

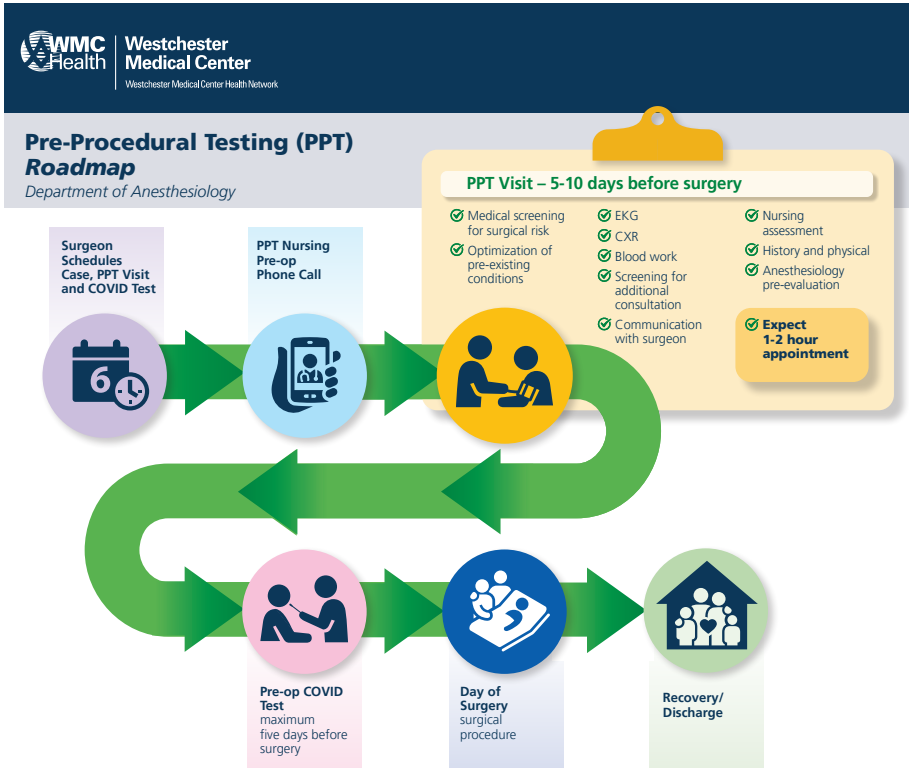
# A General Guide to Enhancing Your Recovery After Surgery



**This booklet can help you  
understand and prepare  
for your surgery.**

Please bring it with you  
on the day of your surgery.

Note: This is an educational guide. It is not intended to replace the advice or instruction of a professional healthcare provider. Contact your surgeon if you have any other questions about your care.



# A General Guide to Enhancing Your Recovery After Surgery

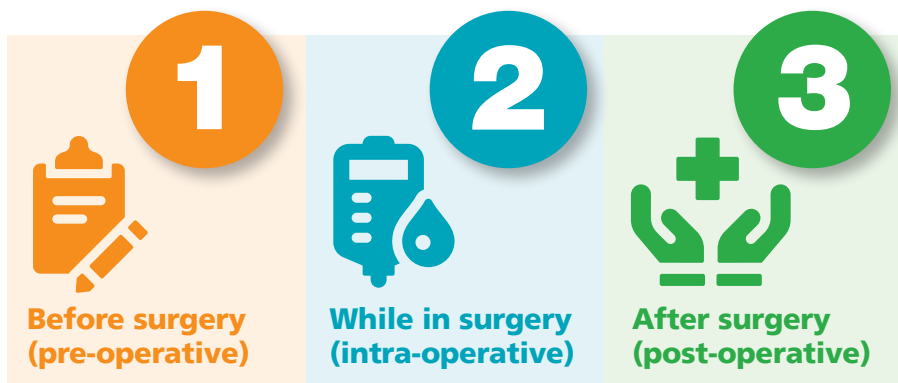
## *What is Enhanced Recovery After Surgery?*

**Enhanced Recovery after Surgery (ERAS®)** is a plan created to help you with your hospital stay, recovery, and discharge. The goal is for you to recover quickly so you can get back to your usual activities as soon as possible. This plan stresses the role of both you and your family in preparing for your surgery, as well as in supporting your recovery.

