Post-Operative Instructions
Laparoscopic Roux-en-Y Gastric Bypass

Pre-Operative Appointment (If Required)

Location: Maine Medical Center – Brighton Campus (not the main hospital)
Report to: Pre-Admission Unit (PAU)

Date: _______________  Arrival Time: __________

The Pre-Admission Unit (PAU) is located at the Brighton Campus of Medical Center, not at the main hospital. Not all patients need this appointment, but it is available to any patient who wants one. If one is scheduled for you, you will have an opportunity to meet a member of the anesthesia team who will talk to you about general anesthesia and assess your risks of undergoing anesthesia. You might have an EKG and blood work at this appointment. The PAU staff will also review which medications to take the night before surgery and which ones to take with a sip of water the morning of surgery.

If you have any questions about what they tell you, ask them to write down their instructions for you. If you take aspirin or other non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen, Advil, Aleve, Motrin, Naprosyn or Celebrex, you should continue taking them before surgery unless told to stop them. If you’re a former smoker who quit in order to enter the Weight & Wellness Surgery Program, a nicotine level will be checked. You will also be weighed. If your weight has gone up since your last visit to the Weight & Wellness Center or your nicotine level is abnormal, your surgery might need to be postponed.

Surgery Appointment

Don’t eat or drink after midnight before surgery (except to take your usual medications).

Location: Maine Medical Center – Bramhall Campus (the main hospital)
Report to: Ambulatory Surgery Unit (ASU)

Date: _______________________

Arrival Time: __________________

Approximate Surgery Time: _________

Surgery date is tentative until insurance approves. We will submit to the insurance company.

After Returning Home from the Hospital
Your Recovery
Because the operation is performed laparoscopically, we put few restrictions on your physical activity after surgery. Avoid lifting or straining beyond the point where it hurts. Your pain should fade quickly, so you could be able to return to normal activities or work within a few weeks, depending on the type of activities you do. You may shower when you return home. Do not remove the pieces of tape (or glue) covering your incisions; simply let them fall off on their own. We encourage you to get up and walk frequently after surgery to prevent blood clots. Resume exercise as soon as you feel up to it.

Pain Relief (after discharge from the hospital)
- Take 3 regular strength (325mg) Tylenol tablets or 2 extra strength (500mg) Tylenol tablets (or generic acetaminophen) every six hours as needed to control discomfort. Do not take more than 4000mg in a 24 hour period.
- If Tylenol alone is not controlling your pain adequately, you may also take the narcotic pain medication prescribed for you at the hospital (usually oxycodone or dilaudid). Narcotics often cause drowsiness and can make it hard to concentrate. Do not drive or operate dangerous equipment while taking it. They also often cause nausea and constipation. You may want to use an over-the-counter stool softener (such as Colace) while taking a narcotic pain medication. If you do not have a bowel movement for 3 or 4 days, you can try Miralax (a laxative) as directed on its label.
- We recommend that you stop taking the narcotic as soon as you are able to and to use just the Tylenol as described above. Many people will be able to decrease their pain medication over the first few days at home, and most people will not need pain medication at all after the first week.
- Do not take Aspirin, Baby Aspirin, Advil, Ibuprofen, Motrin, Aleve, Naprosyn, Indocin, Celebrex, or any other Non-steroidal Anti-Inflammatory Drug (NSAID) after Gastric Bypass surgery unless directed to by your PCP. These medications are too harsh for your stomach during the first two months and can cause ulcers. Some patients will never be able to take them again.

Other Medications
- Take two complete chewable multivitamin daily and three chewable calcium daily. Three months after your surgery date, you will start taking Vitamin B-12 daily. Take B-50 Complex for the first three months.
- We will send you home with a prescription for PPI medication to decrease acid production by your stomach (usually omeprazole 20mg). Take it once a day for the first two months to protect your new pouch and prevent ulcers. If you were taking a similar medication before surgery (such as Prevacid, Dexilant, Nexium), you may use that instead.
- Resume all other usual medications unless we instruct you otherwise at the hospital after surgery. Be aware that diabetes medications can often be cut back or discontinued right after surgery. If you have diabetes, monitor your blood sugar closely and see your PCP within 7-10 days after you leave the hospital.

Fluids & Diet
Fluid intake is extremely important the first month of your recovery. You must take in enough liquids to prevent dehydration, which can cause nausea, fatigue, lightheadedness and dark urine.
Before you go home, you should have been given a Weight & Wellness Center water bottle. By filling this 28oz bottle 2.5 times a day with any type of sugar-free liquid and drinking it, you will get the required amount of fluid daily (8 cups or 64 oz.). Please remember, once you are reaching your fluid goals, you can try Stage 1 smooth/blended foods. We recommend that you write down what you drink and eat each day.

