

Nutrition Guidelines for Bariatric Surgery

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Nutrition Guidelines

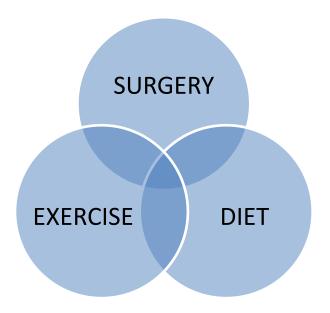
The decision to have bariatric surgery should be made with a complete understanding of the risks, benefits and lifelong changes that are necessary after surgery. In order to achieve weight loss and maintain good health, it is important to develop and maintain proper eating habits before and after surgery. Failure to modify and maintain eating habits can result in complications, such as blockage of the anastomosis, vomiting, nutrient deficiencies, and decreased weight loss. The following information is to help you understand healthy eating before and after surgery. Remember, you are not on a "diet". Once you have surgery, your stomach will forever be changed.

General Guidelines

Adopting healthy lifestyle changes before surgery is vital to success after surgery. This is the time to break unhealthy habits such as skipping meals and crash diets.

- Stop eating fast food even salads from fast food chains may have 700 calories or more!
- Stop eating high calorie snack foods (i.e. ice cream, candy, chips, seeds).
- Stop drinking alcoholic beverages.
- Stop carbonated and caffeinated beverages.
- Eat three balanced meals a day.
- Carefully monitor portion sizes (use a food scale and measuring cups and spoons).
- Eat low-fat protein at each meal.
- Eat fewer carbohydrate foods (bread, rice, pasta, bagels, cereal, oatmeal, etc.).
- Chew foods 30 times per bite.
- Separate food and drink by 30 minutes.
- Take time for each meal. Sit down, eat slowly and enjoy your food.
- Don't eat at your desk, in the car or in front of the television or computer.
- Engage in regular physical activity.
- Stop drinking high calorie beverages (Starbucks, Jamba Juice, fruit juice, soda, energy drinks).
- Take your vitamins and minerals every day for life.





Surgery is just the beginning!

For the rest of your life, you MUST:

- Exercise
- Follow a low calorie/high protein diet.

Try this mindful eating exercise:

Learning to eat mindfully is essential to long term weight loss maintenance. It takes practice. Be patient with your learning process. Use the table on the next page, at least once a month for the rest of your life to pick up on non-mindful eating practices.

- Tune in to your body's sense of hunger.
- Start eating only when you experience moderate hunger- NOT just the urge to eat.
- Hunger feels like a hollow or empty feeling in your stomach.
- CHEW your food well before swallowing.
- LOOK up from your plate often.
- PAUSE and ENJOY the taste of what you are eating.
- PUT DOWN your utensils occasionally or between bites.
- Check to see if you are still hungry between bites or have reached MODERATE fullness.
- STOP eating when you are moderately full.



Use the following table at least once a month for a self-check. Rate your hunger both before and after eating on a scale of 0-5, with 0 being not hungry at all and 5 being ravenous.

What you ate	Hunger before	Hunger after	Why did I eat?
	eating rate 0 to 5	eating rate 0 to 5	What was I feeling?

Understanding the relationship between your eating, your hunger, and your emotions is critical to changing NON-HUNGER eating. If you ate for reasons other than hunger (e.g. boredom, stress, "it was there"), identify these and make VERY CONCRETE changes to address NON-HUNGER EATING. For example, if you identify that you eat when you are stressed, address the stress. If you cannot do this yourself, GET HELP. Consider seeing a counselor or psychologist. Be PROACTIVE for your health.



THE EATING PROFILE QUESTIONNAIRE (EPQ) By Cynthia G. Last, Ph.D.

Read each question and circle the answer that best describes your behavior.

1.	Do you often eat standing up?	YES	NO
2.	ls it difficult for you to remember everything you ate today or yesterday?	YES	NO
3.	Do you often eat between meals?	YES	NO
4.	Do you tend to finish your food before others?	YES	NO
5.	Do you often not use plates or utensil when eating?	YES	NO
6.	Do you frequently do other activities while eating?	YES	NO
7.	ls quality of food more important than quantity?	YES	NO
8.	Do you tend to eat slowly?	YES	NO
9.	Do you enjoy trying different types of food?	YES	NO
10.	Do you love high-fat or high-sugar food?	YES	NO
11.	Do you pass on food that isn't tasty?	YES	NO
12.	ls eating one of your greatest pleasures?	YES	NO
13	Are you a nervous or high-strung person?	YES	NO
	Do you often snack when you're tense or uptight?	YES	NO
	Is it hard for you to resist eating something that is right in front of you?	YES	NO
	ls it difficult for you to relax?	YES	NO
	ls the act of eating often more important than what you are eating?	YES	NO
18.	Are you a worrier?	YES	NO
19.	ls it difficult for you to be assertive?	YES	NO
	Do you have upsetting dreams?	YES	NO
	Do you often eat to avoid thinking about upsetting things?	YES	NO
	ls it sometimes hard for you to identify your feelings?	YES	NO
	Do you have problems that seem impossible to overcome?	YES	NO
24.	Are you a people-pleaser?	YES	NO
25	Do you have special feel-good foods?	YES	NO
	Does eating initially give you a lift or a high?	YES	NO
	Do you often feel sad, bored, or down in the dumps?	YES	NO
	Do you often plan out food treats for yourself?	YES	NO
	Are you overly critical of yourself?	YES	NO
	Do you lack energy or enthusiasm?	YES	NO
50.	,		

Last, Cynthia, Ph.D. (1999), The 5 Reasons Why We Overeat How to Develop a Long-Term Weight Control Plan That's Right for You, Carol Publishing Group. 1999. Permission for use granted by Dr. Last.



Scoring your eating profile questionnaire

Use the questionnaire on the previous page to help identify your eating personality. It is beyond the scope of these guidelines to address each of these issues in detail but being able to identify possible areas of weakness will help you to better address them.

Interpretation:

Mostly YES to questions 1-6:

IMPULSE eater: not paying attention, often unplanned meals. Look at the mindful eating tips on the previous pages.

Mostly YES to questions 7-12:

ENJOYS FOOD: These eaters often tend to eat foods high in fat or sugar.

Mostly YES to quesitons 13-18:

STRESS eater: Look in to alternaltives to help address your stress such as mediataion, exercise or yoga. If you are unable to address these on your own, then GET HELP. Consider counseling or psychological assistance.

Mostly YES to questions 19-24:

AVOIDANCE eater: You would rather eat than face a difficult situation or undertake and unpleasant task. You may need training on how to be assertive.

Mostly YES to questions 25-30:

PICK ME UP eater: You use food to try to improve your mood or give comfort. Explore other ways to give yourself a boost. Exercise is a well recognized mood enhancer.



Eating Triggers

Many things can trigger a person to eat when they are not hungry. Identifying your triggers and preparing to handle them can help maintain your weight loss. Below is a list of triggers you may be familiar with. You may have some of your own that are not listed.

- Thoughts and excuses: "It doesn't matter what I eat, I'll never lose the weight" or "I deserve it" or "I've already blown it"
- > Emotions: Boredom, anger, sadness, anxiety
- > Sensations: Fatigue or physical discomfort
- > Dissatisfaction with taste, texture or quantity even when you are full
- ➤ People who encourage you to eat or drink excessively
- > Environmental cues: The mall food court, festivals, fairs
- Parties, holidays, special events, work place break room

MY TRIGGERS: List any triggers for you that are not listed above

- •
- •
- •
- •

Review your action plan. Note things that are working and consider adjustments to your plan for those things that are not working. Use a table similar to this one:

Action/Behavior change	Working or Not Working	Effectiveness and Changes
Example: Bring healthy food to work instead of using vending machine	Working	ContinueI can't believe it's so easy
Snack while watching TV	Not working	It's too hard to just sit thereI'll try knitting while the TV's on



Changing Behavior Tips

Below are suggested diversions and stress management techniques. You can also add to this list yourself. Try to plan in advance for potential "danger situations". Have your technique ready to put into action. Weight loss surgery will not change the stresses you face in life. It is ESSENTIAL that you have ways to lower the impact of these stresses.

Diversions:

To replace my urge to eat I CAN:

Read

Work on a predefined project

Do a puzzle (have one ready)

Call a friend

Take a class

Take up a new hobby

Play an instrument

Walk

Stretch

Go to the gym

Do an exercise video

Environmental Changes:

To help avoid temptation I CAN:

Keep temptation out of the house,

office and car

Avoid places that tempt me

Avoid people that tempt me

Change my routine/route to avoid

temptation

Use the buddy system in places or

situations that tempt me

Stress Management/Relaxation Techniques:

Journal

Deep breathing

Deep relaxation

Take a shower or bath

Talk to someone

Meditate

Listen to music

Yoga

Challenges:

I need to prepare for:

Food available at work

Work/school schedules that interfere

with regular meals

Social eating with family or friends

Ordering meals from menus

Food shopping temptations

The food court at the mall

Travel



Success Habits: Before and After Surgery

Adopting healthy lifestyle changes before surgery is vital to success after surgery.

EAT MINDFULLY

WHAT you eat:

- Eat low-fat **PROTEIN FIRST** at each meal.
- NO high calorie snack food (i.e. ice cream, candy, chips, and seeds).
- NO alcoholic beverages
- NO juice and other high calorie beverages (Starbucks, Jamba Juice etc.).
- NO crash diets such as Slim Fast, Ensure, Atkins, South Beach Diet, etc.
- Always have "safe food" and water in your car, in case of an emergency.

WHEN you eat:

- Eat THREE meals a day: Breakfast, Lunch and Dinner.
- NO SNACKING.
- NO SKIPPING MEALS.
- NO fluids with your meals. STOP 20 to 30 minutes beforehand. Drink fluids 30-60 minutes after meals.
- Complete meals in a timely manner. Avoid grazing on your meals.

WHERE you eat:

- Do not eat on the run, at your desk, in the car, or watching TV. Eat at the table.
- Make healthy choices at restaurants even salads from fast foods chains can contain up to 700 calories or more! Ask for nutrition information or look up restaurant chains online (ex: CalorieKing.com)
- When eating out, ask the waiter to bring you a half order **or** pack up half the order to go BEFORE it is served.
- Pack your meals for work to help avoid poor food choices at work.

