OhioHealth Weight Management

Surgical Patient Guide

Surgical. Medical. Weight Loss.

Our comprehensive, individualized approach sets us apart.
Learn more at OhioHealth.com/WeightManagement.
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Why OhioHealth Weight Management Is Right for You

OhioHealth Surgical Weight Management provides personalized care to help you transform your health. We offer safe and effective surgical approaches to high quality, sustainable weight loss using advanced minimally invasive techniques. What makes our program unique is our compassionate team approach, providing comprehensive support to help you prepare for and manage this major life change. We are always delighted to see our patients become healthier, resolve the depression they often feel about their situation and become as active as they really want to be.

OhioHealth Surgical Weight Management performs three major types of bariatric surgery laparoscopically: Roux-en-Y Gastric Bypass, Gastric Sleeve procedure and Adjustable Gastric Band.

OhioHealth Surgical Weight Management Has Several Unique Strengths That Are:

+ A deep commitment to caring for you as a whole person
+ A commitment to excellence and personalized care
+ Experienced and caring surgeons who use advanced laparoscopic minimally invasive surgery techniques. Because surgery is performed through tiny incisions, for most patients, the hospital stay is typically two or three nights.
+ The superior care provided by OhioHealth Riverside Methodist Hospital — one of the nation’s best hospitals
+ Support, guidance and therapy to increase activity level

Our Surgical Program

To get your best results, you need more than just an operation. OhioHealth Surgical Weight Management provides a comprehensive multidisciplinary program including:

+ Free seminars
+ Thorough medical review
+ Pre-surgery evaluation
+ Pre-surgery preparation
+ Minimally invasive surgery
+ Excellent care from the Riverside Methodist Magnet nursing team
+ Extensive, specialized nutritional counseling before and after surgery
+ Post-surgery follow-up visits
+ Emotional and relational support
+ Exercise guidance to increase activity level and long-term weight management
+ Compassionate, caring team members who have a passion for working with people of size
What Is Obesity?

Medically significant obesity is defined as obesity that either is causing disease or is highly likely to cause disease. Morbid obesity is often defined as being greater than 100 pounds overweight. More specifically, it is having a body mass index (BMI) of greater than or equal to 40.

BMI is calculated as weight in kilograms divided by height in meters squared. Patients with a BMI between 35 and 40 are considered to have severe obesity and meet criteria for these operations if they are developing obesity-related medical problems, such as diabetes, high blood pressure and/or obstructive sleep apnea.

World Health Organization Weight Definitions

- Ideal weight 20–24.9 BMI
- Overweight 25–29.9 BMI
- Moderate obesity 30–34.9 BMI
- Severe obesity 35–39.9 BMI
- Morbid obesity 40–49.9 BMI
- Super morbid obesity over 50 BMI

The weight of Americans is increasing at an alarming rate. In fact:

- One out of four Americans is considered obese.
- Obesity is the second leading cause of preventable death, second only to tobacco use.
- Obesity is related to approximately 300,000 deaths per year in the United States.
- People with morbid obesity die eight to fifteen years earlier than non-obese people.

Common Health Conditions Related to Obesity

Some common conditions related to obesity include:

- Diabetes
- Depression
- Hypertension
- Joint and back pain
- Sleep apnea
- Hyperlipidemia (high cholesterol)
- Cardiac disease
- Gastroesophageal Reflux Disease (GERD)
- Respiratory disease
- Increased risk of cancer: colon, prostate, breast, uterus, ovary
- Arthritis
- Stress incontinence
- Gallbladder disease
- Infertility
- Menstrual irregularities
# Body Mass Index Calculator

![Body Mass Index Calculator](image)

**Does not meet criteria**  
**Meets criteria if high BP, Diabetes and/or Obstructive Sleep Apnea present**  
**Meets criteria**
Non-Surgical Options for Severe Obesity

There are many non-surgical approaches for attempting to resolve obesity. These include weight-loss programs that are not medically supervised, such as Weight Watchers® or Jenny Craig®, or self-help resources such as those found through the Centers for Disease Control (www.cdc.gov/healthyweight/losing_weight) or WebMD (www.webmd.com/diet). Some primary care physicians may also be able to provide medical treatments or refer patients to a medical weight loss program.

