



BARIATRIC SURGERY

Patient Booklet

TABLE OF CONTENTS

1. ABOUT US

Welcome	1.1
Our Hospital	1.1
Facility Maps	1.2

2. OVERVIEW

Bariatric Surgeries	2.1
---------------------	-----

3. PRE-SURGICAL PLANNING

Bariatric Pre-Surgical Checklist	3.1
Bariatric Support Group	3.2
Pre-Surgical Nutrition Guidelines & Meal Plans	3.2
Pre-Surgical Liquid Diet	3.5

4. POST-SURGICAL CARE

Bariatric Post-Surgical Checklist	4.1
Discharge Instructions	4.3
Medications	4.4
Possible Problems After Surgery	4.6

5. POST-SURGICAL DIET

Guidelines	5.1
Stage 1: Full Liquid Diet	5.2
Stage 2: Pureed Diet	5.4
Stage 3: Soft Foods Diet	5.6
Stage 4: General Diet	5.8
Dietary Tips	5.10
Vitamins & Minerals	5.11
Physical Activity	5.15
Recipes	5.16

6. IMPORTANT INFORMATION

Contact Information	6.1
---------------------	-----

Northwest Institute for Digestive Surgery

750 N. Syringa St., Ste. 205, Post Falls, ID 83854

P: (208) 262-0945 | F: (208) 415-0150

nwbariatrics.com



ABOUT US

Northwest Specialty Hospital

WELCOME

Welcome to the Northwest Institute for Digestive Surgery's Bariatric Program!

We are thrilled for you to join our program, and look forward to working with you throughout your weight loss journey.

Please keep this booklet with you and bring it to all of your appointments.

OUR HOSPITAL

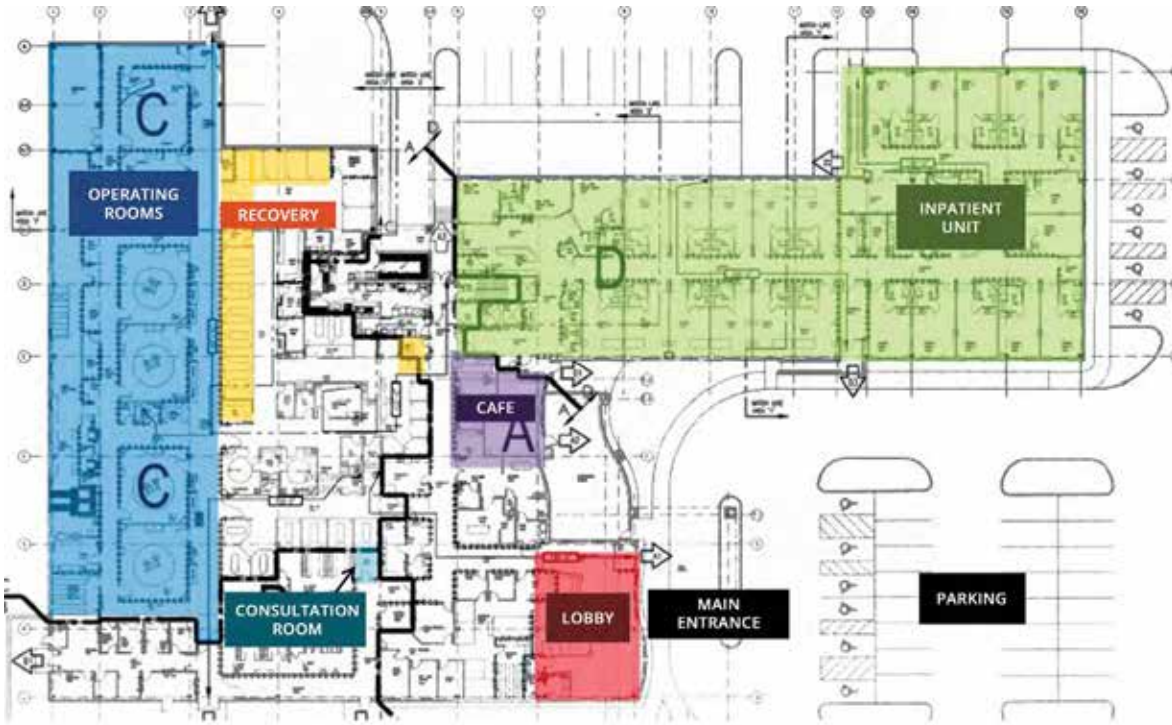
Northwest Specialty Hospital is owned and operated by a team of local physicians, with a shared mission of delivering patients superior care at an affordable rate. Our physicians have invested personally, professionally and financially in your care. They have dedicated their lives to creating a hospital that allows them to practice on their own terms and do what's best for patients. Instead of dealing with complicated bureaucratic issues of the big-hospital system, our physicians run Northwest Specialty Hospital in a way that allows them to focus on what matters most, delivering excellent patient-centered care.



NORTH IDAHO'S ONLY 5-STAR HOSPITAL

By the Centers for Medicare and Medicaid for Patient Satisfaction

FACILITY MAPS



NORTHWEST SPECIALTY HOSPITAL



NORTHWEST URGENT CARE

OVERVIEW

Bariatric Surgeries

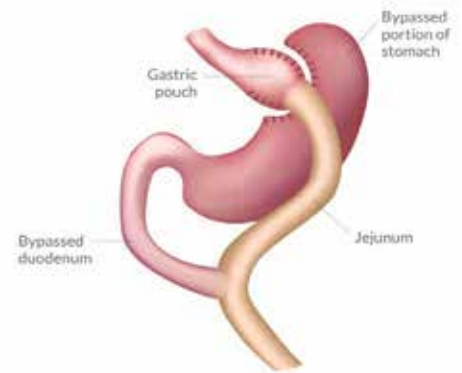
TYPES OF SURGERIES

At Northwest Bariatrics our surgeons perform two different primary bariatric surgeries: Roux-en-Y Gastric Bypass and Sleeve Gastrectomy.

ROUX-EN-Y GASTRIC BYPASS

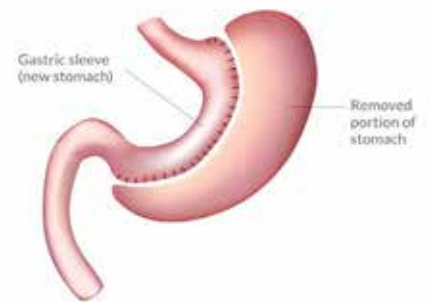
The gastric bypass continues to be the "gold standard" of bariatric surgery.

First, a small pouch that holds approximately 1oz in volume is created using the top portion of the stomach. Next, the first portion of the small intestine (duodenum) is bypassed and the next section of the small intestine (jejunum) is attached to the newly formed pouch or the new "stomach." Lastly, the portion of the intestine that was bypassed is then attached to the bottom portion of the small intestine to provide gastric acid and digestive enzymes to food moving through the gastrointestinal tract.



SLEEVE GASTRECTOMY

The sleeve gastrectomy, also called "gastric sleeve", is created by removing 80% of the stomach. What is left is a newly formed pouch or "stomach" that resembles the shape of a banana. No portion of the small intestine or gastrointestinal tract is bypassed in the sleeve gastrectomy.



HOW BARIATRIC SURGERY WORKS

Restrictive: By significantly altering the size of the stomach, weight loss is promoted by reducing the total amount of food that the stomach is able to hold.

Malabsorptive: (*Roux-en-Y Gastric Bypass Only*) By changing the structure of the gastrointestinal tract, individuals absorb less nutrients. This includes malabsorption of calories, protein, carbohydrates, fat, vitamins, and minerals.

Hormone Changes: Bariatric surgery also works by altering the hormones that are found in the gastrointestinal tract. The surgery decreases the hormones in the stomach that increase appetite. Most patients after surgery will have little to no appetite and get full very quickly after food intake.

PRE-SURGICAL PLANNING

Making Sure You are Ready for Surgery

Northwest Specialty Hospital

BARIATRIC PRE-SURGICAL CHECKLIST

- Consultation with Surgeon and/or Physician Assistant
- Consultation with Registered Dietitian/Bariatric Program Coordinator
- All general health screenings need to be up to date (colonoscopy, mammogram, pap smear, etc.)
- Mental health evaluation
- EGD/Endoscopy
- EKG - *usually performed the same day as EGD*
- Ultrasound (for those patients with a gallbladder) - *usually performed the same day as EGD*
- Lab tests before surgery (vitamin/mineral profile, lipids, A1c, CBC, CMP) - *usually drawn the same day as the EGD*
- Any additional testing required by surgeon (requirements vary among patients, ask our bariatric program coordinator if these apply to you)
 - Sleep study
 - Cardiac clearance
 - Tobacco screen
 - Other: _____
- Preoperative weight loss goal set at initial appointment: _____
- Attend **at least one** support group meeting (in-person or online)
- No tobacco use
- Stop birth control and hormone replacement therapy 1 month before surgery - *ask your surgeon for additional guidance*
- Preoperative appointment with surgeon in clinic within 1 month of surgery
- Medication review by pharmacist (*done at your preoperative appointment*): Our pharmacy department will review your current medications and provide recommendations for changes. These recommendations will also be sent to your Primary Care Provider. Please ensure your medication list on file is up to date.
 - Please contact your Primary Care Provider to receive new prescriptions and for continued medication management before and after bariatric surgery.