HOW you eat:

- Eat S-L-O-W-L-Y, take time to eat.
- Take small bites and chew food 30 times a bite.
- Carefully monitor portion sizes (with a food scale).
- Use a SMALL plate and SMALL spoon.
- Do NOT drink fluids with your meals. STOP 20 to 30 minutes beforehand. Drink fluids 30-60 minutes after meals.
- Stop eating at the first sign of fullness.
- Get involved in a regular EXERCISE routine a minimum of 5 days a week
- Take your VITAMINS every day.
- Join a SUPPORT group



THE BASICS OF BARIATRIC NUTRITION

Calories

Calories are talked about a lot in any discussion of obesity and weight loss. They are necessary to consume and important to understand. A calorie is simply a "unit of energy". Energy is the ability to do work. Work can be physical work, like carrying a suitcase up the stairs, or biological work, like the ongoing beats of your heart pushing blood throughout your body. When the body gets too many calories, from any source – carbohydrate, protein or fat, it will store those extra calories as body fat. When the body uses more energy than it takes in, you will lose weight.

3500 calories is equivalent to approximately 1 pound

If you are currently taking in 3200 calories a day you can lose approximately 4 pounds a week by following a low calorie diet (1200 calories). Your surgeon will ask you to lose weight prior to your surgery and follow a low calorie diet.

EXCESS calories add weight!

100 calories extra a day

36,500 calories extra a year

10 pound weight gain a year

10 pounds a year over 10 years = 100 pound weight gain

Food

Food provides calories which in turn provide the energy we need to get us through our daily activities. Although people eat real food like an apple or a peanut butter sandwich, dietitians describe food by breaking it down into its biochemical components which are: carbohydrate, protein and fat. If you have surgery, you will need to work with a dietitian who will address your individual nutrient needs to prepare you for both before and after surgery.



Protein

Protein is a primary component in every cell and tissue in the body. It is used to make hair, skin, nails, muscles, organs, blood cells, nerves, bone, brain tissue and more!

Importance of Protein

An adequate protein intake is important following surgery. Since your stomach capacity if severely restricted, you must be sure to eat enough protein every day to keep you healthy.

Protein is necessary to:

- Preserve muscle tissue and allow the body to lose fat instead of muscle
- Allow wounds to heal properly
- Prevent protein deficiency
- Reduce your hunger. Protein is more satisfying and filling than carbohydrates. You are less likely to feel the need to snack between meals.
- Women need about 60-70 grams of protein a day; men need about 70-80 grams
- ➤ Foods that are high in protein include lean red meats, pork, poultry, fish, dairy, cheese, eggs, tofu and seafood
- ➤ At each meal, **CONCENTRATE ON EATING YOUR PROTEIN FOODS FIRST.** This helps you meet your protein needs before filling up on other foods.
- ➤ Be sure to **select lean sources of protein** to help keep your total fat intake low and to help prevent unwanted weight gain. The table on the next page lists the protein and calorie content of various protein-rich foods to help guide your choices.

Protein Deficiency

Signs of protein deficiency include poor wound healing, fatigue, hair loss, muscle wasting and scaly skin.

Keep Proteins Moist

After surgery, many people have difficulty tolerating dry or tough pieces of meat. Chicken breast, pork and steak are some protein foods that may become tough and/or dry. Remember to prepare protein foods using a moist method such as braising, steaming, or cooking in a slow-cooker. Also, preparing foods with a little bit of moisture (such as a low sugar marinade sauce or a small amount of low fat gravy) will also help these dry foods to be better tolerated. Moist protein foods that are often better tolerated include fish, cottage cheese, yogurt, eggs and tofu.



In order to meet your protein needs, you will need to eat approximately **60-80 grams of protein a day**. Most protein foods have 7 grams of protein per ounce. Choose lean meats to limit calories and fat intake. One ounce of protein looks like the size of a domino or golf ball. Three ounces of protein equals approximately 21 grams of protein which is the size and thickness of a deck of cards. Below is a list of protein sources.

Protein Sources

Serving Size	Food	Grams of Protein (per serving)	Calories (per serving)
1	Egg	7 grams	75 calories
2	Egg whites	7 grams	35 calories
¹⁄₄ cup	Egg substitute	7 grams	35 calories
1 ounce	Chicken breast (skinless) Chicken thigh (skinless)	7 grams 7 grams	35 calories 55 calories
1 ounce	Fish (tilapia, salmon, halibut, cod, catfish, trout, mahi mahi)	7 grams	35-55 calories
1 ounce	Ground beef/turkey (lean)	7 grams	35-55 calories
¹⁄₄ cup	Tuna (water packed)	7 grams	35 calories
1 ounce	Shrimp, lobster, crab	5.5 grams	35 calories
1 ounce	Ham (lean)	5 grams	55 calories
1 ounce	Roast beef or lamb	7 grams	55 calories
1 ounce	Pork loin or tenderloin	7 grams	55 calories
¹⁄₄ cup	Cottage cheese (non-fat)	7 grams	35 calories
4	Cottage cheese (low fat)	7 grams	55 calories
1 ounce	Cheese (low fat – regular)	8 grams	60-80 calories
4 ounces	Soy milk	3.5 grams	35-50 calories
4 ounces	Non-fat milk	4 grams	45 calories
	1% low fat milk	4 grams	55 calories
• /	2% low fat milk	4 grams	70 calories
½ cup	Tofu (regular)	5 grams	75 calories
4 ounces	Yogurt (non-fat regular)	4 grams	35-50 calories
4 ounces	Greek yogurt (non-fat regular)	8 grams	35-50 calories
¹⁄₄ cup	Beans/lentils	3 grams	60 calories
½ cup	Vegetables (most)	2 grams	25 calories



Carbohydrates

Carbohydrates are a major source of energy for your body prior to surgery. After surgery, the need for carbohydrates diminishes and protein and fat become the primary energy sources. Your body will still need carbohydrates (for your brain and to fuel muscles for activity). After surgery you will get most of your carbohydrates in the form of fruits, vegetables and dairy, not from bread, pasta, etc.

Simple Carbohydrates: Sugar

Sugar is a simple carbohydrate and is found in many foods. Before and after surgery, it is important to avoid foods that are high in sugar.

Too much sugar can cause:

- Dumping syndrome
- Hypoglycemia
- Slow weight loss by providing extra calories

Read labels carefully to be sure foods are low in sugar.

Avoid foods with more than 5 grams of sugar per serving.

Foods that contain any of the following types of sugars, listed as one of the first 3 ingredients are likely to be high in sugar:

- Sugar
- Brown sugar
- Corn syrup
- High Fructose Corn Syrup
- Modified food starch
- Honey
- Powdered sugar

- Fructose
- Glucose
- Sucrose
- Dextrose
- Maltose
- Maple syrup
- Molasses

Foods high in sugar:

- Gum
- BBQ sauce
- Candy
- Jam/Jelly
- Chocolate milk
- Juice bars
- Sweetened juices
- Fudgsicles
- Sweetened tea

- Donuts
- Pies
- Frozen yogurt
- Honey
- Kool-Aid
- Regular soda
- Ice cream
- Cake
- Popsicles

- Regular pudding
- Tapioca
- Sports drinks
- Muffins



Complex Carbohydrates

Complex carbohydrates (breads, pasta, rice, etc.) can be a problem after surgery because these foods can become doughy and expand in the stomach. In addition, eating too many carbohydrates can fill up the stomach pouch leaving less space for protein foods. These foods should be avoided. When allowed, a small amount of very well toasted bread, crackers and baked potato (no skin) may be eaten after surgery but only after you have eaten your protein food.

A word on "Low Carb" foods

Grocery store shelves are full of "low carb" products. You'll see everything from "low carb" beer to "low carb" vitamin supplements. The use of the phrase, "low carb" is not monitored by the FDA and there is no regulated definition of the term. Some "low carb" products only have 1 or 2 grams of carbohydrate less than the original version of the food. **REMEMBER THAT YOUR PRIORITY IS TO EAT PROTEIN FIRST.** "Low carb" products are often high in fat and contain sugar alcohols, which may lead to gas, bloating and diarrhea.

Sugar-Free Products

Be aware of "sugar-free" products. Most "sugar-free" products are dessert-type foods and have very little to no protein and no nutritional value. "Sugar-free" does NOT mean calorie-free. Calories from use of "sugar-free" products can add up and slow down weight loss. "Sugar-free" products generally contain sugar alcohols or artificial sweeteners, which may lead to stomach discomfort if consumed in excess.

- Aspartame (NutraSweet, Equal): it is hundreds of times sweeter than table sugar. It is found in table sweeteners and in processed baked goods.
- Acesulfame-K (Sunette): this calorie free sweetener is typically listed in the ingredients of processed baked goods.
- Saccharin (Sweet 'N' Low): This sweetener is both hundreds of times sweeter than sugar and contains no calories. It is found both as a table sweetener and in processed foods.
- Sucralose (Splenda): This sweetener is made by taking table sugar and taking its form so that it cannot be digested. Remember to read labels for this product. Many Splenda "blends" contain real sugar and should be avoided because they contribute excess calories.
- Sugar Alcohols (such as maltitol, xylitol, sorbitol, mannitol, isomalt, etc.): These ingredients are usually found in foods marketed to diabetics and are advertised as not contributing to cavities in teeth. Despite the name, sugar alcohols are not the same kind of alcohol found in alcoholic beverages (alcoholic beverages contain ethyl alcohol, which does contain significant calories). Sugar alcohols are not absorbed by the intestines and are a fermentable carbohydrate. This means that containing too much sugar alcohol leads to diarrhea, gas and bloating and may be confused with dumping syndrome.



Dairy Products

Dairy products include milk, yogurt and cheese. These foods are a good source of protein, calcium and vitamin D. Some people become lactose intolerant after surgery. Some patients find Lactaid or low-fat soy milk easier to digest. Processed milk products such as hard cheeses and Greek yogurt are often better tolerated due to their lower lactose content.

Yogurt is an excellent food choice both before and after surgery. Yogurt contains protein and it has a soft texture which makes it easily tolerated after surgery. Greek yogurt provides a higher amount of protein per serving (14-18 grams per serving versus only 6-8 grams for regular yogurt), and is ideal for bariatric patients. However, some yogurts are processed with added sugar and may contribute to Dumping Syndrome. When selecting a yogurt, choose one that has between **15 to 18 grams of "Total carbohydrates"**. Avoid "Fruit on the Bottom" yogurts which are higher in sugar.

*For those who cannot tolerate milk, soy milk is an alternative that provides the same amount of protein per serving. If you want to try almond, coconut, or rice milk as an alternative, utilize the unflavored options. Take note, **almond**, **coconut**, **and rice milk are NOT equal in protein** to milk or soy milk (only 2-3 grams per cup versus 8 grams per cup in milk or soy milk). Include other protein sources.