The American Society of Metabolic and Bariatric Surgeons concluded that bariatric surgery provided as part of a multidisciplinary team is “the most effective therapy available for morbid obesity and can result in improvement or complete resolution of obesity comorbidities.”¹ Multiple randomized-controlled trials have shown greater weight loss among patients who have undergone bariatric surgery compared to those receiving conventional medical therapy.²,³,⁴

If You Are Not Sure Surgery Is Right for You

OhioHealth Weight Management offers an excellent, medically supervised, non-surgical weight-loss program. Our multidisciplinary approach addresses the complex nature of obesity by including dietary changes as well as exercise and behavior modification that may be of help to people of size.

This medically supervised program is designed for individuals who desire a non-surgical option for significant weight loss or who are not eligible for bariatric surgery. It includes one-on-one time with our weight-loss experts — physicians, dietitians, exercise physiologists and behavioral counselors — along with weekly group classes to ensure a safe weight-loss experience and provide the support and information needed to achieve life-long success.

Surgical Options for Severe Obesity

Thanks to advances in minimally invasive laparoscopic techniques, more and more people are selecting bariatric surgery to improve their health and begin a new life.

Why Bariatric Surgery?

Only five percent of people who reach the level of weight that meets the criteria for bariatric surgery obtain a significant amount of sustainable weight loss through diet, exercise and/or medications.

Bariatric Surgery Can Help Transform Your Health and Life

Studies show that bariatric surgery resolves all obesity-related health problems, such as diabetes and sleep apnea, in about 80 percent of patients. Bariatric surgery can be truly life changing — physically, mentally, emotionally and spiritually — and you will experience several benefits:

+ Enjoy greater overall health
+ Reduce depression
+ Slow down premature aging and disease
+ Resolve or improve your blood pressure and diabetes problems
+ Resolve acid reflux and urinary incontinence
+ Reduce the painful stress on your weight-bearing joints
+ Lower your risks for heart disease and cancer
+ Decrease menstrual irregularities or complications in pregnancy
+ Regain your strength and improve your performance on the job
+ Breathe better and sleep better
+ Look better and feel better
+ Increase your activity level and begin to enjoy normal activities again

You Can Achieve Sustainable Weight Loss and Become Healthier

There is more hope than ever before for people of size. Many studies have shown that patients who have undergone gastric bypass surgery lose 70 percent of their excess weight within 12 months. Similar results can be obtained with a gastric sleeve.

OhioHealth Surgical Weight Management Provides Three Surgical Options:

+ Roux-en-Y Gastric Bypass
+ Gastric Sleeve Procedure
+ Adjustable Gastric Band
The Laparoscopic Gastric Bypass Procedure

Here is a brief description of the Roux-en-Y Gastric Bypass:

- Six ports between one-fourth inch and one inch (one-half to two centimeters) each are placed in the upper abdomen.
- The stomach is transected with a stapling device to create a gastric pouch the size of a small egg (the rest of the stomach is “bypassed”).
- The intestine is divided approximately 18-inches (30-centimeters) into the small bowel.
- A 40-inch (100-centimeter) Roux limb of small intestine is created.
- A connection between the two portions of the small bowel is then formed.
- One limb of the small intestine is brought up to the stomach to create a connection between the stomach and the small bowel.

OhioHealth Surgical Weight Management has selected this surgical option because it provides good quality, sustained weight loss. In fact, the loss of 80 percent of excess weight at one year is common. Thereafter, there may be some weight gain, but it usually does not approach the previous weight. Significant weight loss of greater than 50 to 70 percent of excess weight is often sustained over many years and decades.

Because of the change in the anatomy in bypassing the stomach and first part of the small intestine, several vitamin and mineral deficiencies can develop. This potential problem is corrected by taking calcium and vitamin supplements. An iron supplement also may be needed, especially for menstruating women. Vitamin and calcium supplements should be continued for life.
Why Select Gastric Bypass?

+ OhioHealth Surgical Weight Management believes Roux-en-Y Gastric Bypass is an excellent choice, especially for those patients who are most interested in resolution of many of their obesity-related health problems, such as Type II diabetes.
+ It offers consistently reliable results. Many studies have confirmed this operation results in an average loss of 70 percent of excess weight.
+ The gastric bypass procedure resolves diabetes and sleep apnea about 80 percent of the time and resolves high blood pressure and elevated cholesterol about 70 percent of the time.
+ There is low risk of obesity recurrence.
+ There are low risks of long-term complications, as long as patients maintain adequate vitamin and mineral supplementation.

