



OhioHealth Weight Management

Surgical Patient Guide

Surgical. Medical. Weight Loss.

*Our comprehensive, individualized approach sets us apart.
Learn more at [OhioHealth.com/WeightManagement](https://www.ohiohealth.com/WeightManagement).*



OhioHealth

BELIEVE IN WE™



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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

Female Weight (lb)	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80		
140	27	26	25	25	24	23	22	22	21	21	20												
150	29	28	27	26	26	25	24	23	23	22	21	21	20	20									
160	31	30	29	28	27	26	26	25	24	23	23	22	22	21	20	20							
170	33	32	31	30	29	28	27	26	26	25	24	24	23	22	22	21	21	20					
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200	39	38	36	35	34	33	32	31	30	29	28	28	27	26	25	25	24	23	23	22	22		
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290	56	54	53	51	49	48	46	45	44	43	41	40	39	38	37	36	35	34	33	32	32		
300	58	56	54	53	51	49	48	47	45	44	43	42	40	39	38	37	36	35	34	33	33		
310	60	58	56	54	53	51	50	48	47	45	44	43	42	41	40	38	37	36	35	35	34		
320	62	60	58	56	55	53	51	50	48	47	46	44	43	42	41	40	39	38	37	36	35		
330	64	62	60	58	56	54	53	51	50	48	47	46	44	43	42	41	40	39	38	37	36		
340	66	64	62	60	58	56	54	53	51	50	48	47	46	44	43	42	41	40	39	38	37		
350	68	66	64	62	60	58	56	54	53	51	50	48	47	46	45	43	42	41	40	39	38		
360	70	68	65	63	61	59	58	56	54	53	51	50	49	47	46	45	43	42	41	40	39		
370	72	69	67	65	63	61	59	57	56	54	53	51	50	48	47	46	45	43	42	41	40		
380	74	71	69	67	65	63	61	59	57	56	54	53	51	50	48	47	46	45	44	42	41		
390	76	73	71	69	66	64	62	61	59	57	56	54	53	51	50	48	47	46	45	44	42		
400	78	75	73	70	68	66	64	62	60	59	57	55	54	52	51	50	48	47	46	45	44		
410	80	77	74	72	70	68	66	64	62	60	58	57	55	54	52	51	49	48	47	46	45		
420	81	79	76	74	72	69	67	65	63	62	60	58	57	55	54	52	51	49	48	47	46		
430	83	81	78	76	73	71	69	67	65	63	61	60	58	56	55	53	52	51	49	48	47		
440	85	83	80	77	75	73	70	68	66	64	63	61	59	58	56	55	53	52	50	49	48		
450		84	82	79	77	74	72	70	68	66	64	62	61	59	57	56	54	53	52	50	49		
460			83	81	78	76	74	71	69	67	66	64	62	60	59	57	55	54	53	51	50		
470				85	83	80	77	75	73	71	69	67	65	63	61	60	58	57	55	54	52	51	
480					84	82	79	77	74	72	70	68	66	65	63	61	60	58	56	55	54	52	
490						84	81	78	76	74	72	70	68	66	64	62	61	59	58	56	55	53	
500							85	82	80	78	76	73	71	69	67	65	64	62	60	59	57	56	54

 Overweight (BMI 25-29.9)
 Obesity (BMI 30-34.9)
 Severe Obesity (BMI 35-39.9)
 Extreme Obesity (BMI 40+)

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.” 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.



Call (614) 566.2700 or visit OhioHealth.com/DietPlans.

1 American Society Of Metabolic And Bariatric Surgeons (2004). Consensus Statement. Available At: <http://Asmbs.org/2012/06/Consensus-Statement/>. Accessed Jan 22, 2013.
 2 Mingrone G, Panunzi S, De Gaetano A, Et Al. Bariatric Surgery Versus Conventional Medical Therapy For Type 2 Diabetes. *New Engl J Med* 2012 Apr 26;366(17):1577-85.
 3 Colquitt JJ, Picot J, Loveman E, Clegg AJ. Surgery For Obesity. *Cochrane Database Syst Rev* 2009 Apr 15; (2):Cd003641.
 4 Maggard Ma, Shugarman Lr, Suttrop M. Meta-Analysis: Surgical Treatment Of Obesity. *Ann Intern Med* 2005 Apr 5;142(7):547-59.

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.

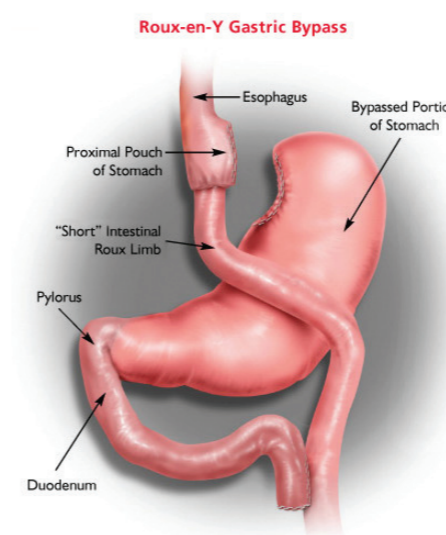
OhioHealth Surgical Weight Management Provides Three Surgical Options:

- + 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!