Fat

Fat is a necessary but often overeaten component of the average diet. Fat contains over twice the calories (energy) as protein or carbohydrates, so be careful to avoid foods high in fat. Excessive fat intake before surgery can make it hard to reach your pre-operative weight loss goal. Too much fat after surgery can result in poor weight loss success. Select food items with 3-5 grams of fat per serving.

Types of Fats

There are four different types of fats found in foods: monounsaturated fat, polyunsaturated fat, saturated fat and trans fats. It is important to limit total fat intake to 30-40 grams or less, each day.

Monounsaturated Fat



- Are liquid at room temperature
- Are the most heart healthy of the three types of fats
- Are required for health
- Sources include: olives, olive oil, canola oil, avocados

Polyunsaturated Fat



- Are liquid at room temperature
- Are more heart healthy than the saturated fat
- Sources include: vegetable oil, corn oil, sunflower oil and margarine spreads, fatty fish such as salmon, mackerel, herring, and trout, and flaxseeds, walnuts, sunflower seeds.





- Are solid at room temperature (butter, lard)
- Are found in animal fats and in tropical oils (palm oil, palm kernel oil, coconut oil)
- Eating foods high in saturated fat may increase the risk of heart disease by increasing the LDL or "bad" blood cholesterol

Saturated fats should be chosen less often or avoided by removing the visible fat from meats, selecting lean cuts of meats, removing the skin from poultry products and switching to lower fat cheese or milk products.



Can occur naturally but are most often created artificially by food manufacturers. Trans fats are created in a process called 'hydrogenation' where a liquid oil is converted into a solid fat. Food manufacturers created trans fats to increase the shelf life of foods and to improve their texture and flavor. Foods rich in trans fats include vegetable shortening, some margarines, crackers, cookies, snack foods and other foods made with or fried in partially hydrogenated oils. Trans fat, like saturated fat, raises the 'bad' LDL cholesterol in your blood, which increases your risk for heart disease.

Tips for Low-Fat Eating

- Read food labels! A low-fat food = less than 3 to 5 grams of fat per 100 to 150 calories
- Select skinless chicken, turkey, fish and shellfish instead of fatty meats such as sausage, salami, bacon and high fat beef
- Bake, broil, roast, grill or steam your foods instead of frying
- Use nonstick sprays and/or cookware
- Avoid all fast food
- Choose low-fat and lean foods more often. For example, when you shop for meats look for labels that read 95-99% lean. This indicates that the meats contain a higher percentage of protein than fat
- Cut back on bacon. Bacon is not a healthy low fat choice.

REMEMBER...

Low fat DOES NOT mean low calories.

While low fat is better for your heart, food manufacturers often substitute sugar or sodium to improve the flavor of a low fat product. Make sure, as always, to read your food labels completely. Low sodium in considered to be **140 mg or less** per serving. Look at the fat, sugar, sodium and the total calorie count.



Fluid requirements

Carry a water bottle with you at ALL times.

It is very important that you drink at least 64 ounces of decaffeinated, noncarbonated fluid each day to prevent dehydration. Immediately after surgery, it will be more difficult to drink all 64 oz because of the small size of your stomach pouch.

- You must sip your liquids slowly, consuming about a half cup to three quarters of a cup (4 to 6 oz) every hour between meals throughout the day.
- Consuming the recommended 64 oz will help:
 - Promote weight loss
 - Encourage wound healing
 - Help prevent constipation
- Do NOT drink and eat at the same time after surgery. When you eat and drink at the same time, the fluid liquefies the food and causes it to empty out of the pouch sooner. Empty pouches trigger your body to feel hungry and to want to eat again. It can also stretch out your pouch.
- You must stop drinking 20-30 minutes BEFORE meals. Waiting will allow time for the fluid to empty out of the pouch.
- Wait 30-60 minutes AFTER your meals to begin drinking again.

Recommended Beverages: All of these fluids can contribute to the 64 oz of fluid you need to consume every day.

- Water (#1 choice)
- Crystal Light
- Diet Snapple
- PowerAde Zero
- Aquafina flavored water
- Special K Protein Water
- **Beverages to AVOID:**
 - Regular and Diet soda
 - Fruit juice
 - Carbonated beverages
 - Coffee drinks (iced or blended)/flavored creamers
 - SOBE
 - Sparkling water
 - Whole or flavored milk
 - Milkshakes

- Decaffeinated tea
- Decaffeinated coffee
- Sugar free beverages
- Vitamin Water Zero
- Dasani flavored water
- SOBE Lifewater
- Alcoholic beverages
- Jamba Juice
- Vitamin water
- Energy drinks (Red Bull, Monster, Full Throttle, etc.)
- PowerAde/Gatorade
- Kool Aid/Lemonade
- Sweetened teas

^{*}Avoid carbonated beverages because the bubbles may cause cramping and discomfort. The high calorie drinks listed will impair your weight loss and may cause Dumping Syndrome. These drinks are common reasons for weight gain.



Meal Plan to Help You Meet Your Pre-Surgery Goal Weight

A 1200 calorie meal plan is provided to help you lose weight prior to surgery and is designed to be well-balanced and healthy.

Calories: 1200 calories per day

Protein: 60-80 grams per day

Carbohydrate: 130 grams per day

Fat: 30-40 grams per day

Fluid: at least 64 ounces per day

• Practice principals of mindful eating

• Eat 3 meals per day; no snacking or grazing

• Drink at least 64 oz decaffeinated, noncarbonated fluid per day (8 cups)

• Eat slowly (one bite a minute), chew food completely (30 times)

• In each meal, be mindful of your portion size



Sample Meal Plan

Breakfast	Lunch	Dinner		
2 Protein	3 Protein	3 Protein		
0 Vegetables	2 Vegetables	2 Vegetables		
1 Fruit	1 Fruit	0 Fruit		
1 Dairy	0 Dairy	1 Dairy		
1 Starch	1 Starch	1 Starch		
1 Fat	1 Fat	1 Fat		
Beverage between meals				

Sample Meals

Breakfast Lunch Dinner 1/4 C low fat or fat free cottage cheese 3 oz low fat turkey (3 protein) 3 oz broiled halibut (3 (1 protein); 1 egg scrambled (1 protein) protein) 2 C salad greens with cucumbers, 1 C steamed broccoli (2 veg) tomatoes (2 veg) 1 med apple (1 fruit) 1 C strawberries (1 fruit) 1 C fat free milk (1 dairy) 1 C fat-free low sugar yogurt (1dairy) 1 slice whole grain toast (toasted) ½ c small potato (1 starch) 5-6 Saltine crackers (1 starch) (1 starch) 1 tsp margarine (1 fat) 1 tbsp low fat salad dressing (1fat) 1 tsp margarine (1 fat)

Breakfast	Lunch	Dinner
½ C egg substitute (2 protein)	3 oz Tuna fish (canned in water)	3 oz skinless chicken breast (3
	(3 protein)	protein) Stir fry:
	1 C raw vegetables (1 veg)	½ C diced onions and ½ C
		mushrooms (1 veg), ½ C
		broccoli, ½ C peppers (1 veg),
		½ C baked yam or sweet
		potato
1 med orange (1 fruit)	½ C fresh fruit salad (1 fruit)	
1 C non-fat milk (1 dairy)		1 C nonfat low sugar free
		yogurt (1 dairy)
1 slice bread (very well toasted)	6 whole wheat crackers (1starch)	
(1 starch)		
1 tsp margarine (1 fat)	1 tbsp low fat mayo (1 fat)	1 tsp olive oil (1 fat)



Each Item (Dot) Equals One Serving

Very Lean Protein choices have 35 calories and 1 gram of fat per serving:

One serving equals:

- 1 oz turkey breast or chicken breast, skin removed
- 1 oz fish fillet (flounder, tilapia, sole, cod, haddock, halibut)
- 1 oz canned tuna in water
- 1 oz shellfish (clams, lobster, scallop, shrimp)
- ½ cup cottage cheese, nonfat
- 2 each egg whites
- ½ cup egg substitute
- 1 oz fat free cheese
- ½ cup cooked beans (black, kidney, chickpeas, or lentils) count as 1 starch AND 1 very lean protein

Lean Protein choices have **55 calories** and 2-3 grams of fat per serving:

One serving equals:

- 1 oz chicken-dark meat, skin removed
- 1 oz turkey dark meat, skin removed
- 1 oz fish (salmon, swordfish, herring, catfish, trout)
- 1 oz lean beef (flank steak, London broil, tenderloin, roast beef)
- 1 oz veal, roast or lean chop
- 1 oz lamb, roast, or lean chop
- 1 oz pork, tenderloin or fresh ham
- 1 oz low fat cheese (3 grams or less of fat per ounce)
- 1 oz low fat luncheon meats (with 3 grams or less of fat per ounce)
- ½ cup cottage cheese, low fat
- 2 medium sardines

Medium Fat Protein choices have 75 calories and 5 grams of fat per serving.

One serving equals:

- 1 oz beef (any prime cut), corned beef, ground beef**
- 1 oz pork chop
- 1 each whole egg (medium)**
- 1 oz mozzarella cheese
- ½ cup ricotta cheese
- 4 oz tofu (note this is a heart healthy choice)

<u>Vegetables</u> contain **25 calories** and 5 grams of carbohydrate.

One serving equals:

- ½ cup cooked vegetables (carrots, broccoli, zucchini, tomato, onion, cabbage, asparagus, spinach, green beans, okra, bok choy, mustard greens, cauliflower, artichoke, beets, brussel sprouts, celery, mushrooms, eggplant, snap peas)
- 1 cup raw vegetables (lettuce, cucumber, tomato, peppers, onions, jicama) or salad greens
- ½ cup low-sodium, low-sugar vegetable juice

** Choose these infrequently



Milk (fat free and 1%) contains 90 calories and 8 grams protein per serving.

One serving equals:

- 8 oz milk, fat free or 1% fat
- 6 oz yogurt or Greek yogurt, plain, nonfat, low fat

<u>Fruits</u> contain 15 grams of carbohydrates and **60 calories**.

