

ASMBS IH Clinical Issues and Guidelines Committee

Patient Education: Nutrition

Prepared: The IH CIGC Patient Education Toolkit Working Group; March 2018

Goals:

Assist healthcare professionals in the creation of nutritional guidelines and/or assessment of nutritional behavior before and after metabolic and bariatric surgery.

This document serves as a guide in supporting the development of patient education. It is not all encompassing and requires customization based on individual programs.

1. Pre-operative
 - a. Personal Assessment of Eating behaviors / hx of eating disorders, weight loss attempts
 - b. Basic Dietary knowledge needed
 - c. Dietary changes to make prior to surgery
 - i. Meal Planning and spacing
 - ii. Kcal, protein, CHO, fat intake
 - d. Hydration goals and types of fluids utilized
 - e. Protein supplements utilized prior
 - f. Intuitive / Mindful eating concepts
 - g. Does your program request weight loss needed prior?
 - h. Recommended vitamin and mineral supplementation
 - i. Understanding of dietary changes post operatively
 - j. Full Liquid or Partial Liquid low carbohydrate diet 1-2 weeks prior to surgery for liver volume reduction?
 - k. Diet 1-2 days prior to surgery
2. Post-operative (some of these may vary based upon bariatric procedure)
 - a. Dietary Stages and advancement, including food texture
 - b. Protein Supplementation and type
 - c. Fluid intake
 - d. Food / Beverages to Avoid
 - e. Portion size / Nutrient balance
 - f. Vitamin and Mineral Supplementation (see Vitamin Outline)
 - g. Challenges:
 - i. Dumping Syndrome
 - ii. Nausea / Vomiting
 - iii. Diarrhea / Constipation
 - iv. Dysphagia
 - v. Food Intolerance
 - vi. GERD
 - h. Maladaptive eating behaviors

3. Other nutritional considerations (these may affect pre and post op recommendations)
 - a. Renal
 - b. Pregnancy
 - c. Type 1 DM
4. Nutrition Consultation (information to gather either pre or post operatively)
 - a. Anthropometrics
 - b. Weight History
 - c. Medical History
 - d. Medications
 - e. Laboratory Values
 - f. Supplementation: vitamin and minerals, herbal
 - g. Psychological History
 - h. Other barriers with eating:
 - i. Dentition
 - ii. Alcohol / Drug use
 - iii. Intolerance
 - i. Exercise
 - j. Psychosocial
 - i. Motivation
 - ii. Food relationship
 - iii. Sabotage – by self or others
 - iv. Coping mechanisms for stress, emotions, other barriers
 - k. Weight gain / Maintenance / Plateau