

## Pre-Operatory Requirements

- Pre-Op Instructions

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## Pre-Op Instructions

Any type of surgery is a serious procedure that carries certain risks, and thorough preparation is essential for the successful outcome.

### Stage “1 month before”

- **Stop** all pregnancy preventive **oral** medications and **hormonal medications** at least 3 or 4 weeks before surgery as they increase blood clot risks.

Carefully review the following information that refers to hormonal medications only.

- ✓ What to consider? Medications based mainly on 2 types of hormones:
  - Estrogen: increased risk of blood clots.**
  - Progestin: no evidence of increased risk of blood clots.**
- ✓ Only those contraceptives that contain **estrogen should be avoided before surgery**, listed below in the order of higher blood clot risk:
  - Oral pills
  - Injections (only those that apply every month)
  - Vaginal rings (NuvaRing). No need to remove it pre-op, but additional blood thinners will be prescribed upon hospital discharge (extra cost applies).
  - Skin patches
- ✓ **Medications based on progestin that do NOT increase blood clot risk:**
  - Injections (only those that apply once every 3 months)
  - Implants (subcutaneous arm implants)
  - IUD hormonal (Mirena)
- ✓ If your contraceptives include estrogen, it is recommended to stop them 1 month pre-op to decrease blood clot risks. Using other methods such as condoms during this period are recommended (or abstinence – 100% protection 😊).
- ✓ Resume hormonal contraceptives 1 month after surgery on the first day of your first menstruation (this is to ensure that you are not pregnant before you start hormonal medications again).
- ✓ The risk of postoperative thrombosis (blood clots) depends on many factors, not only on the type of contraceptives used. But it is always recommended to decrease the risks as much as possible.

- **Stop smoking or vaping.** Remember that smoking slows down healing time by narrowing blood vessels, restricting blood flow to the surgical site, potentially it could cause tissue necrosis and stomach leak; not to mention possible cardiovascular issues, anesthesia complications, infections, etc.; smoking after surgery can cause gastritis and ulcers in the stomach pouch, this is especially common among Mini or RNY bypass surgery patients.
- **Stop smoking marijuana.** Consumption of marijuana before and after surgery increases risk of complications to a greater or lesser degree, during general anesthesia you can develop low blood pressure, have problems with your heart (depending on the dosage), and during the postoperative period the pain could be difficult to control. Also, one of the most common side-effects of using marijuana is increased levels of hunger, which works against the purpose of surgery.
- **Stop consuming alcohol** (it supplies empty calories that are not part of the low-carb protein pre-op diet). If you must have a drink at a social gathering on a special occasion, you may have one small drink as an exception, but absolutely no alcohol is allowed 7 days pre-op as it is blood thinning and will cause post-operative bleeding.
- **Stop all beverages with caffeine,** including energy drinks (you may switch to decaf for a week or two for an easier transition to no-coffee-at-all). All types of coffee must be stopped at least two weeks prior to surgery.

**Reasons why coffee must be stopped** completely at least 2 weeks pre-op are:

- Coffee is acidic and irritates the stomach. Our goal is to reduce stomach acid production and thus stomach irritation before and after surgery. For that reason, coffee is not recommended for at least 2 weeks pre-op and 1.5-2 months post-op (the longer you wait the better). If you must resume coffee sooner, look for low-acid options and avoid coffee on an empty stomach.
- Coffee is known to increase appetite, and this works against the surgery purpose.
- Coffee withdrawal can cause strong headaches and general weakness. If you do not stop drinking coffee prior to surgery, you will be forced to stop it during surgery. Such abrupt changes in addition to the surgery itself and the low-calorie diet will cause strong migraines and increased fatigue. We highly recommend weaning off coffee gradually starting 1 month pre-op.

- **Exercising.** Discuss with your physician a routine exercise program suitable for your health condition and joints. Patients with cardio-vascular or joint diseases are not required to exercise. Otherwise start walking or doing elliptical exercise for 30 minutes daily, and if possible, consider swimming – the best option that is completely safe for your joints and muscles. You will be able to resume exercising 2 months after surgery.
- **Blood work and EKG.** This is not a requirement! We understand that not everyone will be able to complete this recommendation. But because we wish for your surgery to go as smoothly as possible and rule out any unexpected issues, the doctors highly recommend getting a **blood test and ECG (EKG)** done at least 2-4 weeks before surgery.

If possible, please request the following tests with your doctor: **CBC (complete blood count), PT (prothrombin time), PTT (partial thromboplastin time), blood chemistry.** Send results to your patient coordinator via email.

If possible, have a **cardiogram (ECG)**, or if you have a recent one, please submit the report to your patient coordinator.