It is essential that you strictly follow the Eating for Life plan. You should already have a copy of the Eating for Life plan. If you have misplaced your copy, contact the Weight & Wellness Center (207) 661-6064 and we will provide you with another copy. During the first month after surgery, your new gastric pouch is fragile and must be protected from over-filling and violent vomiting. You must try to take in enough protein after surgery to help your healing process and to prevent malnutrition or hair-loss. Our dietitians are available to assist you at the Weight & Wellness Center.

**Most Frequent Problems**

- **Discomfort:** Abdominal soreness below your ribs on the left side is the most common site of tenderness after waking up. This discomfort can last for several weeks. You might also feel abdominal pressure or a sense of gas or fullness. Despite this discomfort, it is very important that you get out of bed and take short walks in order to keep your lungs inflated normally and to prevent blood clots from forming in your legs.

- **Nausea:** Nausea is a common temporary problem after surgery. Depending on how you feel in the hospital, we might send you home with anti-nausea medication. Remember that one of the most common causes of nausea is prescription pain medication, so stop taking that as soon as you can.

- **Dehydration:** Your most important job after surgery is drinking enough fluid. Dehydration is the most common reason patients must return to the hospital in the first month after surgery. Your goal is to drink 8 cups (64 oz.) of fluid a day. You might not be able to drink this much fluid at first, but come as close as you can and increase it from there. Refer to your nutrition packet for more details.

- **Wound Drainage & Infection:** It is important to care for your incisions to prevent infection. You will have small pieces of tape (or clear glue) protecting your small wounds. Leave them on until they fall off by themselves. You may get your incisions wet but avoid scrubbing them. Pat them dry. The tape or glue should keep your wounds closed and dry, but it is not unusual for an incision to open up a bit and drain a little bloody fluid after you go home. It is usually just fluid trapped under the skin finding its way out. If a wound opens, dab it with diluted hydrogen peroxide (hydrogen peroxide mixed half-and-half with water) and then cover with a dry gauze. Doing this twice a day will speed healing. If a wound scabs over, that is okay too. Infections are uncommon and rarely serious after laparoscopic surgery. An infection will be red, warm, firm, and tender. The infected fluid will look more like pus than blood and often smells bad. If you notice this, please call the nurse at the Weight & Wellness Center to discuss your symptoms.
Reasons to Call Us
If you experience any of the following symptoms, please contact the Weight & Wellness Center at (207) 661-2064 or go to the MMC Emergency Room immediately. **Not all surgeons understand or are comfortable managing gastric bypass problems. If you have any abdominal problems requiring an emergency room visit, even years after surgery, it is very important that you go to Maine Medical Center.** Our surgeons cannot provide care at any other hospital. If you have no choice but to go to another emergency room, please call us ahead of time or from that hospital so we can help them understand your operation and possible things that could be going on with it. If you are travelling or have moved out of the area, then request somebody familiar with bariatric operations.

- A temperature higher than 101.5 F or 38.5 C
- Your incision(s) open up or become red, swollen, tender, or have new drainage
- Chest pain and/or shortness of breath not relieved by rest
- Abdominal pain that does not get better after using your pain medication
- Vomiting blood
- Black or bloody stool
- Persistent nausea, vomiting or dry heaves
- Shortness of breath that does not improve with rest
- Any pain or swelling in your legs, especially if one leg appears noticeably larger than the other
- Painful, frequent urination or inability to urinate
- Cloudy, dark and/or foul-smelling urine

Follow-Up Appointments after Surgery

- **Weight & Wellness Center:** A Bariatric Nurse will call you in a few days to check on your recovery. You should also have a separately scheduled follow-up appointment with the Bariatric Nurse and Registered Dietitian at the Maine Medical Center Weight & Wellness Center. Please call (207) 661-6064 to confirm.
- **Maine Medical Partners - Surgical Care Casco Bay:** You should already have a scheduled follow-up appointment with your surgeon. Please call (207) 761-6642 to confirm.
- **Primary Care Provider (PCP):** If you are taking medicine for conditions such as diabetes, and high blood pressure, please make an appointment to see your primary care doctor within 7-10 days of discharge from the hospital. Your medication doses might need to be adjusted.

Post-Operative Office Appointment

Date: ________________ Time: ________________

If you have any questions, please call (207) 761-6642.

_Last updated 3/24/18 rc_