Research has shown that patients can recover more quickly from surgery when they have a basic understanding of their surgical procedure, eat and drink early after surgery, walk early and often after surgery, and have good pain relief with non-opioid medication.

Our professional team of caregivers includes your surgeon, anesthesiologists, nurses, dietitians, pharmacists, physical therapists, surgical residents, physician assistants (PAs), nurse practitioners (NPs), advanced practice registered nurses (APRNs), patient care technicians, and care coordinators. Each of these professionals will work closely with you to ensure you have a safe and comfortable experience.

**There are three steps to the ERAS plan:**



## Getting Ready for Surgery



You be scheduled for an appointment in Pre-Procedural Testing (PPT) within 30 days before surgery.

### Please follow these instructions to get yourself ready:

- **Follow the pre-op diet instructions provided by your surgeon.** Eat well-balanced meals that include fruits and vegetables.
- **Exercise** will help your body prepare for surgery. Exercise does not need to be hard to be helpful. A 15- to 30-minute walk daily is a good place to start.
- **Avoid or limit alcohol intake.** Do not drink alcohol within 24 hours before surgery. The amount of alcohol you drink can affect you during and after your surgery. It is important that you talk with your healthcare providers about your alcohol intake so that we can safely plan your care.



- **Smoking cessation.** This cannot be emphasized enough. The combination of bariatric surgery and smoking is incredibly dangerous. All bariatric surgery patients must have stopped smoking at least 2 months prior to the procedure. Smoking increases the risk for heart, lung, and surgical wound complications, which will greatly extend your recovery time. The sooner you stop smoking, the better. We have resources available to help you quit smoking.

- **Avoid illegal drug use.** This includes non-prescribed marijuana.



It is very important that you tell your doctor if you are on blood thinners, anticoagulants, anti-platelet medications, or any medication that can increase your risk for bleeding. These medications include, but are not limited to, the following:

Aspirin	Pradaxa (dabigatran)	Lovenox (enoxaparin)
Plavix (clopidogrel)	Effient (prasugrel)	Arixtra (fonadaparinux)
Xarelto (rivaroxaban)	Brilinta (ticagrelor)	
Coumadin (warfarin)	Eliquis (apixaban)	

*Your doctor will instruct you on when to stop taking these medications before surgery. If they have not given you specific instructions, please ask.*



**If you have DIABETES be sure to discuss this during your PPT appointment.**

**Stop taking the following medications** at least 7 days before surgery (unless otherwise directed by your doctor):

- Non-steroidal anti-inflammatory medicines including ibuprofen (Motrin or Advil), naproxen (Naprosyn/Aleve)
- Vitamins, supplements, and herbal products



If you get a cold, are not feeling well, or become pregnant, please call your surgeon's office as soon as possible. Your surgery may need to be cancelled and scheduled for another date.



**You will need a COVID nasal swab test within five (5) days before surgery.**

If you have a positive COVID diagnosis, your surgery will need to be postponed and you will need subsequent negative tests.



## Before surgery (pre-operative)

### *Evening Before Surgery*

You can eat and drink until midnight.

**Do not eat any solid food after midnight or 8 hours before surgery.**



### *Day of Surgery*

**You can drink clear liquids up until 2 hours before you arrive at the hospital.**

- Avoid red colored liquids, carbonated beverages (like soda and seltzer), and diet drinks.
- Do not drink milk or milk products after midnight.
- Do not eat solid food after midnight, unless instructed by your surgeon.