One serving equals:

- 1 small apple, orange, nectarine, peach (size of tennis ball)
- ½ banana
- 1 medium fresh peach
- 1 kiwi
- ½ grapefruit
- ½ mango, papaya
- 1 cup fresh berries (strawberries, raspberries, or blueberries)
- 1 cup fresh melon cubes (honeydew, cantaloupe, watermelon)
- 17 small grapes
- 12 fresh cherries
- ³/₄ cup fresh pineapple
- 1 small tangerine
- ½ cup canned fruit (apricots, fruit cocktail, mandarin oranges, peaches, pears, pineapple)

<u>Starches</u> contain 15 grams of carbohydrate and **80 calories** per serving. Most of these foods contain <u>only 2-4</u> grams of protein and **will not meet protein needs**. Remember untoasted bread, rice and pasta may not be tolerated after surgery. Note- Beans are considered both a starch AND a very lean protein serving and provide 7 g protein per ½ cup.

One serving equals:

- 5-6 whole grain crackers
- 1/2 cup baked potato, yam, sweet
- ½ cup potato, corn
- 1/3 cup brown rice whole grain pasta
- 1/3 cup whole grain pasta (cooked)
- ½ cup whole grain cereal, oatmeal
- 1 slice whole grain bread
- ½ whole wheat pita or whole grain English muffin
- 6 inch corn or whole grain tortilla
- ½ cup beans, cooked (black beans, kidney, chickpeas, lima, pinto, navy, or lentils) count as 1 starch and 1 very lean protein serving



<u>Fats</u> contain 45 calories and 5 grams of fat per serving.

One serving equals:

- 1 tsp oil (vegetable, corn, canola, olive, etc.)
- 1 tsp butter
- 1 tsp trans fat free margarine or spread
- 1 tsp mayonnaise
- 1 T reduced fat margarine or mayonnaise
- 1 T light salad dressing, cream cheese
- 6 almonds, cashews
- 10 peanuts
- 16 pistachios
- 4 halves pecans, walnuts
- 2 T seeds (flaxseed, pumpkin, sunflower)
- 2 T light cream cheese
- 1/8 or 2 slices avocado
- 8 large black olives
- 10 large stuffed green olives
- 1 slice bacon
- ½ T peanut, cashew, almond butter (creamy)

Condiments/Herbs / Seasonings

- Basil
- Parsley
- Curry Powder
- Garlic
- Garlic

Powder

- Marjoram
- Thyme
- Salsa; ½ cup
- Cocoa

Powder

- Nonstick
 - spray
- Oregano
- Cinnamon
- Pickles
- Rosemary
- Ginger
- Soy Sauce
- Onion
 - Powder
- Taco Sauce; 1 tablespoon

• Flavor extracts

(vanilla,

almond,

peppermint)

- Cilantro
- Pepper
- Dill Pickle

Relish

- Saffron
- Salt
- Mustard
- Vinegar
- Lemon Juice
- Hot Pepper

Sauce

• Broth

(chicken or

vegetable)

• Worcestershire

sauce



7 Days of Sample Meals for Reaching Your Goal Weight (1200 Calories a day)

	М 1	T1	W. J	T11	E1	C - 41	C 1
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast	2 oz low fat cheese 1 slice toast 1 tbsp reduced fat/ trans fat-free margarine 1 c skim milk 1 small orange	2 hard boiled eggs, 1/4 c granola, 6 oz low calorie yogurt, 6 almonds, 1/2 medium grapefruit	2 oz deli ham, 1 slice whole grain toast, 1 tbsp reduced-fat/ trans fat-free margarine, 1 c skim milk, ½ c applesauce	2 scrambled eggs, ½ English muffin, 1 tbsp reduced-fat/trans- fat free margarine, 6 oz low calorie yogurt, 1/3 small cantaloupe	2 oz string cheese, ½ English muffin, 1 c skim milk, ¾ c blueberries, 1 tsp butter	Omelet made with 2 egg whites, 1 oz low-fat cheese, 1 tsp canola oil, 1 slice toast, 6 oz yogurt, ½ banana	1 oz turkey sausage, 1 fried egg white with 1 tsp canola oil, ½ English muffin, 1 c skim milk, 15 grapes
Lunch	3/4 c low-fat cottage cheese 1/2 English muffin, 2 c carrots, sliced cucumbers, 2 Tbsp low-fat salad dressing, 1 small peach	½ c tuna salad, 1 slice whole grain bread, 2 c lettuce, tomato and cucumber salad, 2 Tbsp low-fat dressing, 1 ¼ c strawberries	2 oz turkey breast, 6 crackers, 2 c baby spinach and sliced tomatoes, 1 Tbsp fat-free dressing, 1 small pear	½ c chicken salad with 1 c celery, onions, pickles, 1 Tbsp light mayonnaise, 6 wheat crackers, 1 c sugar-free Jell-O with ½ banana and fat-free cool whip	2 Tbsp peanut butter, 1 slice whole grain toast, 1 c carrots, 1 Tbsp light ranch dressing, ½ c cottage cheese, ½ pineapple	1 chicken leg with low sugar BBQ sauce, ½ c baked potato, 2 c green beans, 1 Tbsp light margarine, 1 ¼ c watermelon	3 oz shrimp sautéed with 1 tsp olive oil and garlic, ½ c linguini pasta, 1 c broiled eggplant, 12 cherries
Dinner	3 oz top sirloin steak, ½ c baked potato, 1 Tbsp light sour cream, 1 c green beans, 1 c skim milk	3 oz pork tenderloin, 2 small oven browned potatoes, 1 c asparagus spears, 1 c skim milk	3 oz chicken breast, ½ c potato, 1 c zucchini, 1 c skim milk	1 stuffed green bell pepper with 3 oz 10% fat ground beef and 1 6" tortilla, 1 c salad with 1 Tbsp low-fat dressing, 6 oz yogurt	3 oz broiled halibut, ½ c potato, 1 Tbsp trans-fat free margarine with a dash of parmesan cheese, ½ c tomato, ½ c broccoli, 1 c skim milk	4 small turkey meatballs, ½ c spaghetti sauce, 1 c cooked green beans, 1 slice garlic toast made with 1 tsp butter and garlic powder/salt, 6 oz yogurt	1 chicken taco: 1, 6" tortilla, 2 oz chicken, 1 oz low-fat cheese, lettuce, tomato, 1/8 avocado, ½ c salsa, 1 c skim milk



Nutrition Guidelines for Weight Loss Surgery Patients

Read these guidelines carefully

Once you have decided to have weight loss surgery, you MUST make significant changes to your eating and lifestyle habits. THIS SURGERY IS NOT A QUICK FIX OR DIET. Surgery is a tool for you to use to achieve weight loss and improve your quality of life. Once you have surgery, your stomach will be forever changed and you must maintain healthy eating habits for a LIFETIME. In order to achieve weight loss and maintain good health, it is important to develop and maintain proper eating habits before and after surgery. Failure to modify eating habits will result in weight regain and possible complications.

Your New Anatomy & Nutrition Basics

The size of your new stomach will be approximately 1 oz. (2 Tbsp). With such a small stomach size, the nutritional value of the food you eat becomes very important. Only foods with high nutritional quality should be eaten, such as protein, vegetables, and fruits. Food of low nutritional quality such as popcorn, chips, and candy should be avoided. If you overeat or eat past the point of feeling full, you will feel very uncomfortable and may vomit. If you snack frequently throughout the day or drink high-calorie beverages, you will not lose as much weight as you potentially could and will regain weight. To lose weight, you must eat at least three small well-balanced meals each day and avoid snacking and high-calorie beverages.



Vitamin and Mineral Supplements

Appendix A: Vitamin/Mineral List

Appendix B: Vitamin Timing Chart

Appendix C: Supplements: What to Choose



Vitamin Information – Gastric Bypass/Sleeve Take Vitamins For <u>THE REST OF YOUR LIFE</u>

WHAT	HOW MUCH	WATCH OUT!	WHY	WHEN
Multivitamin (with iron) Regular	1 TWICE a day Chewable Centrum® lacks Selenium, but you can take Selenium as 200mcg 3x/week in ADDITION to Centrum® chews *If you select ProCare, Celebrate, OR Bariatric Advantage Multivitamins, you would then only take additional 1500mg/day Calcium Citrate, UNLESS OTHERWISE DIRECTED.	AVOID AGE or SEX specific: prenatal, men's women's, kid's – these lack minerals. NO GUMMIES, NO PATCHES Get a brand containing IRON GOOD: Adult Centrum, Walmart Equate, Costco Kirkland Adult Daily Multi *ProCare Health Bariatric Multivitamin with 45 mg iron (1 per day), *Bariatric Advantage Ultra Multi with Iron (3 per day), *Bariatric Advantage Advanced Multi EA Chewable (2 a day), *Celebrate Multi-Complete 45 with iron (2 or 3/day)	Prevents deficiency in: Vitamin A Vitamin K Copper Zinc (vision, clotting, bone marrow, skin problems) www.procarenow.com www.bariatricadvantage.com www.celebratevitamins.com	Start taking months BEFORE surgery. RESUME on day 5 after surgery
B12 (CYANOCOBALAMIN)	Minimum 3,000 mcg Total per week 1,000 mcg daily is okay	UNDER THE TONGUE ("sublingual") Will NOT be absorbed if swallowed	Prevents Brain and nerve damage Anemia	Start taking months BEFORE surgery. RESUME on day 5 after surgery
В1	50-100 mg of B1 (thiamine)	Continue this EVEN if you have nausea and vomiting. Deficiency occurs very quickly.	Prevents • Brain and nerve damage	Start taking months BEFORE surgery. RESUME on day 5 after surgery
Vitamin D (In addition to Vitamin D in Calcium Citrate)	2,000 iu D3 or D2 a day	MINIMUM 4,000 iu TOTAL per day 800 from 2 multivitamins + 1,500 IU from calcium plus D+ 2,000 IU vitamin D tablet	Prevents Bone disease Muscle & bone pain Fatigue & falls	Start taking months BEFORE surgery. RESUME on day 5 after surgery
Iron Ferrous fumarate Or Ferrous gluconate (approx 60 mg iron)	Menstruating women need DAILY iron. EVERYONE needs iron eventually. NO Ferrous Sulfate NO slow release	HELPS absorption: Vitamin C 500 mg. NOT orange juice. PREVENTS absorption so take 2 hrs APART from these: Tea, meals, multivitamin, calcium Severe deficiency: Ferrimin 150	Prevents • Iron deficiency anemia	Iron is easiest to take JUST BEFORE BED TIME. RESUME Two weeks after surgery.
Calcium CITRATE plus D LOOK at the serving size	1500 mg/day total 2 tablets three SEPARATE times per day is best.	DO NOT take calcium carbonate (Tums/Caltrate/Viactive/Oscal) It is NOT absorbed GOOD: Citracal®, Equate CHEWS: Bariatric Advantage, Celebrate LIQUID: Nature's Way 1 Tbsp 3x/day	Prevents	RESUME Two weeks after surgery.