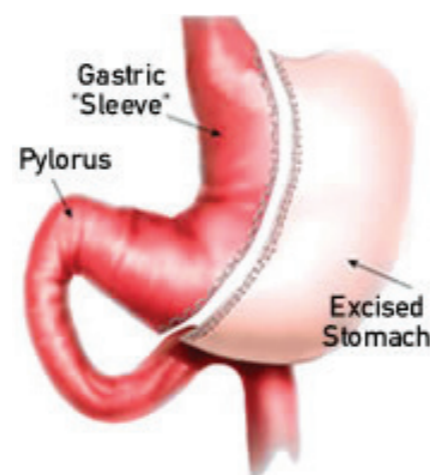
Laparoscopic Gastric Sleeve Procedure

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

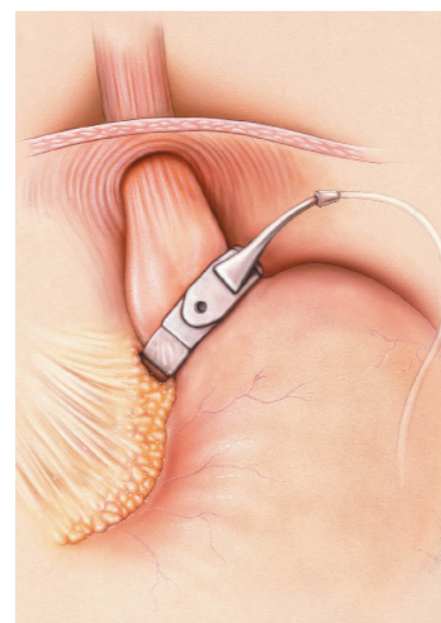
Possible Risk	Preventive Measure or Solution
A leak from the staple line on the connection between the stomach and small intestine	<p>During surgery, the staple lines are secured with reinforcing material, and the connection between the stomach and small bowel is checked at the end of the operation.</p> <p>Occasionally this requires an urgent second operation to repair.</p>
Deep vein thrombosis: formation of blood clot in the veins of the legs or pelvis	<p>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.</p>
Anastomotic stricture: a narrowing of the connection between the new gastric pouch and intestine occurs as a result of the healing process.	<p>This narrowing can be dilated through a scope as an outpatient procedure, if necessary.</p>
Pulmonary embolism: a blood clot that travels from the legs or pelvis to the heart and lungs	<p>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.</p> <p>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.</p>
Incisional hernia: a defect in the abdominal wall	<p>Surgical repair of defect. This is rare in laparoscopic surgery.</p>
Bowel obstruction: scar tissue that creates obstruction or intestinal blockage	<p>Surgical correction of the obstruction</p>
Marginal ulcer	<p>Managed with medicine, such as a stomach acid inhibitor, and avoidance of nicotine and anti-inflammatories</p>
Mortality	<p>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.</p>

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

Possible Risk	Preventive Measure or Solution
Slippage of part of the stomach	The band is placed in a stable position through tissue behind the upper stomach and further secured with several sutures.
Erosion of the band through the stomach wall	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.
Leak of salt solution from the system	A leak between the port and the tubing can easily be repaired with a minor operation to replace the port.
Deep vein thrombosis: formation of blood clot in the veins of the legs or pelvis	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.
Pulmonary embolism: a blood clot that travels from the legs or pelvis to the heart and lungs	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.
Incisional hernia: a defect in the abdominal wall	Surgical repair of defect. This is rare in laparoscopic surgery.
Mortality	This is a safe operation. The risk of mortality of this procedure is only about one in 1000.

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.

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

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.

NEED MORE
INFO?

Call (614) 566.3946 or visit OhioHealth.com/WeightManagement.

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 Membership 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 Evaluation

Meeting With the Membership Coordinator

Soon after the seminar, you will have an individualized appointment with the OhioHealth Surgical Weight Management Membership Coordinator. You are encouraged to bring your spouse, family or a friend with you. The Membership Coordinator will help you thoroughly understand our surgical program and explain your health insurance benefits. If you choose to schedule your evaluation appointment, your evaluation appointment will be made for you at this time.

Your evaluation appointments will include:

- + Medical evaluation with our Family Medicine physician
- + Psychological consultation
- + Nutritional consultation with one of our specially trained dietitians

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 Consultation

You will have an appointment with a psychologist who has completed specific training in the evaluation of bariatric surgery patients. 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 consult, you will complete psychological testing in addition to an individual interview to help the psychologist learn more about you. If the psychologist determines that counseling or other recommendations are needed to prepare you for optimal post-surgery outcomes you will be referred to another experienced provider. The provider will help assess your readiness to make significant behavioral 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.

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.

Pre-Surgery Preparation

Pre-Surgery Appointment 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

Prior to Your Evaluation Appointment, Please Provide:

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.

A List of All 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

Although this is not required, it may be helpful in obtaining your insurance coverage. At your first visit to our office, you will be given an example of the type of letter your doctor may provide. All letters must be typewritten and must be signed by the patient's family doctor as appropriate.