There may be additional requirements depending on your past medical history, risk factors, and insurance company. Please contact the program coordinator if you have questions about insurance requirements.

Any additional questions? We are here to help! Call our clinic at (208) 262-0945. ext 7 to speak with our bariatric surgery program coordinator.

BARIATRIC SUPPORT GROUP

The first Monday each month, 5:30pm–7:30pm

Northwest Institute for Digestive Surgery

750 N. Syringa St., Ste. 205, Post Falls, ID 83854

(208) 262-0945

Requirement: You must come to support group once before surgery (in-person or online).

Please follow the instructions provided by the program social worker to join the support group online.

PRE-SURGICAL NUTRITION GUIDELINES & MEAL PLANS

START DOING NOW

- Small sips of fluids (no gulping/guzzling)
- Avoid caffeinated beverages (switch to decaf before surgery)
- Avoid high calorie liquids (soda, juice, energy drinks, etc.)
- Avoid carbonated beverages
- Avoid alcohol
- Practice mindfulness and eat meals slowly
- Physical activity: aim for 30 minutes, 5-6 days per week
- Structured meals/snacks
- Take 1 multivitamin daily if you do not already do so
- Separate food and fluid consumption (no drinking fluids 15 minutes before and 15-30 minutes after each meal/snack)
- Consume meals and snacks without distractions (TV, phone, computer, etc.)

To prepare you for your consultation with the bariatric dietitian, please download the Baritastic app on your smart phone. This app will help you with tracking calorie, protein, and water consumption before and after surgery.

PRE-SURGICAL PLANNING (CONT.)

Northwest Specialty Hospital

CALORIE SPECIFIC MEAL PLANS

MEAL PLAN: 1000-1200 CALORIES

BREAKFAST: 200 CALORIES
High Protein Shake (Examples: Premier Protein, Equate, Atkins, Ensure Max Protein)
SNACK (CHOOSE ONE): 150-200 CALORIES
Small apple + string cheese
6-8oz yogurt
20 almonds
3oz lean meat wrapped around veggies
HB egg + 1 cup strawberries
1/2 cup cottage cheese + 1/2 cup fruit
1 1/2 Tbsp peanut butter + 1 cup celery
1 cup soy milk + 1/2 cup blueberries
LUNCH: 200 CALORIES
High Protein Shake (same as previous)
SNACK: 150-200 CALORIES
Choose from list above
DINNER: 300-400 CALORIES
3-4oz lean protein
2 cups non-starchy vegetables
1/2 cup starchy vegetables or whole grains

MEAL PLAN: 1300-1500 CALORIES

BREAKFAST: 200 CALORIES
High Protein Shake (Examples: Premier Protein, Equate, Atkins, Ensure Max Protein)
SNACK (CHOOSE ONE): 250 CALORIES
Small apple + string cheese
6-8oz yogurt
20 almonds
3oz lean meat wrapped around veggies
HB egg + 1 cup strawberries
1/2 cup cottage cheese + 1/2 cup fruit
1 1/2 Tbsp peanut butter + 1 cup celery
1 cup soy milk + 1/2 cup blueberries
LUNCH: 200 CALORIES
High Protein Shake (same as previous)
SNACK: 250 CALORIES
Choose from list above
DINNER: 400-500 CALORIES
3-4oz lean protein
2 cups non-starchy vegetables
1/2 cup starchy vegetables or whole grains

**Utilize the Baritastic App on your smartphone to track calories.*

Exercise: Physical activity will help you achieve your weight loss goals. Start to work towards 30 minutes of physical activity 5-6 days weekly. Try to find a form of physical activity you enjoy. If you enjoy it, you will do it for the rest of your life!

PRE-SURGICAL PLANNING (CONT.)



CALORIE SPECIFIC MEAL PLANS

MEAL PLAN: 1600-1800 CALORIES

BREAKFAST: ~360 CALORIES
High protein shake (examples: Premier Protein, Equate, Atkins, Ensure Max Protein)
Small piece of fruit
SNACK (CHOOSE ONE): 200-250 CALORIES
Small apple + string cheese
6-8oz yogurt + 1 cup grapes
20 almonds + 2 Tbsp hummus + 1 cup carrots
4 slices deli meat wrapped around bell pepper slices + 1 banana
HB egg + 1 cup strawberries
1/2 cup cottage cheese + 1/2 cup fruit
2 Tbsp peanut butter + 1 cup celery
1/2 cup low fat milk + 1 cup blueberries + 3/4 cup wheat bran cereal
LUNCH: ~360 CALORIES
High protein shake (same as previous)
1 serving of vegetables
SNACK: 200-250 CALORIES
Choose from list above
DINNER: 400-550 CALORIES
4-5oz lean protein
2 cups non-starchy vegetables
1/2 cup starchy vegetables or whole grains

MEAL PLAN: 1800-2000 CALORIES

BREAKFAST: 400-450 CALORIES
High protein shake (examples: Premier Protein, Equate, Atkins, Ensure Max Protein)
1 serving of whole grain
Small piece of fruit
SNACK (CHOOSE ONE): ~250 CALORIES
Small apple + string cheese
6-8oz yogurt + 1 cup grapes
20 almonds + 2 Tbsp hummus + 1 cup carrots
4 slices deli meat wrapped around bell pepper slices + 1 banana
HB egg + 1 cup strawberries
1/2 cup cottage cheese + 1/2 cup fruit
2 Tbsp peanut butter + 1 cup celery
1/2 cup low fat milk + 1 cup blueberries + 3/4 cup wheat bran cereal
LUNCH: 400-450 CALORIES
High protein shake (same as previous)
1 serving of whole grains, beans, legumes, or nuts
1 serving of vegetables
SNACK: ~250 CALORIES
Choose from list above
DINNER: 400-550 CALORIES
4-5oz lean protein
2 cups non-starchy vegetables
1/2 cup starchy vegetables or whole grains

PRE-SURGICAL PLANNING (CONT.)

Northwest Specialty Hospital

PRE-SURGICAL LIQUID DIET

All patients are required to start a liquid diet **2 weeks** before their surgery date. Following this diet will help reduce glycogen stores in your liver, therefore reducing the size of your liver making the procedure safer, easier to perform, and thus more successful.

LIQUID DIET GUIDELINES

(No more than 50g of carbohydrates/day)

- 800-1000 calories/day
- At least 80g protein/day (women)
- At least 100g protein/day (men)
- Low carbohydrate (no more than 50g carbohydrates/day)
- At least 48oz of calorie free clear liquids per day

Tip: In order to boost calories without increasing carbohydrate intake, you may need to blend 1 tsp of healthy oil with your protein shakes. Examples are coconut oil or flaxseed oil.

IF YOU ARE ON INSULIN OR A SULFONYLUREA MEDICATION: Please check in with your primary care provider prior to starting any low carbohydrate diet.

Your liquid diet starts: _____

If you consume caffeine: It is a good idea to start weaning yourself off of caffeine during this time to avoid headaches after surgery.

EXAMPLE DIET

Premier Protein Shake blended with 1 tsp coconut oil	30g protein, 5g carbohydrates, 210 calories
8 ounces 2% dairy milk	8g protein, 12g carbohydrates, 124 calories
Protein powder by UNJURY blended with water (chicken soup flavored)	21g protein, 1g carbohydrates, 90 calories
Premier Protein Shake blended with 1 tsp coconut oil	30g protein, 5g carbohydrates, 210 calories
1 cup red pepper & tomato soup blended with 1 tsp avocado oil	6g protein, 19g carbohydrates, 170 calories
64oz calorie free clear liquids (throughout the day)	0g protein, 0g carbohydrates, 0 calories
TOTAL:	95G PROTEIN, 42G CARBOHYDRATES, 804 CALORIES

POST-SURGICAL CARE

The Recovery Process

Northwest Specialty Hospital

BARIATRIC POST-SURGICAL CHECKLIST

AT DISCHARGE

- Start post-surgical medications per doctor's orders and follow discharge instructions
- Continue Stage 1: Full Liquid bariatric diet (page 5.2)
- Daily walking as tolerated (at least 4 times daily)

1-2 WEEKS AFTER SURGERY

- Follow up with primary care provider

3 WEEKS AFTER SURGERY

- Visit with Physician Assistant in the clinic (you will schedule this before discharging from the hospital)
- Start vitamin and mineral supplementation (page 5.11)
- Attend weekly support groups
- Advance diet to Stage 2: Pureed Diet (page 5.4)

4 WEEKS AFTER SURGERY

- Slowly advance diet to Stage 3: Soft Foods Diet as tolerated (page 5.6)

6 WEEKS AFTER SURGERY

- Visit with Physician Assistant and Dietitian in the clinic
- Slowly advance diet to Stage 4: General Diet as tolerated (page 5.8)
- Attend weekly support groups
- Continue physical activity and start including strength training as tolerated

3 MONTHS AFTER SURGERY

- Visit with Dietitian and Social Worker in the clinic
- Attend weekly support groups
- Continue physical activity (cardio + strength exercises) as tolerated
- Follow up with primary care provider

POST-SURGICAL CHECKLIST (CONT.)