Four Reasons Why Gastric Bypass Works

There are four reasons why a Roux-en-Y Gastric Bypass gives superior results. Each of these is important, but together they provide excellent sustainable weight loss.

Gastric Restriction
The size of the functional stomach decreases from a potential volume of approximately two-liters to about the size of a small egg. Because of the decrease in size, it is no longer possible to eat the same volume of food that previously was consumed.

Malabsorption
A portion of the small intestine is either physically or functionally no longer available to absorb nutrients, resulting in weight loss.

Reduced Hunger
A study published in the New England Journal of Medicine suggests there is a hormonal component to this operation. Certain cells found within the wall of the stomach secrete the hunger-stimulating hormone called Ghrelin. This hormone peaks before each meal and stimulates the sense of hunger. After the Roux-en-Y Gastric Bypass operation is completed, this hormone no longer spikes, and presumably no longer causes episodes of hunger. This may explain why many patients do not feel the same level of hunger between meals, which they previously felt.

Biofeedback
Because of the changes in anatomy, when patients eat beyond what is recommended, the excess quickly empties into the small intestine causing a response called “dumping syndrome.” When this occurs, food quickly empties into the small intestine, requiring it to dilute the food quickly with body fluids, instead of allowing the food to be slowly diluted as would a normal sized stomach with a larger reservoir. Symptoms felt by the patient in these instances include a very rapid heartbeat, upper abdominal discomfort, sweating and a general sense of impending difficulty. These symptoms do not resolve for at least 25 minutes. Because of these potential symptoms, patients are more likely to comply with the recommended types of food. Although there have been operations that address some of these components, the Roux-en-Y Gastric Bypass operation addresses all four. Because of that, it is a reliable procedure that results in consistent weight loss that is sustainable throughout a patient’s lifetime.
Before having bariatric surgery, I was as tired every morning when I got up as when I went to bed. Everything was an effort all day long. Now I have more energy, and vitality. I’m happier and healthier!
Laparoscopic Gastric Sleeve Procedure

The gastric sleeve procedure reduces the volume of the stomach to about the size of a small banana. Reducing the size of the stomach also reduces hunger, because the part of the stomach that produces the hormone, Ghrelin, was removed. This hormone is what makes a person feel hungry every few hours.

The Advantages of the Gastric Sleeve Procedure Are:

+ No cutting, bypassing or stapling of the intestine
+ Less concern about vitamin and calcium absorption
+ No adjustments or artificial devices put into place
+ Most foods are possible

After one year, the weight loss experienced by patients who have this surgery is normally slightly less than those who have had the gastric bypass.
## Risks of Laparoscopic Gastric Bypass Surgery or Laparoscopic Gastric Sleeve Procedure

<table>
<thead>
<tr>
<th>Possible Risk</th>
<th>Preventive Measure or Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>A leak from the staple line on the connection between the stomach and small intestine</td>
<td>During surgery, the staple lines are secured with reinforcing material, and the connection between the stomach and small bowel is checked at the end of the operation. Occasionally this requires an urgent second operation to repair.</td>
</tr>
<tr>
<td>Deep vein thrombosis: formation of blood clot in the veins of the legs or pelvis</td>
<td>In the hospital, you will be encouraged to walk soon after surgery and special stockings, leg or foot pumps and blood thinner injections will be used.</td>
</tr>
<tr>
<td>Anastomotic stricture: a narrowing of the connection between the new gastric pouch and intestine occurs as a result of the healing process.</td>
<td>This narrowing can be dilated through a scope as an outpatient procedure, if necessary.</td>
</tr>
<tr>
<td>Pulmonary embolism: a blood clot that travels from the legs or pelvis to the heart and lungs</td>
<td>In the hospital, you will be encouraged to walk soon after surgery and special stockings, leg or foot pumps and blood thinner injections will be used. If you are at high risk, your bariatric surgeon may have a removable filter placed in the large vessel that returns blood to the legs, so that large clots cannot reach the heart or lungs.</td>
</tr>
<tr>
<td>Incisional hernia: a defect in the abdominal wall</td>
<td>Surgical repair of defect. This is rare in laparoscopic surgery.</td>
</tr>
<tr>
<td>Bowel obstruction: scar tissue that creates obstruction or intestinal blockage</td>
<td>Surgical correction of the obstruction</td>
</tr>
<tr>
<td>Marginal ulcer</td>
<td>Managed with medicine, such as a stomach acid inhibitor, and avoidance of nicotine and anti-inflammatories</td>
</tr>
<tr>
<td>Mortality</td>
<td>This is a safe operation. The risk of mortality of a gastric bypass operation is less than 0.5 percent, at 30–days post-op.</td>
</tr>
</tbody>
</table>
Laparoscopic Adjustable Gastric Band

