

## Your Hospital Stay

*For weight loss surgery patients*

*This section of the Guide to Your Weight Loss Surgery describes what to expect during your stay in the hospital. It includes separate instructions for gastric bypass and sleeve gastrectomy patients, and laparoscopic gastric band patients.*



*Be sure to ask your nurse if you have any questions about your care.*

### Pain

No medicine can completely get rid of pain. The goal is to lessen your pain so that you can move around, take deep breaths, and cough.

Gastric Bypass and Sleeve Gastrectomy Patients	Laparoscopic Gastric Band Patients
<p>You will have pain after your surgery. Once you are in your hospital room, you may have a <i>patient-controlled analgesia (PCA)</i> pump. This computerized machine allows you to give yourself pain medicine by pressing a button on a hand-held control. Only you may use the PCA. Do <b>not</b> let anyone else press the button.</p> <p>The PCA unit will not allow you to give yourself too much medicine. It can give you a set amount of pain medicine only at certain time intervals.</p> <p>A nurse will set the PCA computer at the dose and time interval that your doctor prescribes. Your pain will be well-managed using this method of pain control.</p> <p>If you do not have a PCA, you will receive your pain medicine through your IV or by <i>intramuscular injection</i> (a shot into a muscle).</p>	<p>You will have pain after your surgery, even though your incisions are small. You will receive pain medicine that is similar to what you will take once you are discharged from the hospital.</p>

## Tubes and Drains

### Gastric Bypass Patients

When you are in the operating room, you will have a catheter placed in your bladder. It will drain your urine into a drainage bag. The catheter will be removed in the first few days after surgery. Your doctor may also order other types of tubes, such as a *gastrostomy* tube (a tube placed in your bypassed stomach).

## Breathing Exercises

The anesthetic used in surgery causes mucus to form in your lungs. Coughing and deep breathing help clear this mucus.

Your nurse will show you how to do deep-breathing exercises using a hand-held device called an *incentive spirometer*. You must cough and deep-breathe several times each hour after surgery until you go home.

After leaving the hospital, you should:

- Take 8 to 10 deep breaths with your incentive spirometer each hour during the day.
- Cough often to bring up any mucus or phlegm.

You may have some discomfort when you do your deep-breathing exercises, but it is very important to do them. These exercises will help keep you from getting pneumonia or an upper respiratory infection.

## Activity After Surgery

You can help prevent complications by being active after your surgery. This lowers your chance of getting pneumonia or upper respiratory infections, blood clots in your legs or lungs, and constipation.

After your surgery, you will have *sequential compression devices* (SCDs) on your legs. These inflate with air and gently squeeze your legs, and then slowly deflate as they release the air. SCDs help with blood flow and help prevent blood clots in your legs.

Gastric Bypass Patients	Laparoscopic Gastric Band and Sleeve Gastrectomy Patients
<p><b>A physical therapist will help you get out of bed and sit in a chair the evening of your surgery unless you are on a ventilator (breathing machine).</b> You will at least sit on the edge of your bed and dangle your feet over the side. For all your meals, you will either sit in a chair or sit up in bed.</p> <p>The morning after surgery, your nurse will help you walk from your bed to the doorway and, if you are able, in the hallway. Each day, you will get out of bed and walk 2 to 3 times a day in the hallway. Your nurse will help you until you are strong enough to walk on your own. Walking helps expand your lungs and increases your circulation, which keeps blood clots from forming. Your nurse will remove your SCDs before you take your daily walks.</p> <p>A dietitian will meet with you to help you get started with your new diet. Your first meals will be clear liquids such as broth and sugar-free Jell-O. Soon you will be able to add other liquids, such as milk and protein supplements.</p> <p>Your nurses, occupational therapists, and physical therapists will help you and assess your progress. They will make sure that you can safely take care of yourself when you leave the hospital.</p>	<p>After surgery, you will go to the recovery room for 1 to 3 hours. You will be watched closely during this time.</p> <p>Your total time in the hospital is expected to be overnight, with discharge home the morning after surgery.</p> <p>Being active soon after surgery will help prevent complications. Complications that may occur after surgery include pneumonia, blood clots in your legs, constipation, and others. You will need to get out of bed and begin walking as soon as possible. Your nurse or a physical therapist can assist you if you need help. The SCDs on your legs will be removed before you begin walking.</p>

## Medicines

Before you leave the hospital, a pharmacist will review your discharge medicines with you. Medicines in pill form will need to be crushed or split. You should have a pill splitter at home to split large pills. You can buy a pill splitter at any drugstore.

You should review all of your medicines with your pharmacist and primary care doctor before surgery. Tell them you are having weight loss surgery and you will need to have your medicines crushed or in liquid form after

surgery. Do this well before your surgery so that substitutions can be made if needed. Not all medicines can be crushed or split.

If you have not yet talked with your pharmacist or primary care doctor about how to take all your medicines, talk with the hospital pharmacist before you leave the hospital. Your primary care doctor may need to prescribe substitute medicines for any that cannot be crushed or split.

### **Gastric Bypass and Sleeve Gastrectomy Patients**

Right after surgery, you will receive a medicine to prevent blood clots or a *deep vein thrombosis* (DVT) from forming in your legs or lungs. DVTs are more common after surgery because you are less active.

At first, your nurse may give you injections of this medicine. Before you leave the hospital, a pharmacist will teach you how to give yourself the injections. You will give yourself the injection 2 times a day as soon as you are able, for a total of 28 days after surgery. A family member or friend can be taught to give you these injections if you are unable to do so.

The syringes you will use are pre-loaded with the medicine, and the needles are short and thin. You will receive written instructions and a video to take home.

## **Bowel Care**

You will begin taking stool softeners while you are in the hospital to help prevent constipation. Keep taking these as long as you are on pain medicines, unless you are told otherwise.

## **Leaving the Hospital**

When you leave the hospital, it is best to have a support person who can be with you for 1 to 2 weeks.

If you live more than a 2-hour drive away, you will be advised to stay in the Seattle area for at least 7 days after your discharge from the hospital. You may wish to stay in the area until your 1st follow-up visit. This visit will be 2 weeks after your surgery.

### **Questions?**

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Center for Bariatric Surgery:  
206-598-2274