Revised 10.14.19

Daily Vitamin Timing Chart

	BREAKFAST	LUNCH	DINNER	BEDTIME
Regular Multivitamin (with Iron) - 1 twice a Day *Please see comment	0			
below	1 Multivitamin		1 Multivitamin	
Sublingual B-12 Minimum 3000 mcg a week	Sublingual B-12			
B-1 (thiamin) – 50-100 mg/day	1 B-1			
Calcium Citrate plus D 1500 mg a day total split into 3 doses of 500 mg each	00	00		
	2 Ca Citrate OR 1 Tablespoon Wellesse	2 Ca Citrate OR 1 Tablespoon Wellesse	2 Ca Citrate OR 1 Tablespoon Wellesse	
Vitamin D (in addition to Vitamin D in calcium Citrate and multi)	1 vitamin D (2000 IU)			
Ferrous Fumarate or Ferrous Gluconate (with 500 mg Vitamin C) 60 mg elemental total				1-2 iron with vitamin C (2 hours apart from tea, meals, multivitamins and calcium

^{*}If you take the ProCare Complete Multivitamin (1 a day), Bariatric Advantage Ultra Multi with Iron (3 a day), or Bariatric Advantage Advanced EA Chewable Multivitamin (2 a day), you would only need to take 1500 mg additional Calcium Citrate as shown above. If you have the gastric bypass, you would KAISER PERMANENTE, also need to add in separate sublingual B12 daily.

You would not take any other individual vitamins or minerals separately unless instructed to do so.



Fresno Medical Center Bariatric Program Vitamin Supplements: What to Choose and What to Avoid

Multivitamin Brands to Choose:

Adult Daily Formula Multivitamin and Mineral (Kaiser) Centrum Adult (tablet or chewable) Equate (Walmart) Complete Multivitamin Bariatric Advantage Ultra Multi with Iron – (3 a day) Procare Health Bariatric Complete Multivitamin (1 a day) Kirkland (Costco) Regular Multivitamin with Minerals CVS Adult Multivitamin Walgreens Adult Multivitamin Target Multivitamin and Mineral for Adults

Bariatric Advantage Advanced Multi EA chews (2 a day)

Multivitamin Brands to Avoid:

Centrum Liquid Formula Lil'Critters or Adult Gummi Vites Viactiv Multivitamin Chews and Flavor Glides Mega Multivitamins Prenatal Vitamins Nature Made Diabetes Health Pack Multivitamin for Women/Men 50+ Flintstones Juice Plus Centrum Silver VitaFusion Gummy Multivitamin

Tips when Selecting Multivitamins:

- · Avoid men's formulas since most do not contain iron. Everyone needs iron after surgery and taking a multivitamin that is lacking iron could lead to anemia
- · Avoid the "Diabetic Pack" of vitamins. These packs often contain 5 or more pills and can be cumbersome to take.
- · Avoid children's vitamins and gummy vitamins, they are not complete and will not provide you with all the vitamins/minerals in dosages you need after surgery.

Calcium Citrate Brands to Choose:

Tablets: Kaiser Calcium Citrate with Vitamin D (5 total per day), Citracal (red and blue band), Equate (Walmart) Calcium Citrate with Vitamin D

Chewable: Bariatric Advantage Calcium Citrate Chewy Bites 500 mg (3 a day), Celebrate Vitamins Calcium PLUS 500 (3 a day), Celebrate Vitamins Calcet Creamy Bites (3 a day), Twin Lab Calcium Citrate Chewable Wafers (6 a day) (Vitamin Shoppe). Solaray Calcium Citrate Chewable (6 a day) (Vitamin Shoppe)

Liquid/powder: Wellesse Calcium Liquid (3 tablespoons a day) UpCal D Calcium Citrate Powder (3 scoops a day), Now Calcium and Magnesium Powder (8 teaspoons a day), Lifetime Liquid Calcium Magnesium Citrate (3 oz a day)

Tips when selecting Calcium:

- · Avoid Calcium Carbonate supplements. They are not absorbed well in patients who have had gastric bypass surgery. Brands to avoid: Caltrate, OsCal, Viactiv, Nature Made, Oyster Shell Calcium, Tums.
- ·Make sure you are taking 1500 mg of calcium citrate each day. Don't just follow the serving size on the label. You usually need to take 5-6 tablets a day. Most chewable, liquid or powder Calcium Citrate will contain less Vitamin D. You will usually need to take an additional 2000 to 3000 IU of Vitamin D3 a day to equal 4000 IU a day .





After Gastric Bypass/Sleeve Meal Guidelines

Your small stomach pouch is your new "tool" to obtain early satiety (a sense of fullness).

- Eat at least 3 small meals a day without snacking between meals, or discuss with your surgeon.
- To get through the day without hunger between meals, space your meals about 4 ½ to 5 hours apart
- Do not skip meals or you will not meet your protein and nutrient requirements.
- You should also take between 30 to 45 minutes to eat each meal.
- Eating slowly and chewing each bite 30 times will help prevent vomiting and obstructions.
- Do not eat your meal over several hours. "Grazing" will allow you to take in more calories.
- ♦ Do not drink liquids of any kind with your meals. Keeping solid food in your stomach will cause Longer periods of satiety (fullness).

Nutrition Components After Surgery

<u>Calories</u>: initially 400-900 calories per day as you progress through the post-operative stages to approximately 1200 calories a day after one year to maintain weight/loss

Protein: 60-80 grams per day from low fat sources

Carbohydrates: Introduced at 6 months after surgery (see post-operative diet instruction sheet)

Fat: Limit to 30-40 grams per day: choose more mono-and polyunsaturated fats

<u>Fluids</u>: 64 ounces per day minimum: start drinking 30-60 minutes after meals and stop drinking 20-30 minutes before meals

Supplements: See vitamin chart

Shopping List for Bariatric Patients

Tools for Success

- Food scale to measure meat/protein
- Measuring cups and spoons
- Small plate, bowl, fork and spoon
- Counter-top grill (ie. George Foreman)
- Sugar Substitutes (Splenda, Stevia, Equal, etc.)

- Blender (for protein drink)
- Salt, flavoring extracts, mild herbs and seasonings, lemon or lime juice.
- Strainer (to strain chunky soups)
- Non-stick pots and pans
- Food timer
- Food processor

- Ice cube trays (pour soup in ice cube tray and freeze it. You'll have pre-portioned serving sizes)
- Steamer
- Steaming containers for microwave



Protein Supplement Goals Per Serving: 150-250 calories, 15-40 g protein, 3-5 g fat or less, 5 g sugar or less, 15 g carbohydrate or less

If you are lactose intolerant, look for WHEY PROTEIN ISOLATE which is lactose-free. Whey protein concentrate contains lactose.

Walmart	GNC	Costco	Vitamin Shoppe	Trader Joe's
Premier Nutrition (11oz shake)	Nature's Best IsopureZero	Premier Nutrition (11oz	Pure Protein Shake: (11 oz	Pure Protein (11 oz ready-
Per shake: 160 cal, 30 g pro	Carb (powder)	shake) Per shake: 160 cal,	ready-to-drink can) 170 cal, 35 g	to-drink can) 170 cal, 35 g
	Per scoop: 105 cal, 25 g pro	30 g pro	protein	pro
Pure Protein 100% Whey	Nature's Best Isopure Zero	EAS Premium Protein	Nature's Best Isopure Zero	Designer Whey (powder)
protein (powder)	Carb	(powder)	Carb (powder)	Per scoop: 100 cal, 18 g pro
Per scoop: 140 cal, 25 g pro	(20 oz ready-to-drink bottle)	Per scoop: 150 cal, 27 g	Per scoop: 105 cal, 25 g pro	
	160 cal, 40 g pro	pro		
EAS 100% Whey (powder)	GNC Pro Performance 100%	Whey Protein Isolate	Nature's Best Isopure Zero	
Per scoop: 120 cal, 23 g pro	Whey Protein (powder)	(powder)	Carb	
	Per scoop: 130 cal, 24 g pro	Per ounce: 110 cal, 20 g	(20 oz ready-to-drink bottle)	
		pro	160 cal, 40 g pro	
Six Star Pro Nutrition Whey	Optimum Nutrition100% Whey		Cytosport Muscle Milk Light	
Protein Isolate (powder)	Gold Standard		ready-to-drink: 160 cal, 20 g	
Per scoop: 130 cal, 30 g pro	(powder)		pro	
	Per scoop: 120 cal			
	22 g pro			
Cytosport Muscle Milk Light			Vega One *(Vegan Option)	
ready-to-drink: 160 cal, 20 g pro			(powder)	
			Per scoop: 123-137 cal, 15 g pro	

Partial list of Online Resources below:

www.bariatric.eating.com, www.bariatricadvantage.com, www.procarenow.com , www.unjury.com, www.celebratevitamins.com, www.gnc.com, www.BariatricChoice.com, www.obesity.com, www.asmbs.org, www.vitaminshoppe.com, www.optimumnutrition.com, www.eas.com, www.designerwhey.com, www.myvega.com,

This is not an all-inclusive list. Some products may have been discontinued or added.



Foods to Avoid after surgery

The following lists of foods may cause

- Weight gain
- Dumping syndrome (may be caused by sugar or fat intake)
- Pouch intolerance
- Hypoglycemia (low blood sugars)

Starch

Bagels	Donuts	Oatmeal	Rice Cakes
Biscuits	English Muffins	Pancakes	Rolls
Bread sticks	French Toast	Pastas	Stuffing
Bread, untoasted	Grits	Pastry	Tortillas
Cereal (cold/hot)	Muffins	Pita Bread	Waffles
Croissants	Noodles	Rice	Crackers

May Block the Anastomosis

Coconut Popcorn

Dried Fruit Celery, Raw (cooked celery in soup is ok)

Potato Skins Oranges (be careful of the pulp)

Corn Skins and Seeds of Fruits and Vegetables

Gum Hot Dog Skins

May Cause Dumping Syndrome or Hypoglycemia

Ice CreamCandy / Candy BarsCookiesCoffee Drinks/Mochas

Cake Soda

Fruit Juice Frozen Yogurt Juice Milkshake

Smoothies



Foods High in Fat

Creamy SaucesSausageFrench FriesFried FoodPotato ChipsPizzaBaconOnion ringsHash brownsFried Egg RollMayonnaiseSalad Dressing

Miscellaneous Foods

Alcohol

- Will increase your risk of ulcers
- Contains increased LIQUID non-nutritional calories.
- Stimulates appetite
- Contributes to dehydration
- Increases your risk of alcoholism

Your tolerance of any alcohol will be significantly reduced, increasing your risk of DUI.