The LAGB is a minimally invasive procedure that places an adjustable band around the upper portion of the stomach. This effectively creates a small stomach pouch above the band with a small outlet to the pouch. The internal diameter of the band can be made smaller, as necessary, by installing a salt water solution into a port your surgeon will place under the skin of the abdomen. This port is connected to a thick walled balloon on the inside of the band. Adjusting the amount of the salt water in the system changes the size of the balloon and therefore changes the size of the outlet to the new small gastric pouch. You and your bariatric surgeon will decide if you need an adjustment of the band based on your weight and how well you are eating.

Why the Adjustable Gastric Band Works

By adjusting the gastric band, the outlet of the small gastric pouch can be set for your unique situation. Our goal is to keep you in the “green zone,” so you feel satisfied with small meals. We do not want the outlet to be too large, or you will not lose weight appropriately. However, if the outlet is too tight, you will not feel satisfied, and your body will be craving food. This may cause you to seek unhealthy high caloric fluids and not lose weight as you should. You will have adjustments to make sure you feel satisfied with small meals and to lose the weight you need to lose to become healthier.

Obtaining Your Best Result

To obtain your best result, you will need to be seen in the office every month for the first year. During each visit, we will determine if an adjustment of the band is necessary. You should lose one to two pounds per week, feel satisfied with small meals and not be hungry between meals.
# Risks of Laparoscopic Adjustable Gastric Band

<table>
<thead>
<tr>
<th>Possible Risk</th>
<th>Preventive Measure or Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slippage of part of the stomach</td>
<td>The band is placed in a stable position through tissue behind the upper stomach and further secured with several sutures.</td>
</tr>
<tr>
<td>Erosion of the band through the stomach wall</td>
<td>The device has been modified to reduce the risk of this happening. The surgeon makes sure sutures are not placed too tightly around the thickest part of the band. If erosion occurs, the band would need to be removed.</td>
</tr>
<tr>
<td>Leak of salt solution from the system</td>
<td>A leak between the port and the tubing can easily be repaired with a minor operation to replace the port.</td>
</tr>
<tr>
<td>Deep vein thrombosis: formation of blood clot in the veins of the legs or pelvis</td>
<td>In the hospital, you will be encouraged to walk soon after surgery and special stockings, leg or foot pumps and blood thinner injections will be used.</td>
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<td>Pulmonary embolism: a blood clot that travels from the legs or pelvis to the heart and lungs</td>
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<td>If you are at high risk, your Bariatric Surgeon may have a removable filter placed in the large vessel that returns blood to the legs so that large clots cannot reach the heart or lungs.</td>
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<tr>
<td>Incisional hernia: a defect in the abdominal wall</td>
<td>Surgical repair of defect. This is rare in laparoscopic surgery.</td>
</tr>
<tr>
<td>Mortality</td>
<td>This is a safe operation. The risk of mortality of this procedure is only about one in 1000.</td>
</tr>
</tbody>
</table>
Laparoscopic Surgery — The Preferred Method

Advanced laparoscopic technology allows the Roux-en-Y Gastric Bypass operation to be performed in a way that is much safer on patients. The surgery is far less invasive than traditional surgery, since it is performed through several small “keyhole” incisions. Patients benefit from:

+ Tiny incisions, resulting in less scarring and easier healing
+ Excellent cosmetic result
+ Less pain
+ Fewer wound complications
+ Faster recovery
+ Shorter hospital stay
+ Resuming physical activity sooner
+ Much less risk of hernia formation
+ Greatly reduced need for a second major operation to repair an incisional hernia

At age 57, my weight was killing me, and I had little hope for recovery. I was taking all kinds of pills for all kinds of disorders. Four months after my surgery, my need for medicine was completely gone! Now, I suspect I'll be around to rock my great-grandchildren!
# Pros and Cons of Three Bariatric Operations

With a thorough understanding of all operations, and after consultation with your bariatric surgeon, you can make the best surgical choice for your situation. All procedures are safe and effective surgical approaches to high quality, sustainable weight loss, but each operation has unique risks and benefits.

