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Quick Nutrition Guide for Bariatric Surgery



Your life is our life's work.



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Introduction

Bariatric surgery, whether it is Vertical Sleeve Gastrectomy or Roux-en-y Gastric Bypass (RYGB), is a life changing procedure. Vertical Sleeve Gastrectomy restricts the amount of food the stomach can hold by creating a thin, vertical sleeve in the stomach. The sleeve is about the size of a banana. RYGB uses both restrictive and absorption-blocking methods for weight loss. By bypassing most of the stomach and part of the small intestine, less area to store food is created. This leads to eating fewer calories and a risk of vitamin deficiencies.

Since all surgeries require change to the structure and function of the stomach, it's important that you follow proper dietary stages. What is eaten must be 'nutrient-dense' and well tolerated. Careful planning and daily supplements are required for adequate health maintenance. Bariatric surgery not only changes eating habits, but requires behavioral changes as well.

You need to adjust the amount of food eaten before and after surgery to help achieve weight loss goals.

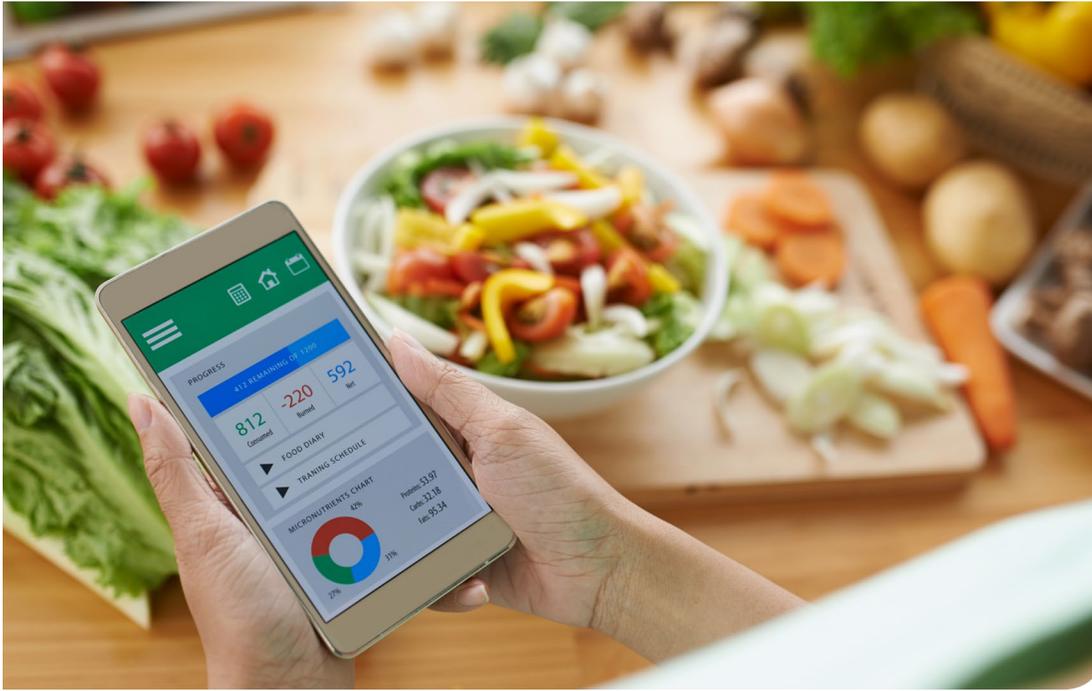
This education guide covers several important topics.

- Basic nutrition and tips for reducing fat
- Nutrition expectations prior to bariatric surgery
- Potential complications and their solutions
- Stages of the post-surgery bariatric diet
- Sample menus
- Tips for dining out

REMEMBER:

It's a good idea to read through this guide several times before surgery. This will help you feel more confident and prepared.

Nutrition Expectations



Prior to Bariatric Surgery

Lifestyle changes are encouraged to improve health before surgery, help you tolerate surgery better and provide for a successful recovery period. Permanent lifestyle changes are needed for success after surgery, which is why it's important to start making changes now.