Northwest Specialty Hospital

6 MONTHS AFTER SURGERY

- Visit with Dietitian in the clinic
- LABS:** 6 month post-surgical labs (ordered at your clinic visit)
- Continue physical activity (cardio + strength exercises) as tolerated
- Attend weekly support groups

9 MONTHS AFTER SURGERY

- Visit with Dietitian in the clinic
- Continue physical activity (cardio + strength exercises) as tolerated
- Attend weekly support groups

12 MONTHS AFTER SURGERY

- Visit with Physician Assistant and Dietitian in the clinic
- LABS:** 12 month post-surgical labs (ordered at your clinic visit)
- Continue physical activity (cardio + strength exercises) as tolerated
- Attend weekly support groups

18 MONTHS AFTER SURGERY

- Visit with Dietitian in the clinic
- Continue physical activity (cardio + strength exercises) as tolerated
- Attend weekly support groups

After the first 18 months, we want to see you in the clinic **once yearly for an annual check in to ensure weight maintenance and to get your labs done.*

**If you are experiencing weight re-gain, have questions or concerns pertaining to your surgery, please schedule an appointment sooner.*

DISCHARGE INSTRUCTIONS

Northwest Specialty Hospital

POST-SURGICAL DISCHARGE INSTRUCTIONS

ACTIVITY

- No lifting greater than 10-20 pounds
- Continue use of Incentive Spirometry with cough every hour while awake for the next 7 days
- May shower as usual, no baths or hot tubs
- Frequent walking with a minimum of 4 times a day

DIET

- Follow the dietary guidelines provided to you from NWIDS (page 5.1)
- Caffeinated beverages, carbonated beverages, and alcohol are discouraged. They can irritate the small gastric pouch. Small amounts of weak decaf tea, herbal tea, or decaf coffee are okay
- If you have diabetes, monitor your blood sugars twice daily and log your results. For blood sugars consecutively >200 or <80 please call the office

INCISION CARE

- If you have surgical glue, sutures, or staples, it is acceptable to get them wet. Remove dressings prior to shower then pat dry when done. You may cover area with 4x4s and tape to prevent clothing from rubbing or catching, but it is acceptable to leave incision open to air otherwise.
- DO NOT pick at glue. DO NOT apply any ointments, creams, lotions, or alcohol to incision.
- DO NOT allow glue to soak in warm water for long periods of time. Showers only.
- Wash your hands before touching incision, sutures, or staples

CONTACT YOUR PHYSICIAN

- If you are experiencing persistent nausea or vomiting
- If you have severe abdominal pain, distention, and/or bloody stools
- If you are running temperatures >102 degrees. Take your temperature at least twice with a few hours separation, as temperature tends to fluctuate, especially after surgery
- If there is increased pain, redness, or drainage to your incision site
- If you are experiencing chest pain or difficulty breathing
- If you have calf pain, tenderness, swelling, and/or warmth

POST-SURGICAL DISCHARGE INSTRUCTIONS (CONT.)

MEDICATION

- Pain medication may cause sleepiness. Do not drink alcohol while taking prescription pain medication or participate in activities that require alertness
- More than likely your pain medication has Tylenol (acetaminophen) in it. Do not take additional Tylenol until you have consulted with your physician first
- Pain medication can cause constipation so be sure to drink plenty of fluids
 - A medication list has been provided to you for additional instructions on all your home medications and any new medications prescribed
 - DO NOT take NSAIDs (ibuprofen, Motrin, Aleve, etc.)

MEDICATIONS AFTER YOUR BARIATRIC SURGERY

Prior to your surgery, our pharmacy will provide you a list of your current medications and their recommended conversions for after surgery. This list will also be sent to your primary care provider prior to surgery, and you will need to contact your provider's office for medication management after surgery.

There are a few important points to remember about taking medications after your bariatric surgery. Following these guidelines will help you recover and keep you healthy!

TABLET/CAPSULE SIZE

Tablets and capsules larger than a hole-punch should not be swallowed whole.

After your surgery, the opening of your stomach is smaller due to natural inflammation caused by surgery. For the first 4-6 weeks after your surgery, the top opening of your stomach is constricted because of the swelling/inflammation. Tablets or capsules larger than a hole-punch can easily become lodged, which can result in a return to surgery. Be sure to cut or crush larger tablets and open capsules if the medications are able to do so. If it isn't clear which medications you can crush, open, or chew – be sure to ask a pharmacist for recommendations. Some medications should never be altered before swallowing.

In many cases, liquid formulations can be used to make taking medications easier.

MEDICATIONS (CONT.)

Northwest Specialty Hospital

MEDICATION SIDE EFFECTS

Some medications pose a higher risk of side effects after bariatric surgery. Certain medications have higher risks of side effects when the size of your stomach is decreased.

Non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen (Advil), naproxen (Aleve) and aspirin can result in stomach ulcers by decreasing the natural protective lining in your stomach. It is best to avoid these medications altogether and use alternative medications for pain relief.

A safe, over-the-counter alternative for pain is acetaminophen (Tylenol), and most formulations can be crushed. If you need another option, please ask your pharmacist about other pain medications.

Another category of medications that can cause stomach ulcers after bariatric surgery are bisphosphonates, which are responsible for increasing bone density. The medications include alendronate (Fosamax), ibandronate (Boniva) and risedronate (Actonel).

EXTENDED RELEASE FORMULATIONS: (ROUX-EN-Y PATIENTS ONLY)

Extended release medications may have decreased effectiveness in patients that have undergone a Roux-en-Y gastric bypass. Some medications labeled “XR”, “ER”, “EC”, or “SR”, may have decreased absorption into your system because the main area in which these medications are absorbed has been bypassed by the surgery. Very little to none of the medication will be absorbed, and will require an immediate release of liquid formulation to replace the extended release medication. Please consult your primary care physician about switching these medications to an immediate release formulation.

Remember that it is important to check with a pharmacist or your physician before introducing any new medications to your stomach after a Roux-en-Y gastric bypass surgery.

BIRTH CONTROL & HORMONE THERAPY

Patients need to remain off of oral contraceptives and hormone therapy until their 3 week follow up at the clinic to decrease the risk of blood clots. At this appointment, patients may ask to resume these medications. It is strongly encouraged to utilize an alternative form of birth control during this time.

Our pharmacists at Northwest Specialty Hospital will visit you in the hospital before discharge. If you have any additional questions about your medications, please be prepared to ask any questions you may have at that time.

POSSIBLE PROBLEMS AFTER SURGERY

If you are having a non-emergent issue after surgery, please take the following steps:

1. If it is an emergency, dial 911.
2. Call Northwest Institute for Digestive Surgery (Monday-Friday, 8:00am-4:00pm) at (208) 262-0945. On weekends (Saturday, Sunday) call Northwest Specialty Hospital at (208) 262-2300.

OR

3. Visit Northwest Specialty Hospital's Urgent Care Clinic (Monday-Friday, 8:00am-6:00pm, Saturday-Sunday, 8:00am-4:00pm).

If at all possible, do not go to another medical facility to ensure continuation of care with our surgeons here at Northwest Specialty Hospital.

DEHYDRATION

Dehydration is the most common reason for hospital re-admission after bariatric surgery. Most patients find it difficult to consume enough fluids after surgery due to a smaller stomach and increased feelings of fullness. Carry a water bottle with you wherever you go and sip on fluids throughout the day, even if you aren't thirsty. Aim for 64oz of calorie free liquids daily.