## Stage “14 days before” **Important!**

Regardless of whether you have acid reflux/heartburn or not, start taking Omeprazole or Nexium (PPI medication, PPI stands for Proton Pump Inhibitor). It is available over the counter (OTC).

**Dosage:** 1 pill of 20 mg twice a day, 30 min before meals (that is every 12 hours, total dosage 40 mg per day). Continue for two weeks prior to surgery (the last pill to be taken the evening before surgery, do NOT take it on the day of surgery). This is to decrease stomach acid production and later acid reflux, nausea, inflammation, and swelling caused by the procedure.

**Continue taking PPI medication after surgery** for at least two months (gastric sleeve) and at least three months (gastric bypass RNY/Mini). After 2/3 months you may start weaning off PPI gradually only if you don't experience acid reflux symptoms. Consult with your surgeon or nutritionist to make sure you are ready to stop the PPI.

### **VERY IMPORTANT!**

Never skip the dosage! Take PPI for as long as prescribed twice a day. You must complete the 2- or 3-months therapy (for gastric sleeve or bypass accordingly) after surgery and shouldn't stop sooner only because you don't feel any discomfort. This may lead to marginal ulcers and other complications. Learn more at:

#### ❖ **PPI & Antacid in Weight Loss Surgery**

[\(https://golightbariatrics.com/ppi-antacid-in-weight-loss-surgery/\)](https://golightbariatrics.com/ppi-antacid-in-weight-loss-surgery/)

**Tip:** you can purchase a 2-month supply of the PPI medicine over the counter in Mexico for under \$15 USD (inquire with your on-site facilitator to help you place an order with a local pharmacy). In case you are already taking PPI`s, continue as prescribed by your doctor. If your regular dosage is 40 mg once a day, you may continue. If your regular dosage is 20 mg once a day, increase it to 20 mg twice a day. If you normally use other brands (Omeprazole (Prilosec), Pantoprazole (Pantozol), Esomeprazole (Nexium)), you can continue your prescribed PPI.

## Stage “7 days before” **Important!**

Consult with your surgeon about medications you are taking and when they need to be stopped (usually it is discussed during the pre-op consultation).

**Stop all NSAIDs 7 days prior to surgery** (Aspirin, baby low-dose Aspirin, Advil, Aleve, Ibuprofen, Nuprin, Naproxen, or any other non-steroidal anti-inflammatory medication, this includes most arthritis medications). If you are not sure, please check with your physician. For headache or minor pains, you may use Tylenol (including the day of surgery). You may restart some of these medications 7 days after surgery (some medications may be resumed sooner), however consult with your doctor regarding NSAIDS (for example, only if you have heart issues you may resume taking low-dose Aspirin or other blood thinners 7 days post-op but always after you take a PPI pill (Omeprazole or Nexium) to protect your stomach; we highly recommend changing pain medication like Ibuprofen to Tylenol, or Celebrex, or Meloxicam, as Ibuprofen may cause gastritis and ulcers; Ibuprofen and other NSAIDs after WLS can be taken only if absolutely necessary, on occasion, and always with a PPI pill first to protect your stomach. Ideally you should use Tylenol only. Please always consult with your doctor before you resume certain medication after surgery.

Learn more at:

- ❖ **Painkillers and anti-inflammatories, acceptable options after weight loss surgery**  
<https://golightbariatrics.com/painkillers-and-anti-inflammatories-acceptable-options-after-weight-loss-surgery/>

**Stop all vitamins when you begin the liquid diet stage**, as taking vitamins on an empty stomach or without solid foods may cause nausea. You will be able to resume vitamins 1 or 2 weeks after surgery once your stomach is recovered sufficiently, and it is easier to swallow pills.

**If you need to bring your prescription medications to Mexico:** Please have all your prescription medications that you need to take daily in their original bottles, do not bring them in a pill dispenser. The bottles must have the name of the medication on them as well as your personal name and **bring only the number of pills sufficient to cover your trip (your stay in Mexico + travel time)**, not more than that. If you bring more pills than needed for your stay, our on-site

team will ask you to discard the remaining ones (especially if they are controlled medications such as antidepressants, anti-anxiety, ADD/ADHD medication) before heading toward the border, and the border police officer may send you into a secondary inspection.

## Stage “3 days before” **Full Liquid Diet Stage**

During the last 3 days before surgery (not including the day of surgery, if surgery is on Monday, the 3 days before include Fri, Sat, Sun) it is required that you follow a full-liquid diet. This “liquid stage” can be increased to 5, 7 or more days by the surgeon depending on your BMI and duration of the solid food diet stage. The surgeon will let you know if you are required to increase the “liquid stage” during your pre-op consultation.

