



BARIATRIC SURGERY DISCHARGE INFORMATION FOR PATIENTS



Bariatric Surgery – Discharge Information for Patients

Medication

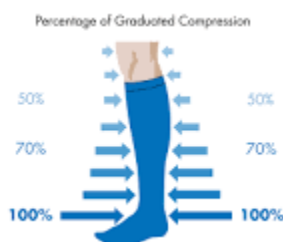
On Discharge you will be given a supply of the following Medication



- ✚ Pain relief such as Paracetamol or Codeine take as needed to relieve any discomfort.
- ✚ Anti-sickness tablets such as ondansetron. A supply of 1 to 2 weeks is given and it is recommended that these are taken as prescribed to prevent any feelings of nausea or vomiting.
- ✚ Anti-clotting injections to be injected once a day for 2 to 4 weeks to prevent blood clots.
- ✚ Laxatives such as, Lactulose to take if required.
- ✚ Anti-acid such as Omeprazole or Lansoprazole are to be taken long term, once a day for a minimal of 9 to 12 months. This medication can only be discontinued when recommended by your Bariatric Surgical Consultant. **Do not stop taking this Medication without consulting your Surgeon.**
- ✚ **Multi vitamin and Minerals**, such as A to Z will need to be taken once a day for the rest of your life. This medication can be obtained from over the counter.
- ✚ Please do not take Calcium supplements at the same time you take;
 - Multivitamin with iron or iron supplements
 - Thyroid medicine or beta blocker (i.e. atenolol, metoprolol) since calcium can decrease the absorption of these.
 - Avoid nonsteroidal medicine (i.e. Ibuprofen, Naproxen) as it may irritate the stomach

✚ Re-Resume all other usual medication unless we instruct you otherwise

Graduated Compression Stockings are also provided by the inpatient Ward to further reduce the risk of blood clots and these should be worn for 4 weeks post operatively or until you are fully mobile.



Wounds

You will have 5 to 7 small wounds to your abdomen which will be covered with waterproof dressings. These should remain in place for 5 days following surgery. Only change these dressings if the wounds are oozing or the dressing has lifted off. Inspect the site around the dressing daily. There may be some bruising or redness around the dressing site but this can be expected. Itching or a small amount of drainage also is normal.

Report these signs of infection to your doctor or nurse:

- Increased redness, swelling or pain at the site
- Thick drainage or pus from the incision

It is also recommended that when washing avoid fully bathing in water and use a shower for the first week post operatively. Use a mild soap to gently wash the incision site. Carefully pat dry and do not rub the incision sites.



Exercise

- ✚ Avoid any strenuous exercise for the first 2 weeks post operatively. After this period we encourage you to do more exercise such as active walking and swimming.
- ✚ Don't lift 20 pounds or more for 3 weeks after your surgery.
- ✚ It is normal to feel tired in the first few weeks after surgery. Rest as needed.



Driving

Do not drive for a minimal of 24 hours and start again when you feel comfortable doing an emergency stop.



Bathing:

- ✚ No bathing in tub, using Jacuzzi, pool or hot tub until your incisions are fully healed as determined by your Practice Nurse.
- ✚ Can resume showering, walking and climbing Stairs. Walking is a required activity at this stage of your recovery.



Sexual Activity

Many people have questions about resuming sexual activity after surgery. After 10 days if you feel good and well rested, sexual activity may be resumed. Avoid positions that strain the incision site. For two years after gastric bypass and sleeve gastrectomy surgery, it is important for women to use effective birth control to avoid pregnancy.

Pregnancy

We advise that you do not become pregnant for the first 2 years following surgery. This is due to rapidly losing weight your body may not be getting all the essential nutrients it needs for you and your baby to be healthy.

You are more likely to become more fertile when you lose weight and so precautions need to be taken even if you have been told that you cannot have children.

Oral contraception may be unreliable after bariatric surgery because they are metabolised through the digestive system, therefore it is recommended that additional barrier methods of contraception are used.



Excess skin

Plastic surgery is an option however it is not recommended for the first 2 years following surgery and you should wait after this period until your weight has been stable for 6 months. There is no funding for plastic surgery as this is not commissioned and is not included in your referral for weight loss surgery. You will need to discuss this with your GP for a plastic surgery referral. It is important to note that plastic surgery referrals after weight loss surgery are subject to strict criteria.

If you have any questions or concerns once you are at home, you should call your Bariatric Clinical Nurse Specialist. Specifically call your Doctor if you experience any of the following;

- Persistent nausea or vomiting.
- Vomiting a bright red or dark brown liquid.
- Sudden onset of shortness of breath.
- Temperature higher than 101C
- Rapid heart rate (120) beats per minute
- Any new or unusual pain in abdomen. Chest and legs
- Inability to pass urine
- Discomfort not relieved by prescribed medication.

Bariatric Surgical Patients

All Bariatric Surgical patients have immediate 24 hour open access to SAU for 2 weeks post operatively, for problems that require urgent attention or fall out of hours between 5pm and 9am

Please contact SAU and attend with your OPEN ACCESS LETTER

- (01782) 671411



Contact Numbers

Bridie Cornes Lead Bariatric CNS 01782 679896

Lo Gofton Bariatric CNS 01782 676331

Emily Cooper (Stoke/Stafford) Lead Bariatric Dietician 01782 676050

Ruth O'Broin (Chester) Dietician 07244363230

Heather Smart (Wolverhampton) 01902 695335

Contact for all out patient appointment enquiries:

Bariatric Surgical Consultant Secretary 01782 679874

Useful Web pages

British Obesity Surgery Patient Association

<http://www.bospa.org>

Obesity Surgery Advice.

<http://www.obesity-surgery-advice.co.uk/>

Weight Loss Surgery

<http://www.wlsinfo.org.uk>

Obesity: the prevention, identification, assessment and management of overweight and obesity in adults and children.

<http://www.nice.org.uk?CG43>