DUMPING SYNDROME

Dumping syndrome is also called rapid gastric emptying. It is characterized by food (especially sugar) emptying too quickly into the small intestine. This can happen 10-30 minutes after meals or late dumping syndrome can happen 1-3 hours after a meal. It is usually caused by consuming too many simple sugars or too much food in general. In some cases, it can be caused by consuming foods high in fat. Symptoms of dumping syndrome (10-30 minutes after meals) include: abdominal cramping, diarrhea, nausea, dizziness, and rapid heart rate. To avoid dumping syndrome, limit the consumption of high sugar foods and balance the grams of protein and carbohydrates to create a 1:1-2 ratio (ex. 15g protein:15-30g carbohydrates). Late dumping syndrome (1-3 hours after a meal) is caused by a rapid release of insulin in response to a high sugar/carbohydrate food. Symptoms include: sweating, hunger, fatigue and weakness. Avoid late dumping syndrome by limiting consumption of foods high in carbohydrates/sugar and low in protein. Use the same ratio of protein:carbohydrates as recommended above.

POSSIBLE PROBLEMS (CONT.)

Northwest Specialty Hospital

DIARRHEA

Diarrhea can be caused by food intolerances or dumping syndrome.

When experiencing diarrhea:

- Make sure you are drinking enough fluids (at least 64oz daily) and staying hydrated
- Eat small, frequent meals
- Consider adding a probiotic if it is reoccurring
- Avoid high sugar, high fat foods
- Avoid offending foods that exacerbate symptoms

CONSTIPATION

Constipation can be an issue due to pain medication and/or lack of fiber in the diet after surgery. After surgery, patients who are greater than 3 weeks post-op and are having issues with tolerating high fiber foods can add Metamucil or Benefiber to their daily regimen (powdered form, mixed with water). Drinking adequate fluids and regular physical activity can also relieve constipation. Patients who are within the first 3 weeks after their surgery, refer to your surgery packet for relieving constipation.

STRICTURE

Clinical signs include difficulty swallowing or painful swallowing. Strictures can be treated with endoscopic dilation. The best way to avoid food getting stuck in the opening of the stomach is to take small bites and chew foods very well before swallowing. If you cannot eat or are having issues keeping food down, you could have a stricture and will need to consult your physician.

NAUSEA & VOMITING

Nausea and vomiting can be caused by food intolerances, progressing the diet too quickly, eating too fast, or eating too much food. Avoid nausea and vomiting by following the post-operative diet progression, slowing down at mealtimes, and avoiding offending foods.

WEIGHT LOSS PLATEAU

It is not unusual to experience weight loss plateaus periodically after bariatric surgery. Make sure you are monitoring your weight. A weight loss plateau is usually not concerning unless it lasts more than 4 weeks. Assess your current diet and physical activity regimen. You may need to increase/decrease calories, increase protein, or increase frequency or intensity of exercise. If you get into a weight loss plateau that lasts more than 3-4 weeks, contact the dietitian at the clinic.

POSSIBLE PROBLEMS (CONT.)

Northwest Specialty Hospital

HAIR LOSS

Hair loss is a side effect of rapid weight loss and in some cases cannot be prevented. However, some patients will lose hair as a result of not consuming enough protein or not taking their vitamin and mineral supplements. Research does not support the claim that additional Biotin supplementation can prevent hair loss or promote hair re-growth, unless a Biotin deficiency is present. Some patients choose to supplement with Biotin anyway, and we recommend not exceeding 1000mcg (1mg) per day of Biotin supplementation. Always keep your primary care provider aware of which vitamin and mineral supplements you are taking.

ULCERS

Patients can prevent ulcers after surgery by avoiding caffeine, alcohol, tobacco use, and NSAIDs (ibuprofen, Advil, Aleve, aspirin, etc.).

ANASTOMOTIC LEAK

Leaking from a staple line in the stomach or small intestine is rare, but can be a serious, life-threatening problem if it occurs. Clinical signs of a leak include tachycardia and fevers.

DVT/PE (DEEP VEIN THROMBOSIS/PULMONARY EMBOLISM)

There are many risk factors for development of a blood clot, including surgery, obesity, and immobility. Leg swelling, pain, and redness can be signs of blood clots in the legs, and difficulty breathing can be a sign of a blood clot in the lungs (pulmonary embolism).

WOUND INFECTION

Any surgical wound does have a risk of becoming infected if not taken care of properly. Pain, swelling, redness, and purulent drainage from an incision site may be an indication of a wound infection.

PREGNANCY AFTER BARIATRIC SURGERY

It is recommended that bariatric patients wait 12-18 months after surgery to become pregnant. It's important to realize that **fertility may increase with weight loss** and during this time it is encouraged that patients utilize a form of birth control to avoid pregnancy. For more information about pregnancy after bariatric surgery please speak to a healthcare professional at Northwest Bariatrics.

TRAVELING AFTER SURGERY

Here at Northwest Bariatrics we have a strict **no travel policy for 90 days following your surgery**. This is to ensure continuation of care with our surgeons if our patients do experience a post-operative complication.

POST-SURGICAL DIET

Nutrition After Surgery

Northwest Specialty Hospital

POST-SURGICAL NUTRITION GUIDELINES

START DOING NOW

- Small sips of fluids (no gulping/guzzling, no drinking through straws)
- Avoid caffeinated beverages for 8 weeks after surgery
- Avoid high calorie liquids (soda, juice, energy drinks, etc.)
- Avoid carbonated beverages
- Avoid alcohol
- NO NSAIDs (Non-Steroidal Anti-Inflammatory Drugs: ibuprofen, Motrin, Aleve, etc.)
- Practice mindfulness and eat meals slowly
- Structured meals/snacks (no grazing or mindless eating)
- Separate food and fluid consumption (no drinking fluids 15 minutes before and 15-30 minutes after each meal/snack)
- Consume meals and snacks without distractions (TV, phone, computer, etc.)

POST-SURGICAL DIET PROGRESSION

The post-surgical diet progression is very important.

- It promotes healing. Be patient and allow your gastrointestinal tract time to heal.
- It guards against leaks that can occur around internal stitches.
- It allows you time to learn to manage your pouch.

It is very important that you do not progress to the next stage earlier than what is outlined in the following pages.

STAGE 1: FULL LIQUID DIET

Northwest Specialty Hospital

STAGE 1: 0-2 WEEKS AFTER SURGERY

FULL LIQUID DIET

- **#1 PRIORITY:** 48-64oz of calorie free clear liquids daily (staying hydrated)
- **#2 PRIORITY:** 60-80g protein (women) or 80-100g protein (men)
- Focus on water and high protein liquids during this stage. It's not unusual to only get 500-600 calories during this stage.

Make sure to drink fluids very slowly (no gulping). Do not consume more than 8oz of fluids in 1 hour.

LIQUIDS RECOMMENDED

- Protein shakes (Optifit, Premier, Ensure Max, Atkins, Vega, Orgain)
- Unjury high protein broth
- Water
- Broth
- Sugar free Gatorade/Powerade
- Crystal Light
- Sugar free jello

FOODS NOT RECOMMENDED

- Sugar sweetened liquids
- Fruits/vegetables
- Breads, rice, pasta
- Meats, beans, lentils
- Nuts, seeds, popcorn
- Caffeinated beverages
- Carbonated beverages
- Alcohol
- Anything that requires chewing

STAGE 1: FULL LIQUID DIET (CONT.)

Northwest Specialty Hospital

TWO DAY EXAMPLE MENU

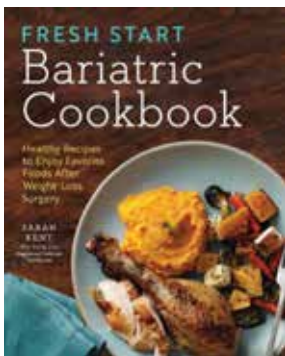
DAY ONE: FULL LIQUID DIET

BREAKFAST: 102 CALORIES, 14G PROTEIN
Iced Decaffeinated Coffee Protein Shake (from bariatric cookbook pg. 31)
LUNCH: 160 CALORIES, 30G PROTEIN
Premier Protein Shake
SNACK: 185 CALORIES, 24G PROTEIN
Chocolate Peanut Butter Smoothie (from bariatric cookbook pg. 37)
DINNER: 80 CALORIES, 15G PROTEIN
1/2 Premier Protein Shake
TOTAL CALORIES: 527 CALORIES, 83G PROTEIN

DAY TWO: FULL LIQUID DIET

BREAKFAST: 135 CALORIES, 18G PROTEIN
Mint Dream Protein Shake (from bariatric cookbook pg. 33)
SNACK: 80 CALORIES, 15G PROTEIN
1/2 Premier Protein Shake
LUNCH: 170 CALORIES, 10G PROTEIN
1 cup chicken broth + 1/4 cup powdered milk (blended, then slowly heated until warm) *Do not boil*
SNACK: 80 CALORIES, 15G PROTEIN
1/2 Premier Protein Shake
DINNER: 145 CALORIES, 20G PROTEIN
1/4-1/2 cup liquefied soup + 1 scoop unflavored protein powder
TOTAL CALORIES: 610 CALORIES, 78G PROTEIN

Drink a minimum of 48oz of calorie free liquids daily (goal is 64oz/day). Aim for 30 minutes of walking every day.