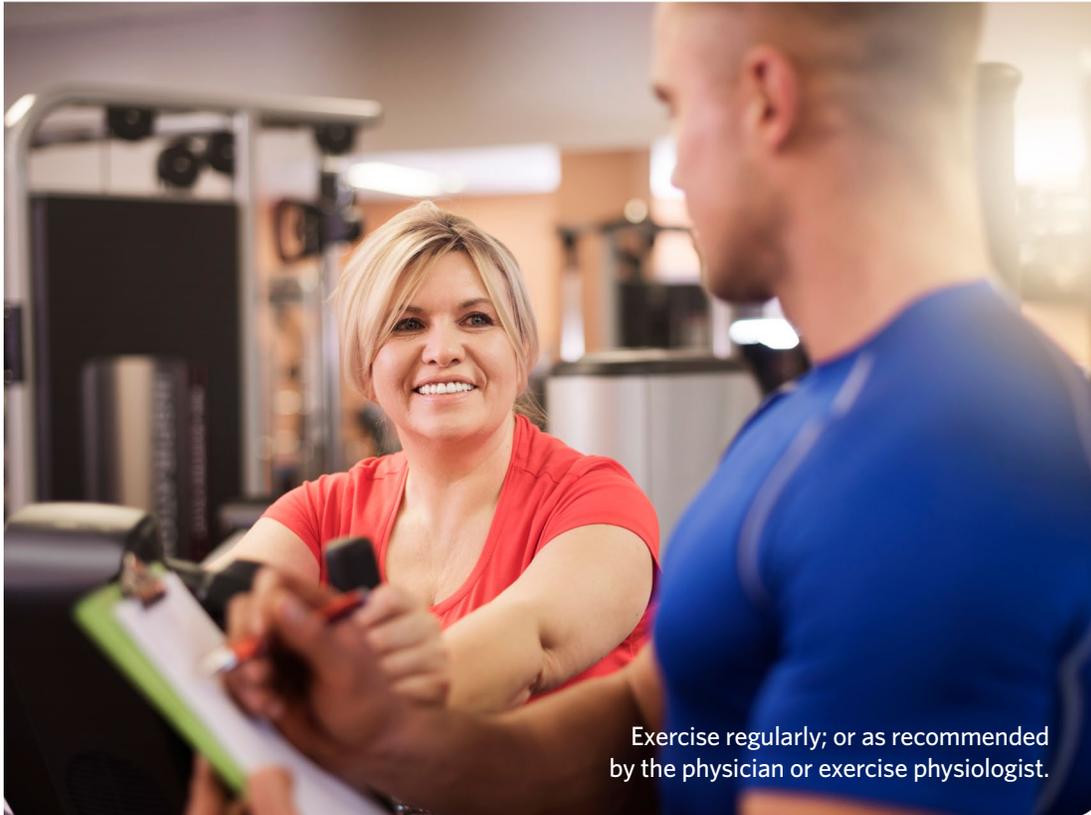
- **Begin keeping a food log.** Record foods and drinks, portion sizes, time, mood, location and hunger level.
- **Include fruits, vegetables, whole grains, lean protein and low-fat dairy** to have a well-balanced meal plan prior to surgery.
- **Limit or eliminate simple sugars and high fat foods.**
- **Begin the day with breakfast** to boost metabolism and reduce hunger.
- **Eliminate alcohol.** It can cause diarrhea, add excess empty calories, cause metabolism changes (with RYGB) and introduce the risk of addiction.
- **Eliminate carbonated beverages** due to their diuretic effect. Excess gas produced can bloat and stretch your pouch.
- **Eliminate straws** because they can cause gas due to swallowed air.
- **Eliminate caffeine** because it can stimulate appetite, add empty calories and cause diarrhea.