**This is a side by side comparison to help you in your decision.**

<table>
<thead>
<tr>
<th></th>
<th>Laparoscopic Roux-en-Y Gastric Bypass</th>
<th>Gastric Sleeve</th>
<th>Laparoscopic Adjustable Gastric Band</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Weight loss</strong></td>
<td>Rapid weight loss (12 to 18 months)</td>
<td>Rapid weight loss (12 to 18 months)</td>
<td>Slower weight loss (3 to 5 years)</td>
</tr>
<tr>
<td><strong>Estimated loss of excess weight</strong></td>
<td>70 to 80 percent</td>
<td>60 to 80 percent</td>
<td>30-50 percent</td>
</tr>
<tr>
<td><strong>Resolution of medical problems</strong></td>
<td>Excellent resolution of medical problems Diabetes: 84 percent High blood pressure: 68 percent sleep apnea Sleep apnea: 80 percent</td>
<td>Good resolution of medical problems</td>
<td>Good resolution of medical problems: Diabetes: 84 percent High blood pressure: 43 percent Sleep apnea: 68 percent</td>
</tr>
<tr>
<td><strong>Return to work</strong></td>
<td>3 to 4 weeks</td>
<td>3 to 4 weeks</td>
<td>1 to 2 weeks</td>
</tr>
<tr>
<td><strong>Supplements</strong></td>
<td>Vitamin and calcium supplements needed</td>
<td>Vitamin and calcium supplements needed</td>
<td>No supplements needed</td>
</tr>
<tr>
<td><strong>Average length of hospital stay</strong></td>
<td>2 nights</td>
<td>2 nights</td>
<td>Approximately 24 hours</td>
</tr>
<tr>
<td><strong>Mortality rate</strong></td>
<td>less than 1 in 200</td>
<td>less than 1 in 200</td>
<td>approx. 1 in 1000</td>
</tr>
<tr>
<td><strong>Office visits</strong></td>
<td>6 the first year</td>
<td>6 the first year</td>
<td>12 the first year</td>
</tr>
</tbody>
</table>
The Criteria for Bariatric Surgery

+ Morbid obesity: Body Mass Index of 40 or above
+ - OR - Body Mass Index greater than 35 with serious co-morbidities, such as diabetes, hypertension, obstructive sleep apnea or cardiovascular disease
+ Age of 18 or above
+ Patients must be an acceptable medical risk (as defined by the medical evaluation)
+ Previous unsuccessful non-surgical weight-loss attempts
+ Patients must attend in person or online an OhioHealth Surgical Weight Management Seminar and review all parts of the Surgical Weight Management program contained in this handbook.

Weight-loss surgery should be considered only for patients with serious obesity, who have not been successful in obtaining adequate weight loss through dietary, behavioral and exercise therapy.

It’s made me reprioritize things in my life, and it’s been such a good investment.

Call (614) 566.2700 or visit ohiohealth.com.
Free Seminars

OhioHealth Surgical Weight Management offers several free seminars each month to help you learn about our services. Each seminar is presented by one of our highly-qualified bariatric surgeons.

In the free seminar, you will:

+ learn about bariatric surgery options at OhioHealth Riverside Methodist Hospital directly from our experienced surgeons
+ learn if you could be a candidate, and learn information to help you decide if this is right for you
+ hear stories from past bariatric patients
+ learn about the OhioHealth Surgical Weight Management program
+ become much more informed about bariatric surgery

If you wish, before you leave your free seminar, you may provide your health insurance information to the OhioHealth Surgical Weight Management Insurance Coordinator, so we can begin to assess your health insurance coverage for bariatric surgery.

Every single person in the program has been super supportive.
Pre-Surgery Education

Meeting With the Insurance Coordinator
Soon after the seminar, you will have an individualized appointment with the OhioHealth Surgical Weight Management Insurance Coordinator. You are encouraged to bring your spouse, family or a friend with you. The Insurance Coordinator will help you thoroughly understand our surgical program and explain your health insurance benefits. If you choose to proceed with our program, the Insurance Coordinator will guide you to the next step.

Bariatric Orientation
Your next step is to attend a Bariatric Orientation class that will provide basic knowledge to help prepare you for your upcoming journey. A representative from Nutrition, Exercise and Behavioral Health will provide a brief presentation. You will receive a journal that will help guide you through your pre-op education, surgical procedure, post-op care and after care services. If you have completed your required labs, you will be able to schedule an appointment for your Medical Evaluation appointment.

