

Bariatric Timeline for Sleeve Gastrectomy and Gastric Bypass patients

	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5	WEEK 6	WEEK 7	WEEK 8	WEEK 9 to 12	6 MONTHS	9 MONTHS	12 MONTHS	18 MONTHS
FOOD RESTAGING	Smooth fluids & foods only – e.g. Soups, Reddy Brek, yoghurts etc.		Pureed meals, are simply thicker soups. Add protein to soups and blitz		Fork mash soft moist foods Chew well and go slow		Safe to try more solid foods as your tolerance allows. Cut small, chew well and go slow. If you encounter any difficulties with 'hard' foods, then be prepared to go back to a previous stage that was better tolerated. If your dietary tolerance significantly declines, then you may need to go back to stage 1 of the diet and contact your bariatric team						
ACTIVITY LEVELS	Try to be active with 10 minutes continuous walking every day		Gradually increase to 20-25 minutes every day		Wait 8 weeks before you undertake more vigorous and strenuous exercise or swimming. We advise against lifting anything heavier than a kettle of water for the first 8 weeks. As you make progress you should aim towards at least 30 minutes of activity EVERY day								
SUPPLEMENTS Vits & Minerals	We advise that you begin with a chewable or soluble multivitamin and mineral soon after surgery. Take two per day up to week 8. You can then move onto tablets.							On week 8, when your stomach is more able to manage tablets, you can start the full supplement plan as outlined below.					
MEDICATIONS	Your ward pharmacist, or surgical team will advise on soluble medications, liquid alternatives or how to crush medications. Very small tablets are often well tolerated – although, do not take them all at once. Speak to your bariatric team or pharmacist if you are on a lot of medications. Continue to take Lansoprazole, Fastab or Omeprazole as advised.							From week 8, you can resume medications in tablet or capsule form. Avoid non-steroidal anti-inflammatory medications such as Ibuprofen or Aspirin. Continue antacid medications, e.g. Lansoprazole/Omeprazole for a minimum of 3 months after your bariatric surgery.					
REVIEWS	Please look in your bariatric information pack for first hand guidance and contact numbers. If you feel poorly then call your bariatric Nurse or Dietetic team.				Outpatient review with Bariatric Clinical Nurse Specialist at 6 weeks			Diet review		Surgeon review & Bloods	Diet review	Surgeon CNS review	Diet review DC to GP

Sleeve Gastrectomy & Gastric Bypass Vitamin & Mineral Plan – The supplement plan as recommended by BOMSS/UK is the same for both bariatric operations. Supplementation must be continued on daily basis for life. The dose can be adjusted depending on the results of your blood work and the quality of your diet. Patients need to manage a good quantity (at least 60 to 80g) and variety of protein rich foods to help retain lean body mass, encourage hair growth and help with the healing process post-surgery. For vegetarians/vegans and those with a more plant-based diet, or if you struggle with protein foods, it is essential to find a high quality protein powder to add to your meals and drinks to ensure you are meeting the protein guidelines suggested by your Bariatric team. Taking vitamin and mineral supplementations, eating a variety of healthy foods, being active and routinely monitoring your bloods will reduce the likelihood of developing metabolic bone disease or developing neurological problems or micronutrient deficiencies emerging over time. All bariatric patients are at risk of such deficiencies.

- Tablet:** A-Z multivitamins & minerals – 2 a day
 AdCal D3 or equivalent – 2 a day
 Iron – such as Ferrous Fumarate – one a day (some people may require two per day)
 B12 – either injection at GP or oral tablets 1000mcg per day – this may vary depending on your post-op absorption, the balance of your diet and the result of your blood tests.

Bloods: The first post-op blood test should be done at three to six months after your surgery. Please ensure your bariatric team or your GP has done this. Deficiencies must be corrected, and bloods need to be monitored annually for life. Standard blood work must include: Full Blood Count, Iron, Serum Folate, Ferritin, Bone Profile including calcium, phosphate and magnesium, U&E's, LFT's, Vitamin D and Vitamin B12 (if you are not receiving Vit B12 injections).

Please go to link below for additional information and resources: www.stgeorges.nhs.uk/service/surgery/general-surgery/bariatric-service/