- **Stop smoking** and all forms of tobacco use.
- **Choose only water and sugar-free, decaffeinated, non-carbonated beverages.**
- **Drink 48-64 ounces (6-8 cups) non-carbonated, decaffeinated fluids daily.**
- **Practice taking very small bites/sips of foods and beverages** (use small utensils and small plates).
- **Chew foods thoroughly** (30 times) to the texture of applesauce before swallowing.
- **Practice eating and drinking very slowly.** Take at least 20-30 minutes to finish eating a meal. Set fork down between bites of food to slow eating pace.
- **Practice not drinking with meals:** See section on sugar and lifestyle changes.
- The doctor will require a **full liquid diet two weeks prior to surgery** to shrink the liver.
- **Attend support group meetings and educational sessions** to prepare for surgery.
- **Manage blood sugars.**



Practice taking very small bites of food and sips of beverages. Use small utensils and small plates.

Surgery and Lifestyle Changes



Exercise regularly; or as recommended by the physician or exercise physiologist.

- **Do not drink liquids with calories except for milk and protein drinks.** Liquids that contain calories include regular soft drinks, sports drinks, sugary fruit drinks, sweet tea, and coffee with sugar. Fruit juices have calories, but in small amounts can also provide vitamins and minerals. If fruit juices are desired, choose 100% fruit juice and limit the serving size (4 oz. is considered a serving of juice).

- **Avoid caffeinated, carbonated, and/or alcoholic beverages.** This includes coffee, tea, bubbly drinks and any alcohol.

- **Always eat the protein source first at meals.** This will help you get the required protein recommendations.

- **Choose healthy, nutrient-dense foods.** The quality of food you eat is more important after surgery because the amount is much smaller.

- **Take all necessary supplements daily;** see [Supplement Guidelines](#); and [Vitamins](#), pp. 6-7.

- **Exercise regularly** or as recommended by the physician or exercise physiologist.

Useful Tools for Weight Loss

Remember, bariatric surgery is a tool that helps make the necessary lifestyle changes for weight loss. It doesn't guarantee lifestyle changes. The surgery makes the stomach into a small pouch. The new pouch, along with behavior changes, helps with portion control. Below are helpful rules to make the tool work. If the rules and other dietary guidelines in this guide aren't followed, complications or problems can occur after surgery.

Rules for Weight Loss:

- **Eat three meals a day and one or two snacks** (if needed). Snacking too much between meals adds extra calories. This will slow weight loss, cause weight regain, or result in a weight loss plateau. When used wisely, snacks can

help you meet your protein goals and can control hunger between meals.

- **Always stop eating or drinking as soon as you feel satisfied.** Eating past the point of fullness will cause the pouch to stretch/slip depending on

surgery performed. It may also cause vomiting.

- **Eat slowly and chew food thoroughly.** If a meal is eaten too fast it may become hard to feel satisfied before it's too late. This may lead to overeating, vomiting or possible blockage.
- **Do not drink with meals.** Drinking will flush food quickly through the pouch and/or lead to overeating at meals. Avoid drinking fluids 10-15 minutes before meals (sleeve patients may drink up to the meal). Also avoid drinking during meals and 30-60 minutes afterwards.

Supplement Guidelines

Protein

The following protein drinks, bars and other products can be used to help you reach 60-80 grams of protein daily. The following supplements may be found at area stores or ordered online. See guidelines for choosing supplements.

High Protein Drinks and Shakes:

- EAS® Carb Control drinks and whey powders
- GeniSoy® Products: MLO Super High Protein powder, MLO Brown Rice Protein powder, MLO Milk and Egg Protein powder, MLO Vegetable Protein powder
- UNJURY™ Protein powders and broth for bariatric surgery patients
- Optimum® Protein Diet Shakes
- Bariatric Fusion Protein Supplement
- Bodytech® Whey Pro 24
- Premier® whey protein powders or ready to drink
- 1st Phorm® Level-1
- Zero Carb Isopure® powders and drinks and Perfect Whey Protein powder
- Pure Protein® whey powders
- Garden of Life® raw protein

High Protein Bars:

- GeniSoy® Low Carb Crunch Bars
- Slim-Fast® High Protein Meal Bars
- Premier® protein bars
- Quest® protein bars

Unflavored High Protein Powders:

