

# Department of GENERAL SURGERY

Patient Guidebook for Enhanced Recovery After Surgery (ERAS) - Bariatric Surgery



## This Book Belongs To:

#### PATIENT STICKER



#### **IMPORTANT**

Please bring this booklet with you when you visit the following:



- Clinic B1C
- PACE Clinic & Anaesthesia
   Counselling
- Pharmacy (Level 2)
- Dietitian

- Physiotherapist
- Day Surgery Centre
- Day of Your Surgery

Date: (\_\_\_\_\_)

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## **Understanding Bariatric Surgery**







**CARE** 

Will be provided by your medical team to ensure the safety of your bariatric surgery. In order to achieve the best results, it is vital that you understand and participate in your treatment process.

## What is Bariatric Surgery?



Bariatric surgery is a medical procedure performed on individuals with severe obesity.



It involves altering the digestive system to promote weight loss and manage obesityrelated health conditions.



The types of bariatric surgery we do in TTSH is sleeve gastrectomy and gastric bypass.



Theses surgeries can lead to significant weight loss and improvements in various obesity-related health issues.

## **Understanding Bariatric Surgery**







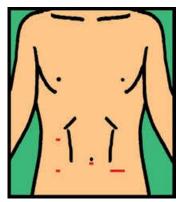
**PROFESSIONALISM** 

**CARE** 

Will be provided by your medical team to ensure the safety of your bariatric surgery. In order to achieve the best results, it is vital that you understand and participate in your treatment process.

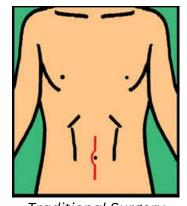
Points that are checked are important and applicable to your surgery.

Either type of cut will be made for this surgery:



Keyhole Surgery

Small cuts in the skin, for keyhole or robotic surgery



Traditional Surgery
A longer cut by the traditional open surgery

☐ Please note that this surgery is not reversible.

Do clarify with your doctor if you have any doubts.

## **Understanding Bariatric Surgery**

There are two main kinds of bariatric surgery



The Sleeve Gastrectomy



Roux-en-Y Gastric Bypass

There are also other types of bariatric surgeries that may be performed.



Your surgeon will discuss these surgeries with you and decide which one is more suitable for you.

After your first surgeon visit, you will be referred to the multi-disciplinary team for your initial assessment and your suitability for surgery. This team consists of:



Endocrinologist



Dietitian



Physiotherapist



**Psychologist** 



Occasionally the Respiratory Physician as well

#### Stop Smoking and Drinking Alcohol

Smoking and alcohol consumption can cause complications to your surgery. Stop smoking and avoid alcohol intake for at least four weeks before your surgery.

If you are undergoing Roux-En-Y gastric bypass, you must refrain from smoking for life. Smoking will significantly increase risk of facing serious complications such as ulcers, which can form holes in your stomach (perforate) or cause bleeding.



#### **Negative Effects of Smoking**

- Decreases your heart and lung function
- Decreases your body's ability to heal
- Increases your risk of developing complications



#### **Negative effects of Alcohol**

- May interfere with anaesthesia
- Decreases your heart and lung function
- Increases your risk of bleeding
- Increases your risk of developing complications

#### Remain Active



Daily exercise is important to keep your body strong and ready for surgery. Continue to exercise or start exercising slowly.



A physiotherapist can help strengthen your body and prepare you for surgery

- Simple exercises such as brisk walking, jogging or swimming for a minimum of 30 minutes a day is strongly recommended.
- Staying active helps you return to normal activities faster after surgery.





Scan the QR code to read 'Physiotherapy Before Surgery'

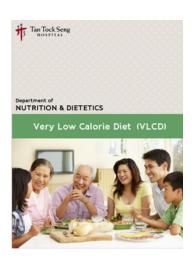
#### Dietary Advice Prior to Surgery

To maximise your weight loss and reduce complications post-surgery, gradual weight loss before surgery is strongly recommended.

☐ See the dietitian at least two weeks before surgery.	
☐ They will advise you on your pre-operative diet	
using meal replacement to be taken at least two	

Please refer to the Very Low Calorie Diet (VLCD) booklet for more information.

weeks before surgery.



☐ If you have diabetes and are on diabetes medication, do seek instructions from your Endocrinologist on any DM medication adjustments that should be made before starting the pre-operative diet.