Medical Evaluation
In order to make sure that bariatric surgery is appropriate and safe for you, a full medical evaluation is completed. The physician will do a complete physical exam, review your health history and discuss your health status with you. You also will have blood drawn for blood tests, including a complete blood count, chemistry analysis, lipid profile and thyroid studies. A chest X-ray and an EKG are ordered.

If the physician feels you need additional diagnostic testing, these tests will be arranged for you at this time. These may include a cardiac work-up with a stress test and an echocardiogram. Occasionally, catheterization may be necessary. Sleep studies are often a part of this process as well, since obstructive sleep apnea is a frequent medical condition caused by severe obesity. Other studies are tailored to your needs and only those studies necessary for your safety are ordered.

Psychological Evaluation
This is an important element of the program and is specifically designed to prepare you for the many changes experienced after surgery and to support you in developing lifestyle changes that will help you sustain your weight loss. During your evaluation, you will complete psychological testing in addition to an individual interview to help the psychologist learn more about you, and your readiness to make the lifestyle changes required for bariatric surgery. If the psychologist and the interdisciplinary team concludes that counseling or other recommendations are needed to prepare you for optimal post-surgery outcomes, you will be referred to another experienced provider who will assist you in making these changes. This evaluation, and any additional counseling or behavioral services that is required, will help you and the OhioHealth Surgical Weight Management team make a final decision about whether or not you are ready to proceed to surgery.

Dietitian Consultations
One of our specially-trained dietitians will talk with you about your current eating habits and diet. The dietitian obtains a dietary history, helps you plan your pre-operative weight loss, helps you replace any vitamin deficiencies and explains the post-operative nutrition plan. You will learn about the changes you will want to make before surgery and the changes to your eating habits, amounts, frequency and food choices you will make after surgery to help you feel well and be successful as you lose weight.

Throughout your pre-surgery nutrition visits, the dietitian will provide you with extensive training in nutrition. The dietitian will help assess your readiness to make significant dietary changes, and this consultation will help you and the OhioHealth Surgical Weight Management team make a final decision about whether or not you are ready to proceed to surgery.

**Nurse Navigator:** If you have any questions or concerns, your Nurse Navigator will help provide guidance throughout your journey.
Pre-Surgery Preparation

Pre-Surgery Consultation With Your Bariatric Surgeon

After all of your pre-operative work-up and education is completed, and your health insurance approval has been received, you will have your two-hour pre-surgery consultation with your bariatric surgeon and bariatric nurse. During this consult, your surgical operation will be explained to you in detail, you will receive your specific instructions and you will have all your remaining questions answered.

For more information about OhioHealth Riverside Methodist Hospital including maps, directions, parking and information for family and visitors, visit OhioHealth.com/Riverside.

It's the most amazing thing. I'm a new person. I have a new life.
Post-Surgery Treatment Plan

Extensive Nutritional Counseling
After your surgery, you will have three more consultation appointments with the dietitian. Our licensed dietitian will help you change your eating habits and make wise choices through every phase of your program — before, during and after surgery.

Post-Surgery Follow-Up Visits
Post-surgery medical follow-up visits will be scheduled for you with your bariatric surgeon. Patients receive a medical check-up at two weeks, four weeks, eight weeks, six months and one year after the gastric bypass operation and monthly after the gastric band operation. Thereafter, a yearly follow-up by a physician is required to have vitamin and mineral levels checked to make sure there are no deficiencies.

Emotional And Relational Support
Although you may not realize it now, the changes throughout the time of surgery and the positive changes that will occur to your body may have significant impact on your emotions, relationships and self-esteem. At OhioHealth Surgical Weight Management, we offer support groups, individual, family and couples consultations to help you manage this major life change. This provides you with emotional and relational support before and after surgery to help you prepare for what lies ahead and to help you enhance the success of the experience. This is just one more way we treat the whole person.

Increasing Activity Level for Long-Term Weight Management
One of the available services to OhioHealth Surgical Weight Management is the post-op exercise program, which usually begins three to four weeks after your surgery, once your surgeon has approved you to begin this activity.

An exercise physiologist will design a special program specific to your individual needs, including an exercise plan for you to follow at home between sessions. The process starts very slowly and gently, but you will soon be surprised by what you are able to do! This unique feature of our program will help you achieve your weight-loss goals and increase your activity level following surgery. Our patients are surprised by how much they enjoy these sessions that are designed just for them.