For a full list of liquids and a menu sample go to <https://golightbariatrics.com/pre-op-diet/>

## Stage “1 Day Before” – pre-op tests stage.

- Usually, pre-op tests are done on the day of arrival (the day before surgery), except for Sunday arrivals. Patients whose surgeries are scheduled on Monday will have their pre-op tests on Monday morning; they may continue their full liquid diet on Sunday until bedtime. For those having pre-op tests on the day of arrival: avoid lactose (protein shakes, yogurt, milk, etc.) and avoid liquids that contain fat (chicken broth or any other type of broth/soup). You may drink such liquids as water, apple juice (be mindful as it is high in sugar, dilute it with water 50/50), Gatorade, sugar-free popsicles, or Jell-O up until **3 hours before your arrival in San Diego**. About 3 hours before arriving in San Diego switch to only water until blood work is done. After the blood was drawn, you may resume other fluids that include protein shakes, broth, etc.

The reason why it is necessary to avoid lactose, liquids with fat, and sugar for a certain period before blood test, is so that those ingredients do not affect the results of the blood work.

## Stage “Surgery Day”. **What is allowed and NOT allowed.**

- Stop drinking at 10 pm the night before surgery as the doctors may need to move your procedure to an earlier morning time slot. It is very important that you drink lots and lots of fluids during the 3-day liquid diet to be well hydrated for the day of your surgery.
- You may take medications for diabetes, high blood pressure, thyroid, anxiety, or antidepressants as indicated by your physician early in the morning with just a few sips of water (ideally take them no later than 6 am).
- If your surgery is scheduled later in the morning or afternoon, you may continue drinking plain water for up to 4 hours before surgery.

- You may brush your teeth normally.
- Take a shower with soap the night before surgery or in the morning.
- There is no need to do bowel cleansing either before gastric sleeve or bypass surgery, as the liquid diet stage will cleanse your bowel sufficiently.
- **Jewelry. Take off all the jewelry and leave it at home!** If you cannot take your ring off, or piercing, anesthesiologist will wrap a piece of tape around it to protect your skin from burns. However, in rare cases jewelry may interfere with the electrocautery machine used during anesthesia and may need to be cut off.
- **Nails. Very important!** At least **one fingernail** must be **FREE FROM ANY TYPE OF POLISH** (acrylic, gel, regular polish, transparent or colored, it doesn't matter) as the layer of nail polish does not allow the oximeter to capture correct amount of oxygen in your blood during anesthesia and recovery. Thus, you must have at least 1 or 2 fingers available with natural clean nails, not too long (about 5-6 mm or ¼ of an inch), as you will have a clip-on oximeter attached to your finger and if your nails are too long, it will not stay on, and a nurse will have to shorten your fingernail. Toenails can have any type of polish you like.
- **Please remove artificial eyelashes and makeup.** During anesthesia when all body muscles are relaxed, to keep your eyes closed and avoid irritation and dry eyes, the doctor will apply either tape or special eye covers that may damage artificial eyelashes. For your own convenience and to avoid possible infection, please remove them prior to surgery.
- **Remove** dentures, contact lenses, eyeglasses, female sanitary items (tampons), any underwear, wigs.
- **For male patients.** If possible, please **shave your beard** (or trim if it is long), **and your chest.** A beard that is a few days old is acceptable although not recommended; a long beard may not allow for the medical equipment (oxygen mask) to be placed correctly; not to mention sanitary purposes. Shaving your chest will prevent discomfort from removing sticky items such as monitors during an ECG test.

### **For Same-Day Arrival (Vertical Sleeve or RNY Bypass Surgery)**

- All the above applies. Stay on a full liquid diet 3 days before and arrive on an empty stomach the day of surgery.
- Wear compression stockings (medium pressure, knee high) during your flight (for patients with high BMI over 50), practice leg muscle contraction during flight, get up and move every 45 minutes, move your feet – these are blood clot preventive measures.
- Plan to arrive in San Diego by 11 am or 12 pm the latest on the day of surgery.

## COVID-19 PROTOCOL

- Vaccination is not required.
- COVID-19 test is not required if no cold-like symptoms are present.
- COVID-19 test is required if a patient or their companion displays cold-like symptoms upon arrival. The cost is \$30 USD per one rapid antigen test.

FOR PATIENTS: If you develop cold-like symptoms, we recommend getting tested prior to traveling in order not to risk your trip. If testing positive for COVID-19, please inform us immediately, surgery will be rescheduled. If testing positive for COVID-19 upon arrival, surgery will be postponed and rescheduled.

FOR COMPANIONS: if cold-like symptoms are present and if tested positive upon arrival, you will be asked to remain at the hotel at your own expense in order not to put other patients and hospital staff at risk.

And last but not least: relax and trust your doctors! You are in good hands!