#### **Multivitamins**

Start prior to surgery and to continue long term.
Any micronutrients deficiency should be replaced before

bariatric surgery.



You can start taking Multivitamins the moment you have been listed for surgery.



Multivitamins help to reduce risk of vitamin deficiency after bariatric surgery.

#### Your doctor will prescribe you a list of multivitamins

For All

**Patients** 

Multivitamins: 2 tablets daily (self-purchase)

Cholecalciferol (Vitamin D3): 3000 units daily / 25,000 ampoule once per week

000

Calcium Carbonate: 1.25g every morning or 625 mg

twice a day

000

Maltofer (iron polymaltose): 100mg daily

#### For patients going for RYGB, take additional:



Princi B Forte: 1 tablet daily

#### For pre-menopausal women:



Maltofer (iron polymaltose): 200mg daily (higher dose)

## Pre-Admission Counselling and Evaluation (PACE)





PACE CLINIC MEDICAL BLOCK, LEVEL B2

You will be reviewed at PACE Clinic by a Nurse and/or Anaesthetist to prepare you for surgery.

## Formulated Carbohydrate Drink

#### Vitaflo Preload (only for NON DIABETIC patients)





Helps you feel less hungry when you fast before surgery



Helps you recover faster and may reduce the length of your hospital stay

#### How to Use Vitaflo Preload

- ☐ You should have been prescribed a total of one sachet of Preload to be taken on the day of surgery.
- ☐ Take Preload at least two hours before your surgery



- Empty one sachet of Preload into 400ml of water. Stir continuously.
   Consume immediately.
- Use a measuring jug to get the right amount of water.
- If you have diabetes, you will not need to take Preload before surgery

## **Activity Booklet**

Record your activities here. Bring this booklet when you visit the hospital, your medical team will be able to improve your care using the information you have provided.



#### 2 Weeks Before Surgery



#### Avoid supplements with the following ingredients:

- Gingko Biloba (X) Ginseng
- ) Garlic Extract 💢 Lingzhi
- All Chinese herbal medications



## 1 Day Before Surgery

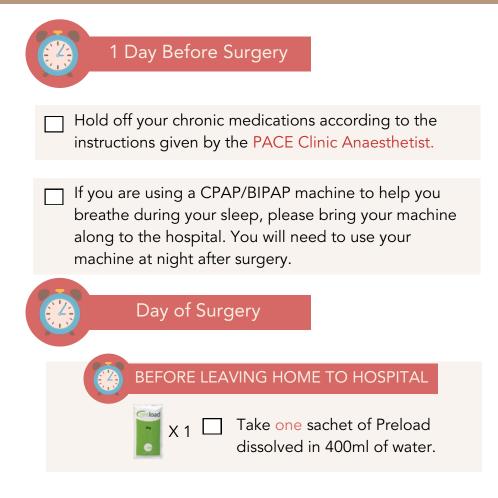




DAY SURGERY CENTRE, TTSH MEDICAL CENTRE, LEVEL 3

You will receive a call from Day Surgery Centre advising you on the reporting time for your surgery.

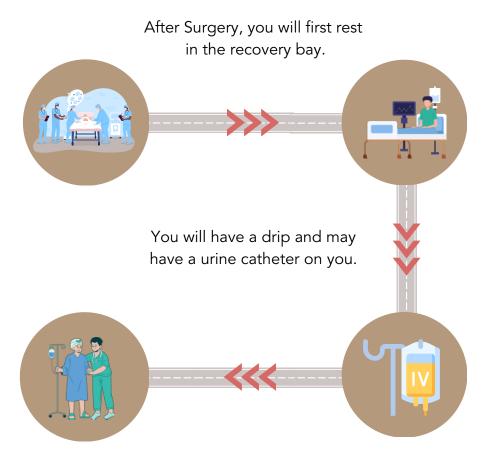
## Activity Booklet



When you arrive at the hospital, head to Day Surgery Centre where your team of doctors and nurses will meet you.

Take Preload at least two hours before surgery.

#### What Happens?



You will be encouraged to walk or sit out of bed for a total of two hours on the same day after your surgery.

#### Dietary Advice



You will be allowed to take clear soups and water. Drink directly from the cup, do not use a straw.



Your stomach will be smaller after surgery. It is normal to feel full faster during meals. If you feel full, slow down or stop eating and resume eating once you no longer have the feeling of fullness.



