Mr Mohamed Atalla
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Bariatric & General Surgeon

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BETTERLIFE SURGERY DISCHARGE INSTRUCTIONS FOR BARIATRIC PATIENTS

Post-operative appointments:

- A phone call with a bariatric nurse practitioner will take place within the first 2 days of discharge to see how you are getting along and answer any queries you may have
- Appointments will be made at the relevant location within 2 weeks of surgery with Mr. Atalla
- Routine follow-up appointments are at weeks 2, 6 and 12, followed by every 3 months during the first year and 6 monthly for the second year

Discharge medications usually include:

- Painkillers – regular Panadol and stronger alternatives will be provided for use as needed, keep in mind that the most painful wound will be on the right side of the abdomen (where the stomach is removed) followed by the upper abdomen (which is used for liver retraction)
- Antinausea – usually taken routinely for first 2 days, taken as needed after this period
- Anti-reflux – 1 tablet to be taken regularly for first 4 weeks

Taking care of wound dressings:

- All dressings are waterproof, please dry after showering
- Spare dressings will be provided if initial dressing is heavily soaked
- Can be removed after 1 week whilst underlying steri-strips will come off eventually

Diet:

- Will be on thin fluids for first 2 weeks, followed by puree diet for the next 2 weeks, then 2 weeks of soft food diet and finally, solids can be gradually introduced from week 6 post-operative
- Please follow instructions provided by our BetterLife Surgery dietician and bariatric nurse practitioner, both can be contacted via the numbers provided if required – please note that an appointment will be scheduled at the end of week 2 to discuss the transition to the next stage of diet
- Initially aim for 1 to 1.5L of clear fluid intake (Optifast/other protein drinks, broth, jelly or anything that can be sucked through a straw) – sipping continually throughout the day is important and be mindful for signs of dehydration (e.g. dark urine, dry tongue)
- If having trouble drinking plain water, consider adding a squeeze of lemon/lime or cordial, you may also try diluted iced tea or no sugar Powerade/Gatorade, this becomes less of an issue with time
- If having trouble consuming protein drinks, there are a variety of options available (e.g. lactose-free, flavoured, unflavoured), this can discussed with our dietitician

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Handling recovery and work:

- Most patients will be able to go back to work after 1 to 2 weeks, depending on the type of work and physical demands for work (e.g. heavy lifting, repeated bending)
- Walking is strongly recommended from day 1 and will reduce risk of developing blood clots
- It is not uncommon to feel fatigued during the first 2 weeks but rest assured that you will feel more energetic shortly afterwards

Driving:

- Avoid driving within the first week, most patients will be able to drive safely by the end of week 2 which may be earlier depending on your rate of recovery

Bowel motions:

- Common to feel constipated after surgery as the body is trying to preserve most of its nutrients but if this becomes an issue then consider prune/pear juice and Movicol sachets
- Consider adding Coloxyl and Senna tablets if constipation continues beyond 4 to 5 days and contact our bariatric nurse practitioner if concerned

Warning signs:

- Occasional nausea and vomiting may be encountered
- Repeated burping indicates that you may be swallowing excessive air, consider using straw with drinks
- Repeated hiccups may cause diaphragm irritation which may be associated with quicker drinking
- If experiencing repeated vomiting, high temperature, short of breath, calf pain or severe dehydration, please contact our rooms at 1300 046 046 for assistance or present to the nearest emergency department who will be able to liaise with BetterLife Surgery for better management