Utilize this cookbook for high protein full liquid recipes, available on Amazon.

Fresh Start Bariatric Cookbook

By: Sarah Kent, MS, RDN, CD

STAGE 2: PUREED DIET

Northwest Specialty Hospital

STAGE 2: 3 WEEKS AFTER SURGERY

PUREED DIET

At week 3 after your surgery you may transition to a pureed foods diet, food should be **smooth and free of chunks**. Introduce foods one at a time to assess tolerance.

Aim for 500-600 calories during this stage and 60-80g protein (women) or 80-100g protein (men). Include 4-5 small meals throughout the day that are about $\frac{1}{4}$ cup total food per meal. **Do not snack between meals.**

Continue to meet your fluids needs and stay hydrated, drink 48-64oz of calorie free clear liquids daily. Continue to consume foods very slowly and do not drink water with meals/snacks.

FOODS RECOMMENDED

- Fruit smoothies (blended until very smooth)
- Greek yogurt
- Pureed soups
- Applesauce
- Cottage cheese
- Scrambled eggs
- Cream of wheat/rice (with extra milk)
- Fat free refried beans
- Protein shakes
- Anything allowed on Stage 1 Diet

FOODS NOT RECOMMENDED

- Fruits/vegetables (unless pureed in a blender)
- Breads, rice, pasta
- Meats, beans, lentils (unless pureed in a blender)
- Nuts, seeds, popcorn (creamy nut butters are okay)
- Caffeinated beverages
- Carbonated beverages
- Alcohol
- Anything that requires chewing

STAGE 2: PUREED DIET (CONT.)

Northwest Specialty Hospital

TWO DAY EXAMPLE MENU

DAY ONE: PUREED DIET

BREAKFAST: 171 CALORIES, 21G PROTEIN
1/2 Premier Protein Shake mixed with 1/2 cup decaf coffee
1 scrambled egg
SNACK: 70 CALORIES, 7G PROTEIN
1/4 cup low fat cottage cheese mixed with 1/8 cup mashed canned pears*
LUNCH: 170 CALORIES, 16G PROTEIN
1/4 cup fat free refried beans with 1/2 scoop Unjury protein powder and 2 Tbsp cheddar cheese, melted
SNACK: 65 CALORIES, 10G PROTEIN
1/4 cup unsweetened applesauce mixed with 1/2 scoop Unjury protein powder
DINNER: 84 CALORIES, 16G PROTEIN
1/4 cup Lemon and Dill Tuna Salad (from bariatric cookbook pg. 43)
TOTAL CALORIES: 560 CALORIES, 70G PROTEIN

DAY TWO: PUREED DIET

BREAKFAST: 160 CALORIES, 30G PROTEIN
1 Premier Protein Shake mixed with 1/2-3/4 cup decaf coffee
SNACK: 140 CALORIES, 19G PROTEIN
1/2 container plain Greek yogurt mixed with 1 Tbsp powdered peanut butter, 1/4 mashed banana
LUNCH: 84 CALORIES, 5G PROTEIN
1/3 cup Vegetable Lentil Soup, blended (from bariatric cookbook pg. 88)
DINNER: 100 CALORIES, 10G PROTEIN
1/4 cup pureed canned soup + 1/2 scoop unflavored protein powder
SNACK: 65 CALORIES, 4G PROTEIN
4oz 2% milk or soy milk
TOTAL CALORIES: 549 CALORIES, 68G PROTEIN

Drink a minimum of 48oz of calorie free liquids daily (goal is 64oz/day). Aim for 30 minutes of walking every day.

**Make sure canned fruits are canned in water and no sugar added.*

STAGE 3: SOFT FOODS DIET

Northwest Specialty Hospital

STAGE 3: 4-6 WEEKS AFTER SURGERY

SOFT FOODS DIET

At week 4 after your surgery you may transition to a soft foods diet, food should be **very soft and chewed until a pureed consistency before swallowing**. Introduce foods one at a time to assess tolerance. If solid foods are causing nausea and vomiting, go back to the liquid diet and slowly reintroduce soft foods one at a time.

Aim for 600-700 calories during this stage and 60-80g protein (women) or 80-100g protein (men). Include 4-5 small meals throughout the day that are about ½ cup total food per meal. **Do not snack between meals.**

Continue to meet your fluids needs and stay hydrated, drink 48-64oz of calorie free clear liquids daily. Continue to consume foods very slowly and do not drink water with meals/snacks.

FOODS RECOMMENDED

- Canned salmon, tuna, chicken
- Dairy products
- Eggs
- Beans
- Well-cooked vegetables
- Soft/canned fruits
- Cooked grains
- Protein shakes
- Anything allowed on Stage 1 and Stage 2 Diet

FOODS NOT RECOMMENDED

- Raw vegetables
- Crunchy fruits
- Tough meats
- Nuts and seeds
- Tough breads
- Simple carbohydrates
(white breads, white rice, sweets, white pasta)
- Alcohol

STAGE 3: SOFT FOODS DIET (CONT.)

Northwest Specialty Hospital

TWO DAY EXAMPLE MENU

DAY ONE: SOFT FOODS DIET

BREAKFAST: 169 CALORIES, 11G PROTEIN
1 scrambled egg
1/4 cup low fat Greek yogurt
1/2 banana
SNACK: 138 CALORIES, 6G PROTEIN
1/4-1/2 cup well cooked broccoli with 3 Tbsp cheddar cheese, melted
LUNCH: 137 CALORIES, 13G PROTEIN
2oz Grilled Honey Mustard Salmon (from bariatric cookbook pg. 108)
Roasted vegetables with 1 tsp olive oil, salt and pepper
DINNER: 163 CALORIES, 22G PROTEIN
2.5oz Tender Slow Cooker Chicken Tikka Masala (from bariatric cookbook pg. 118)
2 Tbsp blueberries + 1/4 cup low fat Greek yogurt (dessert)
SNACK: 160 CALORIES, 30G PROTEIN
1 Premier Protein Shake
TOTAL CALORIES: 767 CALORIES, 82G PROTEIN

DAY TWO: SOFT FOODS DIET

BREAKFAST: 277 CALORIES, 16G PROTEIN
1 High Protein Pancake (from bariatric cookbook pg. 48)
1 Tbsp creamy peanut butter
LUNCH: 136 CALORIES, 16G PROTEIN
2oz slow cooker chicken breast
1/4 cup black beans
2 Tbsp cheddar cheese, melted
Mexican spices
SNACK: 159 CALORIES, 7G PROTEIN
1 hardboiled egg
1/4 avocado
DINNER: 190 CALORIES, 21G PROTEIN
1 Baked Turkey Meatball (from bariatric cookbook pg. 129)
1/4 cup mashed sweet potatoes mixed with 1/2 scoop unflavored protein powder
SNACK: 62 CALORIES, 4G PROTEIN
4oz 2% milk or soy milk
TOTAL CALORIES: 824 CALORIES, 64G PROTEIN

Drink a minimum of 48oz of water daily (goal is 64oz/day). Aim for 30-45 minutes of exercise every day (cardio + strength training).

STAGE 4: GENERAL DIET

Northwest Specialty Hospital

STAGE 4: 6+ WEEKS AFTER SURGERY

GENERAL DIET

Starting 6 weeks after surgery you will no longer have any dietary restrictions. You can try foods like raw vegetables, raw fruit and tough meat, however many patients need additional time in order to tolerate these foods. Do not progress your diet too quickly and continue to manage food intolerances as needed.

Portion sizes should continue to be 1/2-1 cup at each meal/snack. Do not consume more than 1 cup of food at mealtimes. Aim for 4-5 small meals daily and **do not snack between meals**.

Follow the bariatric plate guide below when planning meals.



2-3OZ LEAN PROTEIN

Chicken, turkey, lean beef, tofu, low fat dairy, beans, lentils

1/4-1/2 CUP NON-STARCHY VEGETABLES

Green beans, broccoli, salad, carrots, zucchini, bell pepper, spinach, etc.

2 TBSP CARBOHYDRATES

Fruit, sweet potatoes, peas, corn, whole wheat pasta, brown rice, quinoa, roasted potatoes

STAGE 4: GENERAL DIET (CONT.)