One facility we recommend is the McConnell Heart Health Center because of the world-class, comprehensive facilities and highly qualified and experienced staff. For more information about the McConnell Heart Health Center, please visit OhioHealth.com/McConnellCenter.
Getting Started

Additional Requirements
Your insurance company may require a weight history, list of supervised attempts at weight loss and a letter from your primary care physician.

Weight History
This can be obtained from your Primary Care Physician, OB/GYN or any other physician where your weight has been taken periodically. Please make this as complete as possible.

Supervised Attempts at Weight Loss
This could include programs such as Weight Watchers®, Jenny Craig® and any medically supervised weight-loss programs.

A Letter From Your Family Doctor or Primary Care Physician
Some insurance companies require a letter of support. All letters must be typewritten and must be signed by the patient’s family doctor as appropriate. At your first visit with the insurance specialist, an example of a letter will be given to help assist your doctor.

If you are ready to move towards a healthier lifestyle, attending today’s free seminar was your first step. By giving the completed Evaluation Request/Seminar Evaluation to the Seminar Attendant at the conclusion of today’s event, you have officially started your weight loss journey. The Insurance Specialist will verify your insurance coverage and requirements. Please allow 5–7 business days for them to contact you to schedule an appointment to review the details. If you have any questions, please call (614) 566.2700 for details.
I would definitely recommend the program.
Evaluation Request

Date of Attended Seminar: ______________________

☐ In-person Seminar
☐ Online Seminar

I would like to begin the evaluation for weight loss surgery
Please schedule me for an evaluation appointment with OhioHealth Surgical Weight Management

Who was your presenter?
☐ Dr. Sonnanstine, MD
☐ Dr. Rana, MD
☐ Other ______________________

Who was your presenter?
☐ Male
☐ Female

Social Security Number

Date of Birth

Marital Status
☐ Married
☐ Single
☐ Divorced
☐ Widowed

Last name          mi          first name

Address

city          state          zip code

Home phone          work phone          cell phone

Email address

Place of employment

Spouse’s place of employment

Emergency contact name          phone          relationship

Family physician          phone

Referring physician          phone

Primary Insurance Information

Insurance company name          insurance company phone

Insurance company address

Insured name          social security number

Insured’s date of birth          relationship to patient

Group number          insurance i.d. number

Secondary Insurance Information

Insurance company name          insurance company phone

Insurance company address

Insured name          date of birth          social security number

Signature          Date
# Seminar Evaluation

*Please answer these questions to tell us about your experience in the OhioHealth Surgical Weight Management Seminar. Thank you!*

### Who was your presenter?

- [ ] Dr. Sonnanstine, MD
- [ ] Dr. Rana, MD
- [ ] Other _______________________

### Today’s Seminar Date ____________

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>The speakers presented the information in a language that I could understand.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>The information presented was of value to me.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>The speakers showed their compassion for and commitment to people of size.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>The Seminar meeting room was comfortable.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>The time of the Seminar was convenient.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>The length of the Seminar was appropriate.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

### What did you like best about the Seminars? ____________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

### How can we improve future Seminars? ____________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

### How did you hear about this Seminar?

- [ ] Your doctor
- [ ] A friend or relative
- [ ] Online
- [ ] Social Media
- [ ] Workspace
- [ ] Mailing form OhioHealth Surgical Weight Management
- [ ] Other: _________________________

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OhioHealth Weight Management
About OhioHealth Riverside Methodist Hospital

By any measure, Riverside Methodist is one of the best hospitals in the nation. The numerous awards and accolades Riverside Methodist has received mean you can rest assured of receiving the highest quality and most compassionate care available.

+ Riverside Methodist medical professionals are recognized experts in all types of specialized services, including heart care, cancer care, orthopedics, neurosciences and minimally invasive surgery.
+ Riverside Methodist is among the top three percent of hospitals nationwide that have been recognized for providing superior patient care, thanks to the renowned Magnet nursing team.
+ Riverside Methodist is part of OhioHealth, a faith-based, not-for-profit family of leading healthcare providers.

To learn more about Riverside Methodist Hospital, please visit OhioHealth.com/Riverside.

OhioHealth Surgical Weight Management

OhioHealth.com/WeightManagement
(614) 566.2700

Inside the McConnell Heart Health Center
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Columbus, Ohio 43214