The following clear liquids are acceptable:

- Ensure® Pre-Surgery Clear Carbohydrate Drink (\*given in PPT)
- Water
- Low-sugar non-alcoholic beverages
- Gatorade
- Clear coffee or tea; no milk or cream
- Sugar-free popsicle
- Clear broth/bouillon
- Juices without pulp (no orange juice)
- Sugar-free Jell-O



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# Your Diet and Preparing for Surgery

## Presurgical Diet Guidelines

The presurgical diet guidelines below are for general purposes only. Your physician or surgeon may require you to follow an alternative plan. In that case, follow your physician's instructions rather than the guidelines below.

### The Day Before Surgery

Follow your regular diet.

Do not eat any solid food after midnight (**CLEAR FLUIDS ONLY** after midnight) or 8 hours before surgery.

### Day of Surgery

**IF INSTRUCTED**, drink carbohydrate-rich drink (Ensure® Pre-Surgery Clear Carbohydrate Drink, 10 oz) 2 hours before surgery. Chill, shake well, and consume the drink entirely.

Take **CLEAR FLUIDS ONLY** up to 2 hours before surgery.

**DO NOT EAT OR DRINK ANYTHING AFTER ARRIVING AT THE HOSPITAL.**

## Clear Fluid Guidelines

### Allowed

- Water
- Apple, Cranberry & Grape Juice
- Gatorade
- Black Coffee or Tea (nothing added)
- Clear Broth
- Gingerale and Seltzer
- Ensure® Pre-Surgery Clear Carbohydrate Drink — (if instructed)

### Not Allowed

- Milk or Dairy Products (including in coffee and tea)
- Citrus Juices
- Prune Juice
- Juices with Pulp
- Any food or beverage not listed in the "allowed" column



## Before surgery (pre-operative)

### *On the Morning of Surgery:*

Please follow any specific instructions your surgeon provides to you. If you were instructed to take any medications by mouth, please take them with a sip of water. You should go over this list with your surgeon or the preadmission testing staff. Do not take diabetes medications or blood thinners unless you are instructed to do so by the PPT team or your surgeon.

#### **Remove:**

- Makeup
- Jewelry (including rings and piercings)
- Nail polish
  
- Take a shower.
- Do not use any lotions or creams.
- **Do not shave the area where your surgery is planned.**
- Brush your teeth.



### *Two (2) hours Before Arrival to the Hospital:*

- Drink your clear carbohydrate beverage (not for diabetic patients) as directed by your surgeon or PPT team.
- Do not drink anything else after your carbohydrate beverage.





## *At the Hospital*

When you arrive, you will be checked in and, if there are no visitation restrictions, family members will be directed to the surgical waiting lounge, where they will be expected to maintain social distancing and adhere to other COVID-related safety guidelines.

The pre-operative nurse will help you get ready for surgery.

### **Before surgery:**

- You will be given pills to help with pain. By taking these pain pills before surgery, you may have less pain after surgery.
- You may also get a pill that can help your bowel function return faster after surgery.
- You will meet members of your anesthesia and surgical team to answer any questions.



## *During Surgery (intra-operative)*

Your anesthesia team, surgeon, and surgical team will be monitoring your comfort, body temperature, and vital signs to ensure a safe experience.

You may:

- Be given antibiotics to help decrease your risk of infection.
- Have special sleeves put on your lower legs. These will gently massage your legs to lessen the chances of blood clots forming.



## *After Surgery (post-operative)*

### **Recovery room:**

You will wake up in the Post Anesthesia Care Unit (PACU), where you will continue to be closely monitored. Once you recover from anesthesia you will be taken to your room.

- Some patients are able to return home directly from the recovery area.
- Your surgeon or nurse will let you know when it is safe for you to go home.

## *What to Expect*

Not every patient is the same. This is a general guide to recovery. Some patients may take more or less time to recover.

Your surgical team will see you at least once a day while you are hospitalized. Your team may include surgical residents and Advanced Practice Providers (Physician Assistants [PAs] and Advanced Practice Registered Nurses [APRNs]), who will check on you periodically during the day.