TWO DAY EXAMPLE MENU

DAY ONE: GENERAL DIET

BREAKFAST: 150 CALORIES, 9G PROTEIN
1 scrambled egg
¼ cup sautéed vegetables
2 Tbsp cheese
LUNCH: 181 CALORIES, 19G PROTEIN
3oz tuna + 1 tsp mayo + 1 tsp mustard
1 small slice whole wheat bread
¼ cup carrot sticks
DINNER: 300 CALORIES, 16G PROTEIN
2oz pork chop
½ cup roasted vegetables or salad
2 Tbsp brown rice
SNACK: 160 CALORIES, 30G PROTEIN
1 Premier Protein Shake
TOTAL CALORIES: 791 CALORIES, 74G PROTEIN

DAY TWO: GENERAL DIET

BREAKFAST: 140 CALORIES, 13G PROTEIN
¼ cup oatmeal
¼ cup berries
5oz Two Good Yogurt
LUNCH: 161 CALORIES, 16G PROTEIN
3oz deli meat
¼ cup cucumber slices
1 Tbsp Opa Ranch Dressing
¼ cup grapes
SNACK: 90 CALORIES, 21G PROTEIN
Unjury high protein broth
DINNER: 234 CALORIES, 23G PROTEIN
½ serving of Chicken Tortilla Soup recipe (page 5.18)
SNACK: 160 CALORIES, 30G PROTEIN
1 Premier Protein Shake
TOTAL CALORIES: 785 CALORIES, 103G PROTEIN

Drink a minimum of 48oz of water daily (goal is 64oz/day). Aim for 30-45 minutes of exercise every day (cardio + strength training).

TIPS

- Protein is a top priority, especially with rapid weight loss.
 - Include a protein source at each meal and eat it first.
- Continue to count your calories and protein. Please ask the dietitian for your daily calorie and protein goals.
 - Continue to use Baritastic or MyFitnessPal to track food, exercise and weight trends.
- Your diet should primarily consist of lean protein, vegetables, and fruit.
 - Include 1-2 **small** servings of a starchy vegetable or whole grain per day.
 - Examples of appropriate starches/grains: roasted sweet potatoes, whole grain bread, oatmeal, quinoa, brown rice, whole wheat pasta, corn, and peas (as tolerated).
- Work towards your healthy relationship with food by practicing mindful eating, reading internal hunger/fullness cues, and not using food as a coping mechanism.
- **Meal Planning:** It is very helpful to start meal planning every week. Make sure you have a plan in place of what you will be eating for breakfast, lunch, dinner, and snacks.

MACRONUTRIENT DISTRIBUTION

The three macronutrients include protein, fat, and carbohydrates. Each of these macronutrients provides calories and should be balanced in a healthy diet. Try to aim for this macronutrient distribution:

PROTEIN	FAT	CARBOHYDRATES
30% of calories	30% of calories	40% of calories
1g of protein = 4 calories	1g of fat = 9 calories	1g of carbohydrates = 4 calories
Sources of protein: lean meats, low fat dairy, nuts, beans, lentils	Sources of fat: healthy oils, nuts, avocado, seeds, small amounts of saturated fat	Sources of carbohydrates: fruit, whole grains (brown rice, whole wheat bread, quinoa), vegetables

Graph adapted from Rx Fitness for Weight Loss by Julia Karlstad, M.Ed.

VITAMIN & MINERAL SUPPLEMENTATION

Please ask your physician or dietitian for recommendations on vitamin and mineral supplementation. Always keep your primary care provider informed of what supplements you are taking.

Below are the recommended levels of vitamin and mineral supplementation following a Roux-en-Y gastric bypass or sleeve gastrectomy surgery.

NUTRIENT	MINIMUM DAILY LEVEL TO PREVENT DEFICIENCIES (ORAL DOSES)
Iron	18mg (general population) 45-60mg (women in childbearing years or history of iron deficiency)
Vitamin B12	350-500mcg
Folate	400-800mcg 800-1000mcg (women in childbearing years)
Thiamin	12-50mg
Calcium	1200-1500mg
Vitamin D	3,000 IU or per your physician's recommendations
Vitamin A	5,000-10,000 IU
Vitamins E/K	15mg/90-120mcg
Zinc/Copper	8-22mg/1-2mg
Selenium	“high potency MVI”
Magnesium	“contains magnesium”
Additional B-vitamins	100-200% DV
Trace Minerals	“complete in minerals”

We will be testing your nutrient profile before surgery, 6 months after surgery and 12 months after surgery.

After this time it is recommended that you follow up with your Primary Care Provider (PCP) annually to check your nutrient labs.

VITAMINS & MINERALS (CONT.)

Northwest Specialty Hospital

LABS

Below are the recommended labs to test 6 months, 12 months, and annually after surgery.

LABS TO CHECK 6 MONTHS AFTER SURGERY

CBC	Transferrin Saturation
CMP	25(OH)D (Vitamin D)
Vitamin B	PTH
Serum Iron	Vitamin B12
Ferritin	Folate

LABS TO CHECK 12 MONTHS AFTER SURGERY (AND EVERY YEAR AFTER)

CBC	Transferrin Saturation
CMP	25(OH)D (Vitamin D)
Vitamin B1	PTH
Serum Iron	Vitamin B12
Ferritin	Folate
Plasma Zinc	Plasma Retinol
Serum Copper	

PRE-SURGICAL LABS (DONE BEFORE SURGERY)

CBC	PTH
CMP	Vitamin B12
Vitamin B1	Plasma Retinol
Serum Iron	Zinc
Serum Ferritin	A1c
Transferrin	Lipid Panel
Vitamin D3	Folate

Please speak with one of our bariatric dietitians to determine which bariatric multivitamin is right for you and for additional recommendations.

VITAMIN & MINERAL SUPPLEMENTATION

- Vitamin and mineral supplementation will start **3 weeks** after your bariatric surgery and will be **lifelong**.
- For the first 6 months after surgery, vitamin and mineral supplements will need to be in chewable or liquid form. After 6 months, patients may transition to capsules.
- Treat your vitamin and mineral supplements as you would a medication.
- Separate iron and calcium supplementation by at least 2 hours.
- Divide doses of calcium throughout the day. This will improve absorption.
- Always keep your primary care provider informed of which supplements and the amounts you are taking each day.
- Brands of bariatric multivitamins: Bariatric Advantage, Bariatric Fusion, Bariatric Choice, Celebrate Vitamins, Opurity, Barimelts.

DXA SCAN

It is recommended that **gastric bypass** patients get a DXA Scan prior to bariatric surgery and 2 years post-operatively. A DXA Scan is a bone density test that can measure bone loss. It is only recommended with the gastric bypass because of the risk of malabsorption in this surgical procedure.

We do perform DXA Scans at Northwest Specialty Hospital and recommend you complete this testing prior to surgery. These scans are not only helpful to monitor bone density, but also provides valuable information about body composition. Please speak with the bariatric program coordinator for more information.

VITAMIN & MINERAL DEFICIENCIES

HOW TO IDENTIFY NUTRIENT DEFICIENCIES

Taking vitamin and mineral supplements in the amounts stated in previous pages does not guarantee you will not develop a nutrient deficiency at some point in your life. It is recommended that bariatric patients **check for nutrient deficiencies annually** with their primary care provider. Below are a list of possible signs and symptoms you may experience if you are deficient in a vitamin or mineral, however some deficiencies may be present without signs or symptoms.

NUTRIENT	SIGNS AND SYMPTOMS OF DEFICIENCY	FOOD SOURCES
Thiamin (Vitamin B1)	Neuropathy, muscle weakness, pain in upper and lower extremities, edema in legs, rapid or slower heart rate, respiratory distress, slow gastric emptying, nausea/vomiting, constipation, short term memory loss	Beans, peas, nuts, whole grains, enriched grain products
Vitamin B12 (Cobalamin)	Anemia, fatigue, diarrhea, numbness in legs or arms, forgetfulness, altered mental status	Animal products (meats, dairy). If you are vegan, vitamin B12 supplementation is absolutely required.
Folate	Diarrhea, mouth or stomach ulcers, swollen tongue, anemia, severe birth defects if pregnant, muscle weakness	Dried beans, peas, nuts, leafy green vegetables, fruits, fortified grain products
Iron	Fatigue, anemia, decreased immune function, spoon shaped nails	Beans, peas, dark green vegetables, meats, prunes, seafood, whole grains, enriched grains
Calcium	Leg cramping, muscle weakness, osteoporosis	Non-dairy milks, dairy products, fortified grains, green vegetables, tofu
Vitamin D	Tingling, cramping, low calcium levels	Eggs, fish, fortified dairy products, fortified cereals. It is very difficult to get enough vitamin D from foods, supplementation is needed.
Vitamin A	Night blindness, loss of taste	Cantaloupe, carrots, dairy products, eggs, green leafy vegetables, sweet potatoes, red peppers, fortified cereals
Zinc	Rash, change or absence of taste, immune deficiency, poor wound healing	Beans and peas, beef, dairy products, fortified cereals, nuts, seafood, whole grains

PHYSICAL ACTIVITY

Physical activity/exercise needs to part of your daily life in order to promote weight loss or maintain a healthy weight. Some patients describe exercise as their "insurance policy" for their bariatric surgery to prevent weight re-gain later in life. Exercise will help you by promoting weight loss and has many other health benefits, including:

- Increasing daily caloric expenditure
- Decrease inches and body fat
- Increase or maintain fat free mass
- Increase fat-burning capacity
- Improve cholesterol
- Lower blood pressure, blood sugar and triglycerides
- Reduce anxiety and depression
- Relieve stress
- Improves self confidence and energy levels
- Strengthens bones

It is encouraged that you find a form of physical activity that you enjoy. It is recommended that individuals get **150 minutes per week of moderate intensity exercise**. Below are a list of activities that would count toward your activity level. In addition to getting the right amount of exercise, you should also focus on getting a balance of cardio and strength training exercises.