Remember

- ➤ Milk may cause gas and discomfort after surgery. Try soy milk or Lactaid instead.
- > Steak is very tough and fibrous and may be difficult to tolerate after surgery. You may tolerate ground beef first, then proceed to steaks as tolerated.

COMMON NUTRITIONAL PROBLEMS

Nausea and vomiting: Most common

Nausea typically occurs because of temporary changes to taste and smell after surgery. If you vomit after eating, it is probably because:

- You ate or drank too much at one time
- You ate **too fast** or didn't chew your food thoroughly
- You ate foods that do not agree with you
- You are dehydrated (not enough **fluids**)
- You laid down **too soon** after eating

If nausea and vomiting increase when you advance through the stages of diet after surgery, return to clear liquid diet to rest your pouch for 1-2 days. If these symptoms persist or if you are vomiting regularly, contact the **Bariatric clinic at (559) 448-5111.**



Dehydration: Very common

Cause:

- Drinking less than 64 oz of fluid each day
- Vomiting and/or diarrhea

Symptoms: dark colored urine, little urine output, dry mouth, nausea, dizziness, dry skin

Treatment:

- Drink a minimum of 64 ounces of fluid every day
- Men and active people may need 100 ounces of fluid a day or more
- Sip liquids slowly throughout the day to prevent dehydration (do not sip through a straw)
- Keep water bottles with you as a reminder to drink
- Talk to your doctor if you are experiencing symptoms of dehydration
- Avoid diuretics such as tea and coffee (do not drink beverage with caffeine)

Constipation: Very common

Cause:

- High protein diet lacks fiber
- Not enough FLUIDS
- Limited intake of food and fluid in total
- Lack of physical activity

Treatment:

- Get plenty of exercise since this helps move the bowels
- As you progress your diet (after the first 6 months) try to add more fiber to your food with fibrous vegetables and fruit
 - If you cannot tolerate fruit or vegetables, consider adding a natural fiber supplement, such as **Benefiber** or **Citrucel**. Start slowly and gradually increase over a few weeks. This will help avoid side effects such as gas and bloating
 - Make sure to drink plenty of water if you use these supplements, as they can make things worse if your fluid intake is poor
- Add a stool softener such as docusate sodium (Colace), up to 200 mg twice a day
- Add a laxative, such as, Milk of Magnesia or Miralax daily (your kidney function must be normal)
- Consider adding a probiotic to your daily intake. These healthy bacteria help to digest and absorb nutrition. Brands include Culturelle, Nature Made Probiotic, Pearls, Align, and also consuming foods like Greek yogurt-Tillamook, Chobani.



Gas: Common

Treatment:

- Unfortunately, there is no good treatment other than letting it subside with time
- Avoid spicy and gas producing foods such as cabbage, broccoli and Brussels sprouts
- Avoid sipping fluids through a straw, this may contribute to gas pains from swallowing extra air
- A trial of Gas X or Bean-o is reasonable and will not harm your pouch

Hair Loss: Common

Cause:

- Any major surgery
- Crash dieting
- Major weight loss
- After weight loss surgery, ALL three risk factors are present

Treatment:

- Iron and protein deficiencies can make it worse. Make sure you are taking all of your supplements and adequate protein. Your multivitamin should have at least 15mg of Zinc in it. DO NOT take additional zinc supplements as this can irritate the pouch.
- Avoid traction to your hair, such as aggressive brushing and combing, or tying it up tightly.

Full re-growth of your hair is expected once your body adjusts to the changes.

Changes in Taste and Smell:

After surgery you may experience sensitivity to tastes and smells. For example, foods that you enjoyed before surgery may take on a new flavor and may not be as appealing to you after surgery. Sensitivity to smells such as food odors or perfumes is also common after surgery. Hang in there, these changes usually resolve a few months after surgery.

Dumping Syndrome: "Behavior modification with a vengeance"

Causes:

- Occurs when a large dose of sugar (and sometimes fat) is released rapidly into the small intestine
- Foods or beverages high in sugar (candy, ice cream, pastry, soda, fruit juice and any other food high in sugar)



Symptoms: nausea, cramps, diarrhea, perspiration, weakness and lightheadedness

Treatment:

- Lie down and rest until the symptoms resolve
- It may take 30 minutes to 2 hours or more for symptoms to resolve
- Avoid sugary foods

Although Dumping Syndrome is unpleasant, it is a beneficial part of your new tool and can help prevent you from eating high calorie/high sugar foods that lead to weight gain. However, not everyone will experience dumping. This does NOT mean it is ok to eat or try these foods.

Orthostatic Hypotension: (low blood pressure when you stand up or change positions)

Cause:

- After weight loss surgery, your ability to drink fluids has decreased.
- You are exercising more, sweating more, and losing water and salt as you do so
- You may still be on the high blood pressure medication you took before surgery
- Anemia will make it worse

Treatment:

- Discuss symptoms of dizziness and weakness with your primary care physician (PCP) to confirm the diagnosis
- Try to drink 64 oz of fluids each day or more
- Avoid diuretics such as tea and coffee (including green tea)
- Avoid hot drinks as these can make you sweat and lower your blood pressure further
- Review adjustments to medications with your PCP (especially blood pressure meds)
- Get up SLOWLY. Allow your body time to adjust to the changes in positions

<u>Hypoglycemia</u> (low blood sugars):

Cause:

- This is usually your body overreacting to sugars in your diet by releasing too much insulin which in turn causes low blood sugars. It may take considerable time for your pancreas to adapt. This occurs even if you did NOT have diabetes prior to surgery
- Continued use of diabetic medication as you lose weight
- Very rarely other reasons

Treatment:

- Keep a very careful log of what you eat, when you eat it, and when the symptoms occur
- Check your finger-stick blood sugars if possible to compare food intake and blood sugar levels
- If you need to eat more frequently do not increase your calories, but eat more frequently



- Instead focus on a high protein diet
- Fruit can have natural sugars; limit portions (fruits are started 6 months post-surgery)
- Your diabetic medication may need reduction. CONSULT with your primary care physician
- Consult with your primary care physician to rule out other (rare) causes of hypoglycemia.
- If symptoms persist despite adjusting your diet, please contact your primary care physician.

Weight Plateaus

During the journey of weight loss, it is common for some people to experience periods of no, or very slow, changes in weight. Plateaus are normal and everyone loses weight at different rates. The following list may help you to resume weight loss should you experience a plateau:

- Follow the nutritional guidelines
- Exercise regularly. Remember, the goal is to exercise for 40-60 minutes, 6-7 days a week.
- If you are already exercising, give your metabolism a kick start by changing your exercise pattern (i.e. increase the intensity a little, add 1-2 days a week of strength training, or try a new activity).
- Drink at least 64 ounces of fluid each day.
- Write down everything you eat and weigh and measure your food. Your portions may be creeping up in size, without you realizing it.
- Stick to protein foods first. Some people experience plateaus in weight if they migrate back to eating more carbohydrate foods. Carbohydrate foods will not fill you up the same way protein foods will and may cause you to become hungry again soon after eating. Frequent snacking on carbohydrate foods may cause you to hit a plateau.
- Continue to take your measurements. It can help keep you motivated. You may be losing inches although your weight is stable, especially if you are lifting weights. Muscles weigh more than fat, so the number on the scale may be deceptive.



Additional

Nutritional Resources

Restaurant Survival

As you recover after surgery you will want to resume normal activities, such as occasionally eating out at a restaurant. The following tips can make the difference between an enjoyable night out or a painful experience.

- Select protein foods first.
- Have a meal plan in mind before you go out to eat so you won't be tempted to make an unhealthy food choice once you get to the restaurant.
- If you visit a particular restaurant frequently, take a copy of the menu and research the healthiest options at home.
- Be careful of the kid's menu. It is tempting because of its smaller portions, however, the kid's menu is often high in fat and calories and not a good choice.
- Ask the server to pack up half of the meal before he or she brings it to you. Even a half of a restaurant sized-meal may be too much food for you after surgery.
- Order from the appetizer menu or share the meal with a friend or family member.
- Ask the server to put ALL sauces and dressings on the side. These may be high in sugar and fat and could cause dumping. Bring your own "safe" salad dressings.
- If the menu doesn't appear to have what you are looking for, ask the server for food substitutions. Replace French fries with a salad or steamed vegetables.
- Avoid the bread or chips on the table before the entrée arrives. Filling up on starchy foods will not leave enough room in your stomach for healthy protein foods.
- Select moist foods such as fish. Dry foods are difficult to tolerate and may lead to discomfort.
- Don't try new foods for the first time while eating out. If you are unable to tolerate the new food, it may create an uncomfortable situation.
- Ask your server how a particular dish is prepared. Avoid fried and fatty foods as they will provide extra calories and slow down your weight loss progress.
- Make healthy food choices at fast food places.

High Fat Terms:

Low Fat Terms:

Battered-Fried	Basted in its own Gravy	Broiled	Roasted
Crispy	Hollandaise Sauce	Dry Grilled	Steamed
Fried	Beer Battered	Poached	Charbroiled
Cheese Sauce	Sauté		
Cream Sauce	Butter Sauce		

Pick up a **Restaurant Card** at our office at one of your post op appointments. These cards state that you are only able to eat a small food portion due to surgery. The card may allow you to share a meal or eat for a reduced rate. Remember that restaurants are not obligated to honor the card. Some restaurants will accept it, others will not.

Cooler Emergency Kit

Keep this handy in your car when you are going to a party, friend's house or out to dinner just in case there are no appropriate foods to eat.

Insulated Cooler with ice pack

Drinks:

- Bottled Water
- Crystal Light "On the Go" packs
- Herbal, decaf tea

Food: (keep protein foods refrigerated under 41 degrees Fahrenheit, do not keep at room temperature for more than 4 hours)

- Sliced lean luncheon meat (turkey, ham, roast beef, chicken)
- Hard boiled eggs
- Egg salad
- Low fat cottage cheese, sliced cheese, string cheese
- Yogurt, Greek yogurt
- Tuna/salmon packs canned in water or vacuum sealed
- Low sugar turkey or beef jerky
- Crab/shrimp salad
- Edamame
- Tofu

Others:

- Fresh vegetables
- Fresh fruit (avoid fruit cups or juices with added sugar)

Vitamins and Protein Supplement

• Have a small quantity of vitamins & protein with you in case you are away from home for extended hours to avoid skipping a dose.