Drink at least one litre of fluids daily to prevent dehydration.



If you encounter nausea, bloatedness or abdominal pain, inform your nurse or doctor. A dietitian may give you dietary advice before you leave the hospital.



A dietitian will visit you prior to discharge to explain about having a liquid diet for two weeks before the next dietitian appointment.



You will be started on oral nutritional supplements and protein powder as prescribed by the dietitian.

#### Resuming Activities

Day After Surgery

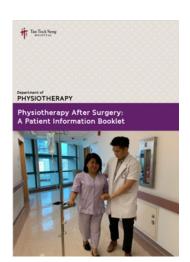
Three hours of sitting on a chair or walking.

2 Days After Surgery

Six hours of sitting on a chair or walking.



Your nurse or physiotherapist will be there to help you. Physical activity increases the speed of your recovery and reduces the risk of complications after surgery.





Scan the QR code to read 'Physiotherapy After Surgery'

#### Reducing Pain



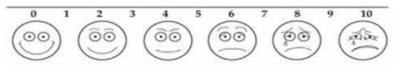
You should be able to move around the ward and eat with minimal pain.



The medical team will ensure you have enough painkillers.



Your doctor or nurse will ask for your pain score. Your score should not exceed 3 out of 10.



Pain Score Scale



If you still have pain after taking painkillers, please inform your doctor or nurse.

#### Discharge from Hospital

You can be discharged when:

you feel little or no pain with oral pain medication
you are able to eat and drink
you are able to move around comfortably
your doctor certifies you fit for discharge

Most patients get discharged 1 - 2 days after



surgery.

A follow-up appointment will be scheduled with your surgeon and dietitian two weeks after discharge.

The subsequent follow-up appointments are as below:

Date	2 weeks	6 weeks	3 months	6 months	12 months
Surgeon	<b>✓</b>		<b>✓</b>	<b>✓</b>	<b>✓</b>
Endocrine/ Dietitian		$\checkmark$	$\checkmark$	<b>\</b>	$\checkmark$
Psychologist			$\checkmark$		$\checkmark$
Physiotherapist		<b>\</b>			
Dietitian	<b>/</b>				

## Discharge from Hospital

## Recovering at Home: Food and Nutrition



You will be placed on a liquid diet for two weeks after the operation until your next dietitian appointment.

Your stomach will be smaller after surgery.
Continue taking your multivitamins. These are the same multivitamins that you took before surgery and will
need to be taken lifelong.



It is normal to have a small appetite after surgery, this will slowly improve after time.

After surgery, you will be also prescribed Omeprazole to reduce the acid levels in your stomach. Please take this as prescribed.

#### Recovering at Home: Managing Pain



You might still experience some pain when you are home and may need to take oral painkillers.

Take oral Paracetamol after discharge.
Reserve the stronger pain medication
for times when you really need it.

## Discharge From Hospital

## Recovering at Home: Exercise



Continue to stay active by going for walks or doing simple chores.

Feeling tired easily after surgery is normal and will improve in a few weeks.

Avoid lifting or carrying heavy loads for two months after surgery.
Week 1 to 2: Ensure you have plenty of rest when you are at home. You may require the help of family members with some of the household chores.
Week 2 to 3: You can slowly increase the amount of activities you are doing at home. You can start to do some light chores, e.g. dusting and wiping table tops.
You will feel increased fatigue from exercise, which could last for several weeks after the operation.



## Discharge from Hospital

#### Questions, Problems and Complications



You will receive a telephone call from your nurse to check on your well-being two to three days after discharge.



If you feel unwell, have a fever, experience worsening abdominal pain or bloatedness, please inform the nurse.

#### Questions?



Bariatric Service Nurse Coordinator
Ms Su Zheng
97209658



Ward 11 Telephone Number: Sister Kong Lan Pei

63572111 / 63572113



If you experience severe pain, fever, vomitting, please contact us immediately.

Come to the Emergency Department for immediate attention if you are unable to reach us.

# Clinic B1C TTSH Medical Centre, Level B1

PACE Clinic
TTSH Medical Centre, Level B2

**Contact:** 6357 7000 (Central Hotline)



Scan the QR Code with your smart phone to access the information online or visit https://for.sg/ttsh-health-library

Was this information helpful?
Please feel free to email us if you have any feedback regarding what you have just read at patienteducation@ttsh.com.sg



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