- Walking/
Hiking/
Running
- Biking/Cycling
- Swimming
- Weight Lifting
- Skiing/Snowboarding/
Snowshoeing
- Tennis
- Dancing
- Yard work/
Shoveling snow

PRIOR TO SURGERY

Aim for 30-45 minutes of exercise 5-6 days weekly, as tolerated. Explore different exercises and focus on those that you enjoy. Include both cardio exercises and strength training in your regimen.

0-6 WEEKS AFTER SURGERY

Focus on walking for a cumulative time of 30 minutes daily. This can include two 15 minute walks daily (30 minutes) or three 10 minute walks daily (30 minutes).

6+ WEEKS AFTER SURGERY

After 6 weeks, most of our patients are medically cleared to start a more intensive exercise regimen. Aim for 30-45 minutes of exercise 5-6 days weekly, as tolerated. Explore different exercises and focus on those that you enjoy. Include both cardio exercises and strength training in your regimen.

BODY CONTOURING

Some bariatric patients pursue skin removal surgery after weight loss surgery. This procedure is mostly done by plastic surgeons and is generally considered elective and not covered by insurance. In addition, patients need to wait 12-18 months after surgery and ensure their weight is stable. Our surgeons at Northwest Bariatrics may perform minor skin removal around the abdomen (called an abdominoplasty) however this is also usually not covered by insurance.

PRE-SURGICAL DIET

SALMON WITH BROCCOLI & QUINOA (359 CALORIES, 24G PROTEIN)

- 3oz salmon
- 1/2 cup quinoa
- salt/pepper
- 1 cup broccoli
- 1 tsp olive oil
- lemon juice

Directions: Sprinkle salmon fillet with salt, pepper, and lemon juice. Bake at 425 degrees for 20 minutes or until it flakes easily. Toss 1 tsp olive oil, salt, and pepper with 1 cup broccoli. Roast at 425 degrees for 20 minutes. Cook quinoa according to package. Mix with roasted broccoli or mix with your own (calorie free) spices and herbs.

STUFFED BELL PEPPER (368 CALORIES, 28G PROTEIN)

- 1 bell pepper
- 1/4 cup zucchini, diced
- salt/pepper
- 3oz ground turkey
- 1/4 cup onion, diced
- Italian seasoning
- 1/2 cup brown rice
- 1 tsp olive oil

Directions: Heat pan to medium-high on stove top, add turkey and cook until cooked through. Add 1 tsp oil, onion, zucchini, salt, and pepper. Cook until vegetables are soft. Add 1-2 tsp Italian seasoning. Cook brown rice according to directions. Cut off top of bell pepper. Mix together brown rice, turkey, and vegetables and stuff inside of bell pepper. Cook at 350 degrees for 15-20 minutes.

PESTO PASTA (389 CALORIES, 27G PROTEIN)

- 6 cherry tomatoes, halved
- 1 cup spinach
- 1/2 cup whole wheat penne pasta
- 1/4 cup red onion, chopped
- 1/2 cup cooked, shredded chicken
- 1 Tbsp basil pesto

Directions: Cook pasta according to box directions and mix with chicken, tomatoes, red onion, spinach, and pesto.

SAUSAGE, KALE & POTATO SOUP (369 CALORIES, 29G PROTEIN)

- 4oz ground turkey sausage
- Italian seasoning
- 1/2 cup carrots, diced
- 2 cups chicken broth
- 1 cup kale leaves
- 1/4 cup onion, diced
- salt/pepper
- 1/2 cup red potatoes, diced

Directions: Heat pot to medium-high on stove top. Cook turkey sausage until cooked through. Add carrots and onion and saute until onions are translucent. Add chicken broth, salt, pepper, and Italian seasoning to taste and bring to a boil. Add kale and red potatoes and cook until potatoes are soft (approx. 20 minutes).

RECIPES (CONT.)

TACO SALAD (381 CALORIES, 22G PROTEIN)

- 1 cup romaine lettuce, chopped
- 1 cup red leaf lettuce, chopped
- 1/4 avocado, diced
- 1/4 cup grated carrot
- 1/4 cup bell pepper, diced
- 2 Tbsp sour cream
- 1/4 cup quinoa, cooked
- 1/2 cup cooked shredded chicken
- salsa

Directions: Combine all ingredients and serve chilled.

BEEF BURGER (329 CALORIES, 18G PROTEIN)

- 3oz 90% lean ground beef
- salt, pepper, garlic powder, rosemary, oregano
- 1/4 cup onion, diced
- 1/2 cup mushrooms
- 1 cup arugula
- 1 Tbsp balsamic vinegar
- 1 tsp olive oil

Directions: Mix together ground beef, diced onion, salt, pepper, and about 1 tsp of rosemary and oregano. Shape into a hamburger patty and cook on stove top or grill until cooked through. Sauté mushrooms until soft. Serve mushrooms on top of burger and put it all on a bed of arugula with balsamic vinegar and olive oil. Include 1 cup orange slices to complete your meal.

PESTO CHICKEN, LEMON PARMESAN BROCCOLI & SWEET POTATO FRIES (456 CALORIES, 32G PROTEIN)

- 3oz chicken breast
- 1 Tbsp pesto
- 1 cup broccoli, chopped
- 2 tsp olive oil, divided
- 1 Tbsp parmesan cheese
- 1 cup sweet potato, sliced
- salt/pepper (to taste)
- juice of 1 lemon wedge

Directions: Spread pesto over top of raw chicken. Bake chicken breast at 375 degrees until internal temperature of chicken reads 165 degrees. Toss broccoli with 1 tsp olive oil, parmesan cheese, lemon juice, and salt/pepper to taste. Toss together 1 tsp olive oil and salt/pepper to taste with sweet potatoes. Roast vegetables at 425 degrees for 20-25 minutes.

CHICKEN TACOS (383 CALORIES, 30G PROTEIN)

- 3oz chicken breast, cooked and shredded
- 2 corn tortillas
- 1 tsp taco seasoning
- 1/2 cup purple cabbage, shredded
- 1/2 cup shredded carrots
- 1/4 cup sliced onion
- juice of 1 lime wedge
- salt/pepper to taste
- 1 cup spinach
- 1/2 cup jicama, diced
- 1/2 cup radish, diced
- 1 tsp olive oil
- 1 Tbsp balsamic vinegar

Directions: Mix together taco seasoning with chicken. Mix together purple cabbage, carrots, and onion with lime juice, and salt/pepper to taste. Top each tortilla with chicken and cabbage mixture. Toss together spinach, jicama, radish, olive oil, balsamic vinegar, and salt/pepper to taste.

RECIPES (CONT.)

BEEF STIR FRY (460 CALORIES, 35G PROTEIN)

- 3oz flank steak, sliced into thin strips
- 1 cup sliced bell pepper
- 1 cup snap peas
- 1/2 cup sliced onion
- 1 cup broccoli
- 1/4 cup soy sauce
- 1 tsp brown sugar
- 1 Tbsp corn starch
- 1/2 cup brown rice, cooked

Directions: Heat medium pan on medium-high heat on stove top. Cook flank steak until cooked through and add bell pepper, snap peas, onion, and broccoli and cook until veggies are soft. Whisk together soy sauce, brown sugar, and corn starch. Add sauce to pan of beef and veggies. Serve on top of brown rice.