Resources

Web General Information

www.nlm.nih.gov/medlineplus/weightlosssurgery.html

www.obesityhelp.com

www.win.niddk.nih.gov/publications/gastric.htm

Food Log / Journaling/Calorie Counting

www.baritastic.com

www.myfitnesspal.com

www.loseit.com

www.mynetdiary.com

www.bariatriceating.com

http://theworldaccordingtoeggface.blogspot.com

http://bariatricfoodie.blogspot.com

www.supermarketsavvy.com

https://foodforhealth.kaiserpermanente.org/

Supplements / Products

www.bariatricadvantage.com

www.celebratevitamins.com

www.procarenow.com

Books:

- 1. Recipes for Life after Weight Loss Surgery, Revised and Updated: Delicious Dishes for Nourishing the New You. Margaret Furtado, Lynette Schultz, Chef Joseph Ewing. 2011.
- 2. Eating Well after Weight Loss Surgery: over 140 Delicious Low-Fat, High Protein Recipes to Enjoy in the Weeks, Months, and Years After Surgery. Pat Levine and Michele Bontempo-Saray. 2004

Pre-Op Very Low Calorie Diet

INTRODUCTION

Your surgeon has recommended you to follow a very low calorie diet prior to surgery. This diet is designed to achieve rapid weight loss through low total calorie intake combined with high protein percentage in the diet. Much of the weight that you will lose on this diet will come from your liver, making your operation easier and less likely to require an open technique (large incision).

Diet

You should start this diet 2 weeks before your surgery date (in some cases 3 week before surgery).

Calories

800 calories each day.

Fluids

You may drink as many **zero calorie** liquids as you like (water, Crystal Light, unsweetened tea, anything sweetened only with NutraSweet or Splenda). In fact, you should drink at least 2 liters of these fluids per day.

Vitamins

Take an adult dose (2chewable multivitamin tablets) of any multivitamin daily. See attached vitamin sheet.

Exercise

Exercise at least 30 minutes 4-5 times per week.

Food

You can use **any high protein diet** (**solid or liquid**) that measures the calories accurately and eat only 800 calories per day with at least 70 grams of protein.

Solid proteins include beef, pork, chicken, turkey, seafood, dairy, eggs, soy. You may also have heart healthy fats such as nuts or avocado. You may also include protein shakes listed on page 42 as a meal replacement. You may include vegetables during this stage except for corn, peas, and potatoes. You will need to exclude all fruits and all starches (all bread, tortilla, rice, pasta, cereal, oatmeal, waffles/pancakes, granola bars).

Protein Food examples:

Canned tuna in Water (2 oz has 60 cal, 14g protein)

3 oz chicken breast (105 cal, 21 g protein)

½ cup skim or 1% cottage cheese (80 cal, 14 g protein)

1 egg, large (75 cal, 7 g protein)

Product examples:

- -Premier Nutrition "HIGH PROTEIN" Shakes: 160 cal, 30g Protein per 11 oz. Higher sodium and potassium content. Can find at Walmart, Costco and online.
- **-Pure Protein Shakes:** 170 cal, 35g protein per 11 oz ready-to-drink can. Can find at Walmart, Walgreens, Target, Vitamin Shoppe, GNC, and online.
- **-Isopure Zero Carb Protein Powder:** 105 cal, 25g protein per 1 scoop, mix with 8-12 oz water. Can find at GNC, Vitamin Shoppe, and online. *This product is Lactose-free*
- **-Isopure Zero Carb Ready-to-Drink Bottle:** 160 cal, 40g protein per 20 oz bottle. Can find at GNC, Vitamin Shoppe, and online. *This product is Lactose-free*
- -Cytosport Muscle Milk Light Ready-to-Drink: 160 cal, 20g protein per 14 oz bottle. Can find at Walmart, Vitamin Shoppe, Costco, and online at cytosport.com. *Some flavors are lactose free*.
- **-EAS 100% Whey Protein Powder:** 150 cal, 26g protein per 2 scoops, mix with 8-12 oz water. Can find at CVS, Sam's Club, Vitamin Shoppe, abbottstore.com
- -Vega One (Vegan option): 123-137 cal, 15g protein per 1 scoop, mix with 8-12 oz water. Can find at Vitamin Shoppe, myvega.com Lactose-free

-Optifast 800 Products:

Optifast Ready-to-drink: 160cal, 14g protein per 8 oz

Optifast Nutrition Bars: 170cal, 14g protein per bar

Optifast Soup: 160 cal, 14g protein per packet

*No more than 1 soup or 2 bars per day.

Optifast shakes and bars can be purchased online.

You can mix the products and create your own diet.

Examples of 800 calorie diets using protein shakes or combination:

- 1. Optifast 800 Ready-to-drink Drink <u>one</u> can 3 times per day and eat <u>two</u> Optifast Nutrition bars in between meals. In this diet **you** <u>cannot</u> have any other food!!! Pair this with at least 64 oz calorie-free, sugar-free beverages in between meals.
- 2. Premier Nutrition High Protein shake Drink one can 3 times per day and for dinner, eat 4 oz skinless, boneless chicken breast paired with ½ cup skim or 1% cottage cheese. Please measure/weigh your food options accurately. Meat should be measured by cooked portion size, not raw weight. Pair this with at least 64 oz calorie-free, sugar-free beverages in between meals. This equals 800 calories/day.

^{*}See page 12 for more protein foods and nutritional information.

Post-Op Instructions (Sleeve/Bypass)

POST-OP DIET PROGRESSION

Day 1-2 Weeks

Weeks 1-2 Post-op: Goal 24-30 g protein/day minimum.

You can use any shake that has 200-250 calories and at least 24 grams of protein in one can. You should drink 2 ounces at a time. No solid foods of any kind for the first 14 days after bariatric surgery. LIQUIDS ONLY!

You may drink as many **zero calorie** liquids as you like (water, Crystal Light, unsweetened tea, anything sweetened only with NutraSweet or Splenda). In fact, you should drink at least 2 liters (64 ounces) of these fluids per day. You have to sip on the fluid all day. Drink a sip of fluid every 10 minutes throughout the day. You have to carry your water bottle with you all of the time.

Examples of Protein Shakes:

- Optisource high protein drink: 200 cal, 24 g protein per 8 oz. Available at Walgreens.com or nestlenutritionstore.com
- Premier Nutrition" High Protein" Shake: 160 cal, 30g Protein per 11 oz. Available at Costco, Walmart, Sam's Club, or www.premierprotein.com
- Pure Protein Shakes: 170 cal, 35g protein per 11 oz ready-to-drink can. Available at Walgreens, Walmart, CVS, Target, Vitamin Shoppe, GNC.
- **Isopure Zero Carb Protein Powder:** 105 cal, 25g protein per 1 scoop, mix with 8-12 oz water. Available at GNC, Vitamin Shoppe, and www.theisopurecompany.com. Lactose-free
- **Isopure Zero Carb Ready-to-Drink Bottle:** 160 cal, 40g protein per 20 oz bottle. Available at GNC, Vitamin Shoppe, and www.theisopurecompany.com online. Lactose-free
- Cytosport Muscle Milk Light Ready-to-Drink: 160 cal, 20g protein per 14 oz bottle. Can find at Walmart, Vitamin Shoppe, Costco, and online at cytosport.com. Most flavors are lactose-free.
- **Vega One (Vegan option)**: 123-137 cal, 15g protein per 1 scoop, mix with 8-12 oz water. Can find at Vitamin Shoppe, myvega.com Lactose-free

These shakes have multivitamins in them. If you drink any other shake that does not have vitamins in it, you should start chewable multivitamins one week after surgery.

Level 1 Diet

	Protein (g)	cal	carb (g)	
Example: Optisource HP Drink	24	200	12	per 8 oz.

3 WEEKS TO 3 MONTHS

¹/₄ cup <u>maximum</u> per meal - starting on Day 15 after surgery

100% Protein

Your stomach is small. Your diet for the next year will be mostly food containing high levels of protein. You should always eat your PROTEIN FIRST. You probably will not have room for any other food, and you may not be able to finish the entire ½ cup. Don't worry. We will add other foods (including fruits, vegetables, etc.) later. Make sure that you eat your protein.

You should be drinking at least 64 oz. (2 liters) of water or other <u>zero-calorie</u> liquid per day. In order to do this, you should sip throughout the day and carry your water bottle **everywhere**, including to your clinic appointments. You will need to drink lots of fluid, but just not during your meals.

Level 2 Diet

Weeks 3-4 Post-op: Goal 25-30g protein/day at least.

Discontinue Level 1 Diet. Start Level 2 Diet (soft foods-see list)

Week 3: Day 15-21	Protein (g)	Size
Cottage cheese, low-fat (1%)	7.0	¹⁄₄ cup
Egg substitute	7.53	¹⁄₄ cup
Egg, scrambled	6.76	1
Egg, boiled/poached	6.29	1
Yogurt, skim or non-fat	3.25	¹⁄₄ cup
Yogurt, Greek skim or non-fat	6.0	¹⁄₄ cup
Peanut butter, smooth, reduced fat	4.01	1 TBSP
Peanut butter, chunky, reduced fat	3.85	1 TBSP
Cheese, low-fat cheddar	6.90	1 oz.
Cheese, part-skim mozzarella	7.36	1 oz.
Cheese, Swiss	7.63	1 oz.
Couscous, cooked	2.0	¹⁄₄ cup
Tofu, soft	4.0	¹⁄₄ cup
Milk, skim	2.065	1/4 cup
Soy milk	2.745	¹⁄₄ cup

Week 4: Day 22-28 Add the following foods to the previous foods.

•	Protein (g)	Size
Beans, black	3.81	¹⁄₄ cup
Beans, kidney	3.6	¹⁄₄ cup
Beans, navy	3.745	¹⁄₄ cup
Beans, pinto	3.85	¹⁄₄ cup
Beans, great northern	3.685	¹⁄₄ cup
Beans, white	4.755	¹⁄₄ cup
Beans, lima	2.97	1/4 cup
Lentils	4.475	1/4 cup

Fish, cod	13.01	2 oz.
Fish, haddock	13.73	2 oz.
Fish, salmon	15.47	2 oz.
Fish, flounder	13.69	2 oz.
Fish, swordfish	14.39	2 oz.
Fish, tuna steak	16.98	2 oz.
Fish, tuna, canned	14.45	2 oz.
Fish, tuna salad	8.22	¹⁄₄ cup
Nuts, cashew	4.6	1 oz. (18 nuts)
Nuts, mixed	4.825	1 oz.
Nuts, pecans/walnuts	2.6	1 oz. (20 halves)
Nuts, peanuts	7.33	1 oz. (28 nuts)
Seafood, clam, canned	14.48	2 oz.
Seafood, oyster	4.97	2 oz.
Seafood, scallop	2.80	1 large
Shrimp	9.89	¹ / ₄ cup (4 XL)
Quinoa, cooked	2.0	¹⁄₄ cup
Avocado	2.0	2 Tbsp

Cook the fish by poaching, baking, grilling or broiling it. DO NOT FRY OR BREAD FISH!