If you are interested in taking the next step to a new life, please call (614) 566.3946 and ask for the OhioHealth Surgical Weight Management Insurance Coordinator. Then, complete the Evaluation Request and Health History included in this handbook.



Health History

Name _____ Male ___ Female ___ Date of Attended Seminar _____

Height _____ Approximate Weight _____ Date of Birth _____

Past Medical History (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Stomach ulcers | <input type="checkbox"/> Arthritis |
| <input type="checkbox"/> Heart Attack | <input type="checkbox"/> Kidney disease | <input type="checkbox"/> Cancer: _____ |
| <input type="checkbox"/> High cholesterol | <input type="checkbox"/> Sleep apnea | <input type="checkbox"/> Psychiatric disorder |
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Blood clots in legs or lungs: If yes, which? _____ | |
| <input type="checkbox"/> Stroke | <input type="checkbox"/> Thyroid disease | <input type="checkbox"/> Diabetes: If yes, Insulin? <input type="checkbox"/> |
| <input type="checkbox"/> Lung disease | <input type="checkbox"/> Have you been seen by a heart, lung, or kidney specialist in the past 5 years? | |
| <input type="checkbox"/> Other _____ | If yes, which? _____ | When? _____ |

Have you ever taken Phen Phen or Redux? Yes No When? _____

Social History

- Smoke? Yes No Packs per day _____ Ex-smoker, quit _____ years ago
- Alcohol? Yes No Occasional social drinker Recovering alcoholic
- Presently drink ___/day Drugs? Yes No Type and frequency _____

Do you have/have you had any of the following recently? (check all that apply)

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Blurred or double vision | <input type="checkbox"/> Easy bleeding | <input type="checkbox"/> Increased urination | <input type="checkbox"/> Nausea or vomiting |
| <input type="checkbox"/> Vision changes | <input type="checkbox"/> Dizziness | <input type="checkbox"/> Burning w/urination | <input type="checkbox"/> Heartburn |
| <input type="checkbox"/> Hearing loss | <input type="checkbox"/> Blackouts | <input type="checkbox"/> Enl. Lymph nodes | <input type="checkbox"/> Reflux of gastric contents |
| <input type="checkbox"/> Fevers | <input type="checkbox"/> Chest pain | <input type="checkbox"/> Back pain | <input type="checkbox"/> Difficulty swallowing |
| <input type="checkbox"/> Sweats | <input type="checkbox"/> Heart palpitations | <input type="checkbox"/> Extremity weakness | <input type="checkbox"/> Sore throat |
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Shortness of breath | <input type="checkbox"/> Paralysis | <input type="checkbox"/> Change in bowel habits |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Cough | <input type="checkbox"/> Pain in joints | <input type="checkbox"/> Blood in stool |
| <input type="checkbox"/> Heat intolerance | <input type="checkbox"/> Headache (esp. AM) | <input type="checkbox"/> Ankle swelling | <input type="checkbox"/> Constipation |
| <input type="checkbox"/> Cold intolerance | <input type="checkbox"/> Depression | <input type="checkbox"/> Skin fold irritation | <input type="checkbox"/> Diarrhea |
| <input type="checkbox"/> Nosebleeds | <input type="checkbox"/> Snoring | <input type="checkbox"/> Abdominal pain | |
| <input type="checkbox"/> Varicose Veins | <input type="checkbox"/> Use CPAP or BIPAP | <input type="checkbox"/> Use oxygen at home: If so, why? _____ | |
| <input type="checkbox"/> Do you need a wheelchair? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, why? _____ | | | |

I would definitely recommend the program.

Health History

Name: _____ Date: _____

Past Surgeries: _____ Date: _____

Current Medications: _____ Dosage/How Often: _____

Allergies to Medication: _____ What Are Your Symptoms? _____

Are you allergic to latex? Yes No

Evaluation Request

Date of Attended Seminar: _____

- In-person Seminar
 Online Seminar

Who was your presenter?

- Dr. Sonnanstine, MD
 Dr. Pitt, DO
 Other _____

I would like to begin the evaluation for weight loss surgery

Please schedule me for an evaluation appointment with OhioHealth Surgical Weight Management

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	

Male
 Female

Social Security

Marital Status
 Married Single
 Divorced Widowed

Date of Birth
 / /

YOUR EST. WEIGHT: _____

HEIGHT: _____

Primary Insurance Information

INSURANCE COMPANY NAME	INSURANCE COMPNAY 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 COMPNAY PHONE	
INSURANCE COMPANY ADDRESS		
INSURED NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER
SIGNATURE	DATE	

GROUP NUMBER _____

INSURANCE I.D. NUMBER _____

RELATIONSHIP TO PATIENT _____

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. Pitt, DO
- Other _____

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

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: _____

My Notes



Call (614) 566.3946 or visit OhioHealth.com/WeightManagement.

About OhioHealth RiversideMethodist 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) 566.3946

Inside the McConnell Heart Health Center
3773 Olentangy River Road
Columbus, Ohio 43214