CHICKEN TORTILLA SOUP (468 CALORIES, 46G PROTEIN)

- 3oz chicken, cooked and shredded
- 2 cups chicken broth
- 1/4 cup onion
- 1/4 cup zucchini
- 1/4 cup canned black beans
- 1/2 cup tomatoes, chopped
- 1/2 cup shredded carrots
- 1/2 cup crushed tortilla chips
- 1 Tbsp taco seasoning
- 1/4 cup avocado, diced

Directions: Heat a medium pot on medium-high heat on the stove top. Add onion, zucchini, tomatoes, and carrots to the pot and cook until veggies start getting soft. Add chicken broth, taco seasoning, black beans, and chicken. Bring pot to a boil and cook for 15 minutes. Top with tortilla chips and avocado.

ASIAN SALMON WRAP (482 CALORIES, 24G PROTEIN)

- 3oz salmon, cooked and shredded
- 1 cup red leaf lettuce, chopped
- 1/4 cup diced red onion
- 1/4 cup edamame, shelled
- 1/4 cup yellow bell pepper, diced
- 1 whole wheat tortilla
- 1 Tbsp soy sauce
- 1 tsp sesame oil
- salt/pepper
- 1 tsp garlic powder

Directions: Toss together salmon, red leaf lettuce, red onion, edamame, and bell pepper. Whisk together soy sauce, sesame oil, garlic powder, and salt/pepper to taste. Toss both things together and roll up into tortilla.

TURKEY MEATBALLS WITH ROASTED VEGGIES (432 CALORIES, 27G PROTEIN)

- 3oz ground turkey
- Italian seasoning (1-2 tsp)
- 1 tsp garlic, minced
- salt/pepper
- 1 cup spinach
- 1/4 cup marinara sauce
- 1 cup brussel sprouts
- 3 tsp olive oil, divided
- 1 Tbsp balsamic vinegar
- 1 tsp garlic, minced
- 1/2 cup red potato, diced

Directions: Mix together ground turkey, garlic, Italian seasoning, and salt/pepper to taste. Roll into 2 balls and cook at 375 degrees until internal temperature of meatballs reads 165 degrees. Serve on bed of spinach with marinara sauce. Toss together brussel sprouts, 2 tsp olive oil, balsamic vinegar, and salt/pepper to taste. Toss together red potatoes, 1 tsp olive oil, garlic, and salt/pepper to taste. Roast veggies at 425 degrees for 20-25 minutes.

PUREED FOOD DIET

SOUTHWESTERN EGGS (192 CALORIES, 12.5G PROTEIN)

- 1 egg
- 1/4 cup fat free refried beans
- 2 Tbsp cheddar cheese, melted
- 1/2 tsp chili powder
- 1/4 tsp cumin
- 1/4 tsp garlic powder
- 1/4 tsp onion powder
- salt/pepper

Directions: Scramble egg on stove top over medium heat. Add refried beans, chili powder, cumin, garlic powder, onion powder, salt and pepper. Stir together and allow to cook for 1-2 minutes. Top with shredded cheddar cheese and enjoy.

APPLE CINNAMON OATMEAL (132 CALORIES, 14G PROTEIN)

- 1/4 cup cooked oatmeal (plain)
- 1/2 scoop protein powder
- 1/2 cup unsweetened applesauce
- pinch of cinnamon
- pinch of stevia

Directions: Combine oatmeal, applesauce, protein powder, cinnamon, and stevia.

TUNA SALAD (131 CALORIES, 11G PROTEIN)

- 2oz canned tuna (in water)
- 1/4 avocado, mashed
- 1/2 tsp onion powder
- 1/2 tsp dried dill
- salt and pepper, to taste

Directions: Combine all ingredients in a blender or food processor and blend until a smooth, pureed texture.

YOGURT PARFAIT (151 CALORIES, 13G PROTEIN)

- 1/4 cup plain Greek yogurt
- 2 Tbsp cooked oatmeal, blended (plain)
- 1/4 cup mashed banana
- pinch of cinnamon
- 2 Tbsp PB2 (powdered peanut butter)

Directions: Combine all ingredients in a small bowl and serve.

SPICED SWEET POTATOES (181 CALORIES, 15G PROTEIN)

- 1/2 cup mashed sweet potato
- 2 Tbsp 1% milk
- 1/2 scoop unflavored Unjury protein powder
- pinch of cinnamon
- 1 tsp honey

Directions: Combine all ingredients and serve.

SOFT FOODS DIET

CHICKEN SALAD SANDWICH (204 CALORIES, 10G PROTEIN)

- 2oz canned chicken, shredded
- 1/2 Tbsp light mayonnaise
- 1/4 tsp onion powder
- 1/4 tsp garlic powder
- 1/2 tsp lemon juice
- salt, pepper to taste
- 1 slice soft, whole wheat bread (no crust, no seeds)

Directions: Combine chicken, mayonnaise, onion powder, garlic powder, lemon juice, salt, and pepper in a small bowl. Stir until well combined, if the chicken seems too tough run through a blender or food processor to soften. Serve on a slice of soft whole wheat bread (no crust, no seeds).

BEAN & VEGETABLE SOUP (211 CALORIES, 15G PROTEIN)

- 1-2 cups vegetable broth
- 1 tsp oil
- 1oz canned chicken, shredded
- 1/4 cup white beans, canned
- 2 Tbsp onion, diced
- 2 Tbsp carrot, diced
- 2 Tbsp spinach, chopped
- 1/2 tsp garlic powder
- 1/2 tsp dried thyme
- 1/2 tsp oregano
- Salt and pepper to taste
- 2 Tbsp parmesan cheese

Directions: Heat oil in a small pot over medium-high heat. Add onion, carrots and beans to pot and cook until onions are translucent. Add vegetable broth, garlic powder, thyme, oregano, salt, and pepper and bring to a boil. Add chicken and reduce heat to low. Simmer for 20 minutes or until vegetables are very soft. Add spinach to soup and stir until spinach is well-cooked. Transfer soup to a bowl and top with parmesan cheese.

SALMON & ROASTED ASPARAGUS (147 CALORIES, 12G PROTEIN)

- 2oz salmon fillet
- pinch of salt and pepper
- other no calorie herbs/spices
- 1/4 cup asparagus, chopped
- 1 tsp olive oil

Directions: Line a baking sheet with tin foil. Season salmon fillet with salt, pepper, and any other no calorie herbs and spices you like. Put salmon fillet on baking sheet. Put chopped asparagus on baking sheet and toss with oil, salt, and pepper. Bake at 375 degrees for 25 minutes or until salmon is cooked through and flakes easily.

CHICKEN & RICE BAKE (208 CALORIES, 12G PROTEIN)

- 2oz canned chicken, shredded
- 1/4 cup brown rice, cooked
- 1/2 tsp garlic powder
- 1/2 tsp oregano
- salt and pepper to taste
- 1/4 cup broccoli, steamed or boiled
- 2 Tbsp parmesan cheese

Directions: Combine chicken, rice, garlic powder, oregano, broccoli, 1 Tbsp parmesan cheese, salt, and pepper in a small bowl and transfer to a small oven safe dish. Top with 1 Tbsp parmesan cheese and bake at 350 degrees for 20 minutes or until cheese has melted.



Utilize this cookbook for recipes for any stage of your diet, available on Amazon.

Fresh Start Bariatric Cookbook

By: Sarah Kent, MS, RDN, CD

IMPORTANT INFORMATION

Healthcare Contacts

BARIATRIC PROGRAM COORDINATOR

Laurie McBride

P: (208) 262-0945

Laurie.McBride@nwsh.com

HOSPITAL

Northwest Specialty Hospital (NWSH)

1593 East Polston Avenue, Post Falls, ID 83854

P: (208) 262-2300

F: (208) 262-2390

nwsh.com

NWIDS

Northwest Institute for Digestive Surgery

750 N. Syringa St., Ste. 205, Post Falls, ID 83854

P: (208) 262-0945

F: (208) 415-0150

nwbariatrics.com

INPATIENT

P: (208) 262-2398

IMAGING

Northwest Specialty Hospital (NWSH)

1593 East Polston Avenue, Post Falls, ID 83854

P: (208) 262-2333

F: (208) 262-2380

nwsh.com

PRE-OPERATIVE DEPARTMENT

P: (208) 262-2328

F: (208) 619-5057

nwshpreop@surgerypartners.com

URGENT CARE

Northwest Urgent Care

750 North Syringa Street, Suite 100, Post Falls, ID 83854

P: (208) 262-2600

F: (208) 262-2700

nwurgent.com

NURSE NAVIGATOR

P: (208) 500-9813

Thank You

When you make the decision to have surgery, you place your life in the hands of the surgeon and their care team.

At Northwest Specialty Hospital, one of the highest honors we can receive is to know that we have your trust in us to provide that care. It is a responsibility we take seriously.

We would like to take this moment to show our sincere appreciation to you, and thank you for choosing us.

Patients first.