Example 1 – Week 3, Day 15-21

<u>Breakfast</u>	
½ cup scrambled egg	7.0g
<u>Snack</u>	
2 Tablespoons of reduced fat Peanut Butter	8.0g
<u>Lunch</u>	
1/4 cup non-fat or low-fat Greek Yogurt	6.0g
<u>Dinner</u>	
1/4 cup reduced fat Cottage Cheese	7.0g

	28.5g of protein
Example 2 – Week 4, Day 22-28	
Breakfast	
1/8 cup scrambled egg	3.5g
1/8 cup low-fat Greek yogurt	3.0g
<u>Snack</u>	
14 Peanuts	3.66g
<u>Lunch</u>	
1/4 cup tuna salad made with light or no fat mayo	8.22g
Dinner	
4 Large Shrimp or 1/8 cup Broiled fish	5.77g
2 tablespoons low-fat cheese	7.36g

31.76g of protein

Level 3 Diet

Weeks 5-6 Post-op: Goal 30-40g protein/day at least.

Add Level 3 Diet to Level 2.

Week 5 Day 29- 35	Protein (g)	Size
Chicken, breast	14	2 oz.
Turkey, breast/ roast	14	2 oz.

You can cook the chicken by baking, broiling or grilling it.

Remember to remove all visible skin and fat from your meat before cooking it and no breading the chicken.

Week 6: Day 36-42 Add the following foods to the previous foods.

•	Protein (g)	Size
Pork, ham, extra lean	9.8	2 slices (56.7g)
Pork, ham, lean	14.19	2 oz.
Pork, chop	17.11	2 oz.
Pork, loin	16.27	2 oz.
Pork, sausage	5.25	1 patty
Pork, sausage	5.05	2 links
Beef, roast	16.0	2 oz.
Beef, ground, 93% lean	14.69	2 oz.
Beef, top sirloin	16.0	2 oz.
Steak, ribeye	12	$\frac{1}{4}$ cup (1.5 oz.)
Veal, leg	20.49	2 oz.
Veal, rib	13.58	2 oz.
Lamb, shoulder	20.14	2 oz.
Example 1 – Week 5, Day 29-35		
<u>Breakfast</u>		
1/4 cup low-fat Cottage Cheese		7.0g
<u>Snack</u>		
2 tablespoons low-fat cheese		7.36g
<u>Lunch</u>		
½ cup Broiled fish		11.0g
<u>Dinner</u>		
1/8 cup Roasted Turkey		5.12 g
1/8 cup Great Northern white beans	2.38g	
		32.86g of protein
Example 2 – Week 6, Day 36-42		
<u>Breakfast</u>		
½ cup low-fat Greek Yogurt		6.0g
<u>Snack</u>		C
2 Tablespoons of reduced fat Peanut	8.0g	
Lunch		C
1/4 cup broiled Chicken		14.05g
<u>Dinner</u>		2
1/4 cup lean ground beef		11.02g
		Č

39.07g of protein

^{*}Continue eating these foods during weeks 7-12. You will expand your diet at 3 months after surgery.



3 TO 6 MONTHS

½ cup maximum per meal

90% protein

Goal 40-50g protein/day

You may introduce vegetables at 3 months, except for corn, peas and potatoes. You should still eat protein food first and then just a few bites of vegetables. Protein remains the MOST important food.

You should be well adjusted to eating with your new stomach. Continue to experiment with different protein-rich foods and cooking methods. **Keep your portions small!**

6 TO 9 MONTHS

3/4 cup maximum per meal

80% protein

Goal 50-60g protein/day

Your stomach has dilated somewhat. You will probably notice that you can eat more than you could for the first few months after surgery. Continue to eat your protein food first, but you can add a small amount (1/4 cup or less) of fruit, vegetable or carbohydrate (starch) AFTER you finish your protein (1/2 cup) if you have room. You will need to keep your portions small or you will dilate your stomach.

9 TO 12 MONTHS

1 cup maximum per meal

70% protein

60-80 g protein/day

Aim for ½ of your 1cup to be protein food. The other ½ cup can include vegetables, fruit, and starches. Goal is always to eat your protein food first, followed by vegetables second, fruit, and starches as last priority.

AFTER 1 YEAR

Continue to eat your protein food first. You will still need to keep your portions small, at around 1 cup of food per meal. Aim for 60-80 g protein/day. Always avoid liquid calories!

TIPS FOR YOUR DIET

- Do not drink anything 20 minutes before and 30 minutes after your meals.
- Take very small bites of food. Put your utensil down, chew thoroughly and swallow before taking another small bite.
- Take at least 20-30 minutes to eat a small meal.
- You may use small amounts of condiments with your food. Even small amounts of some condiments (ketchup, barbecue sauce, etc.) may cause you to have dumping symptoms because of the sugar they contain. Try diluting them 50/50 with water.
- Stop eating as soon as you feel full. Your stomach will let you know when it is full by:
 - *A feeling of pressure of fullness in the center of the stomach, just below your ribcage.
 - *Nausea. *Pain in the left shoulder or under the breastbone.
- If nausea persists for several days then change your diet back to clear liquids and see if it helps it to go away. If this does not help, then you will need to call our office for further advice.
- You may use Stevia, Equal, Sweet & Low, or Splenda instead of sugar.
- If you do not like skim milk, you may use 1 % milk but do not use any higher percentage.
- You may use Butter Buds, Molly McButter, Pam Cooking Spray and cooking spices.
- After 6 months use bread and toast in moderation. If you do eat bread, only eat one fourth of a piece at your meal. Bread, pasta, noodles, rice, grits, and oatmeal may swell in your stomach after eating. It is best not to combine any of these foods together at one meal. When eating these foods, always eat a smaller amount to accommodate for the swelling. Eat one ounce instead of two.

FOODS TO AVOID

- Avoid corn, cabbage, broccoli, onions until six months after surgery. They can create a lot of gas in your pouch.
- Avoid condiments like butter, gravies, and fatty meat.
- Avoid soups, especially cream soups (unless instructed by your surgeon)
- Protein supplements/drinks (unless instructed by your surgeon) after first 2 weeks. It is preferable to eat your protein sources from food.
- Anything sweetened with real sugar or sugar substance (honey, corn syrup, etc.)
- Cream sauces (Alfredo, hollandaise, béarnaise)
- Gravy- Junk food- Alcohol- Ice Cream- Fried food- Fast food AVOID all sweets and fried foods!!!!

MEDICATIONS AFTER SLEEVE/BYPASS SURGERY

- All medicines should be crushed, chewable or in a liquid form for first 4 weeks after surgery. Medications that are labeled SR (sustained release), XR (extended release) or the like **cannot** be crushed, so you will have to find an alternative. You should discuss this requirement with you pharmacist and the physician(s) who prescribes your medication(s) well in advance of your surgery date.
- You may mix your crushed or liquid medications with water, Crystal Light or food items such as yogurt in order to make them more tasteful.
- After the first 4 weeks, you may take small pills whole but should continue to crush larger ones.
- Medications for other conditions (high blood pressure, depression, etc.) should be resumed as soon as you leave the hospital. You should plan to see your primary care doctor or prescribing physician(s) within 1 month after surgery to review your medications and evaluate the need for their continued use. We recommend making that appointment before your surgery.

MEDICATIONS YOU SHOULD NOT TAKE WITHOUT YOUR SURGEON'S PERMISSION AFTER GASTRIC BYPASS ONLY SURGERY

- NSAIDs including Ibuprofen, Motrin, Naprosyn, Naproxen, Aleve, Indomethacin.
- Aspirin and aspirin containing products including Excedrin, Goody's Powder and BC Powder.
- Oral and IV steroids

Tylenol or any Acetaminophen product is the only acceptable pain reliever medications following gastric bypass surgery.

EXERCISE/ACTIVITY

- At a suitable time every day, walk 15-20 minutes as fast as you can away from your home and back. Each day walk a little faster and farther. Walk every day.
- Gradually increase your distance so that by 2 months you are walking 2 miles per day.
- At the beginning of your exercise, you will not be able to walk far. You may have some shortness of breath and pain in your muscles and joints. These things will go away as you increase your walking.
- Other forms of good exercise are bike riding, swimming, walking on a treadmill and running.

TIPS TO USE AT HOME

- **-INCREASED GAS PRODUCTION:** The most common cause of increased gas production following this procedure is due to a high fat intake in your diet. You may take anti-gas medications such as Beano, Gas-X and Phazyme. You may also try adding Greek yogurt or Acidophilus Milk to your diet. These things help to change the bacterial flora in your intestine.
- **CONSTIPATION:** Constipation is common after Bariatric surgery. If you do not have a bowel movement for 3 days, you can take Milk of Magnesium (30 ml) which is an over-the-counter laxative. You can repeat that if you have no response after 6 hours.
- Do not lift anything greater than ten pounds for 2 weeks after surgery. Ten pounds is equal to a gallon of milk.
- You may drive as long as you feel safe and secure. We do not recommend driving if you are taking a narcotic pain medication like Vicodin.
- You may resume sexual relations when you feel comfortable. It is very important that some method is used to prevent pregnancy. You should not get pregnant during the first 2 years after your surgery. Consult your Gynecologist for the most effective method of birth control for you.

VITAMIN SUPPLEMENTS

Vitamins and minerals perform specific and individual functions in your body. They do not provide any energy, but they do help to maintain the function of cells in your body. Problems can occur if you do not get the proper amount of vitamins and minerals. Once you have been instructed to start taking your vitamins and minerals, DO NOT stop taking them unless instructed to do so by your doctor.

Please refer to your <u>yellow and blue supplement handout</u> provided for supplement recommendations. Do not take your Iron and Calcium supplements together. They need to be taken at least 2 hours apart. Take iron supplement with 500 mg Vitamin C. It helps with absorption.

It is ESSENTIAL that you take your multiple vitamins EVERY DAY for LIFE!!