, and pantry lists.

***The Complete Idiot's Guide to Eating Well After Weight Loss Surgery* by Margaret Furtado, MS, RD, LDN and Joseph Ewing**

After your weight loss surgery, it is important to properly nourish your body while simultaneously keeping the weight off. This book contains tips on how to properly nourish your body post-surgery, how to overcome common challenges that are faced, and meal plans that include over 150 recipes.

***The Doctor's Guide to Weight Loss Surgery* by Louis Flancbaum, MD and Erica Manfred**

Trying to decide if weight loss surgery is right for you? This book includes why weight loss surgery is the safest treatment for patients with clinically severe or morbid obesity, how to determine if you're a candidate for surgery, what to look for when choosing a surgeon, how to choose the surgical procedure that's right for you, what to expect pre-, peri-, and post-surgery, common side effects, and diet/nutritional guidelines after surgery.

***The Emotional First + Aid Kit: A Practical Guide to Life After Bariatric Surgery, Second edition* by Cynthia L. Alexander, PsyD**

This book is key for helping through the emotional stress encountered before and after surgery. There are tips included on how to relieve stress without using food, modify unhealthy behavior, overcome hurdles in establishing a consistent exercise program, dealing with negative reactions by friends, family, and spouse to your weight loss, and how to prevent relapses after surgery.

***Tiny Bites: A Guide to Gastric surgery for the Morbidly Obese* by Sandra Beauchamp-Parke**

Written by a registered nurse, this book outlines realities of considering, undergoing and recovering from gastric surgery interwoven with stories from actual people who received this surgery.

***Weight Loss Surgery and Diet Program* by Sue Ekserci, RD**

This book includes information on weight loss surgery, nutritional needs before and after surgery, lifestyle changes, and many recipes.

***Why We Eat More Than We Think: Mindless Eating* by Brian Wansink, Ph.D.**

The director of the Cornell University Food and Brand Lab discusses many of his experiments that reveal interesting patterns in dietary habits. This book will revolutionize your awareness of how much, what, and why you are eating. The findings will astound you, and could help you make little changes to trick yourself into eating healthier.

Be aware that information published by other health care providers may contain advice contrary to what is indicated in this manual. It is always best to go with the advice provided through this manual by your doctor. Please consult your dietitian or doctor about any concerns involving the discrepancies information.

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NUTRITIONAL WELLNESS QUIZ

Please respond TRUE or False to the following questions

1. ____ The bariatric patient must commit to long-term lifestyle changes, including diet/exercise, which are keys to success after bariatric surgery.
2. ____ Gastric bypass surgery involves bypassing the small intestine, thus limiting the absorption of nutrients.
3. ____ With sleeve gastrectomy surgery, food intake is limited due to a smaller stomach size
4. ____ Vitamin/mineral supplements must be taken for life, after your surgery.
5. ____ Phase III may begin 2 weeks after surgery if Phase II is well-tolerated.
6. ____ You will stay on Phase IV until you have reached 75% of your EWL.
7. ____ It is important to eat a variety of healthy foods once on Phase V insuring protein needs are met by eating protein first
8. ____ It is important to wait 30 minutes before and after your food intake to drink fluids.
9. ____ Introduce only one new food at a time to ensure tolerance.
10. ____ Inadequate protein intake can lead to fatigue, loss of lean muscle mass and increase your risk of infection.



Name (First Initial, Last Name): _____

Date: _____