**Pain management:** Some pain can be expected after surgery. Controlling your pain is important because it helps you breathe and move more easily, sleep better, and recover faster.

**Medication:** During and after your surgery, your pain will be controlled using mostly non-opioid medications (for example, acetaminophen [Tylenol]). Non-opioid medications help your organs return to normal more quickly and help avoid side-effects such as constipation, drowsiness, nausea, and vomiting, which are commonly associated with opioid (also called narcotic) medication.



## Rating Your Pain

- Let your healthcare providers know how much pain you are feeling. This helps them adjust your medication to make you more comfortable.
- When describing your pain you will be asked to rate your pain on the pain scale from 0-10. A pain rating of 0 means you have no pain. A pain rating of 10 means you have the worst pain imaginable.
- Our goal is to keep your pain score **below 4, or at a level that is good for you.**

You may also be given a medication to prevent blood clots (most commonly called Heparin or Lovenox [enoxaparin]). This type of medication is given as a shot underneath your skin. It is very important that you receive this medication after surgery in order to decrease your risk of blood clots.

### Pain Scale

0 1 2 3 4 5 6 7 8 9 10



# Treatment Plan after Surgery

Below are daily expectations that need to be completed for a fast and healthy recovery.

<b>Walk</b>	<b>Cough, breathe deeply, and use your incentive spirometer</b>	<b>Tolerate a diet and stay hydrated</b>
<p>Take short, frequent walks. If you're unsteady, do not walk alone.</p> <p>Walk at least once the day of surgery. On the days after surgery try and walk every hour.</p>	<p>This will keep your lungs healthy after surgery and help prevent pneumonia.</p> <p>Cough and breathe deeply every two hours.</p> <p>Use your incentive spirometer 10 times each hour.</p>	<p>Your diet will advance quickly. Follow what your surgeon prescribes.</p> <p>Diets include: Bariatric Step 1 - 3</p>

## Key Points:



### Step 1 Bariatric Diet:

1 ounce of water to start, progress as tolerated to 4 ounces per hour.



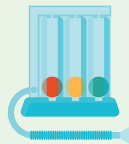
### Step 2 Bariatric Diet:

2-4 ounces sugar-free, non-carbonated clear liquids per hour, up to 40 ounces per day.



### Step 3 Bariatric Diet:

2-4 ounces of protein supplement 3-5 times a day with unrestricted non-carbonated calorie-free liquids. No limit on volume of liquids.



### Incentive spirometer:

helps expand lungs and keep them healthy post-op. Breathe in slowly and deeply, hold breath for as long as possible, then exhale slowly; rest and repeat.



### *Going Home:*

**Your surgeon will decide when you are ready to go home.**

Before you go home, your discharge instructions will be reviewed with you. Discharge readiness may include:

- Being able to tolerate a diet and stay hydrated
- Having your post-operative pain under good control with oral medication (pills)
- Walking safely
- Return of bowel function if indicated by your surgeon
- Having your questions and concerns addressed

**You must have a responsible adult available to drive you home.**

**Call your surgeon if you have any of the following:**

- Increasing abdominal pain or bloating
- Nausea or vomiting lasting longer than 4 hours
- Temperature greater than 101°F
- Feeling like you have the flu
- Sudden increased shortness of breath or chest pain
- Diarrhea that lasts more than 24 hours
- Signs of infection: redness, swelling, increasing incisional pain, foul odor, or drainage from your incisions
- Opening of the suture line
- Redness, pain, or swelling in your legs, especially if just on one leg
- New or unusual bleeding
- New or unusual pain
- Any concerns or questions
- **In an emergency, call 911**

## Notes and Reminders:

# Bariatric Surgery



## **Pre-Procedural Testing**

1st Floor Ambulatory Care Pavilion  
Westchester Medical Center  
100 Woods Road  
Valhalla, NY 10595  
Phone: 914.493.8105