- Beneprotein®
- GeniSoy® Ultra XT Soy Protein
- UNJURY™ unflavored protein powder for bariatric surgery patients
- GNC® Pro Performance 100% Whey



Guidelines for Choosing Supplemental Protein Sources:

- Protein drinks and shakes: 20-35 grams protein per serving. Milk can be used with powdered protein to increase the total protein value. Protein bars: 10-20 grams protein per serving
- Total fat: five grams or less per serving
- Total carbohydrates: 10 grams or less per serving
- Products should be low in sugar, five grams or less per serving

Nutrition Facts			
Serving Size 1 Cup (228 g)			
Servings Per Container: 3			
Amount Per Serving	As Served		
Calories 90	Calories from Fat 30		
	% Daily Value		
Total Fat 3 g		5%	
Saturated Fat 0g		0%	
Cholesterol 0g		0%	
Sodium 300 mg		13%	
Total Carbohydrate 10g		4%	
Dietary Fiber 3g		12%	
Sugars 3g			
Protein 30 g		22%	
Vitamin A 80%	•	Vitamin C 60%	
Calcium 4%	•	Iron 4%	
Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:			
	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate	Less than	300g	375g
Dietary Fiber		25g	30g

Vitamins

It is recommended that all bariatric patients take some form of vitamin supplement after surgery. Chewable or liquid supplements are absorbed best.

Multivitamin:

All bariatric patients

- For specific brands, dosage and frequency, see a dietician for a current list.
- Avoid taking multivitamins at the same time as calcium to avoid absorption problems.
- Do **not** take gummy vitamins.
- Do **not** take a 50 plus multivitamin.

Calcium citrate with Vitamin D: Most bariatric patients

- Take two or three per day (at least 1000mg/day); no more than 600mg at a time, separately from multivitamin.
- Calcium Citrate is best absorbed for both surgery types.

Vitamin B12: All bariatric patients

- Sublingual Vitamin B12: 1000 mcg twice weekly
- **OR** Intramuscular injection of B12: 1000 mcg per month (must be prescribed by MD)

Biotin: Most patients

- 1000 mcg per day

REMEMBER: Herbal supplements are not recommended because they can interfere with some medications and may have blood thinning properties

Sample Vitamin Regimen:

7:30 a.m. Chewable Calcium

10 a.m. Chewable Vitamin and B12 (if needed)

1 p.m. Chewable Calcium

4 p.m. Chewable Vitamin

7 p.m. Chewable Calcium and Biotin

Because you're eating smaller amounts of food after surgery, getting enough vitamins may be difficult.



Two Weeks Pre-Surgery

Liquid Diet

Why is this necessary?

The two-week liquid diet is to decrease the size of the liver before surgery. This makes it easier to do the operation because the liver can block access to the stomach. If the liver is too large, the surgery may be postponed and the full liquid diet attempted again. Your compliance with this diet is important to make your surgery as safe and successful as possible.

Week 1: Replace two meals a day with approved liquids. Some programs allow a small meal of solid food as well. Talk to your dietitian about your guidelines.

Week 2: All meals are liquids only. Calorie intake is approximately 700-800 calories.

Daily Goals:

- 60-80 grams of protein, or as instructed by your dietitian
- 48-64 ounces (6-8 cups) or more of water

Examples of liquids you may have:

- Protein shakes
- Skim milk
- Sugar-free gelatin
- Sugar-free pudding
- Fruit juices (limit to 4 oz.)
- Broth or bouillon
- Sugar-free popsicles
- Low fat, sugar free yogurt (artificially sweetened)



Post-Surgery

Band Fill Instructions

For LAP band patients only

These instructions are important for when you have band adjustments, or “fills” after surgery. This is when the band is “tightened” by filling your band with solution.

Before the Fill:

1. Don't eat a large dinner the night before your fill.
2. Eating a small, solid-food meal the morning before is okay.

After the Fill:

1. For the first 24 hours follow a full liquid diet. Examples of liquids were listed in the pre-surgery diet.
2. The next day you may progress to puree or mechanical soft foods for another 24 hours.
3. Always maintain good hydration. Drink six to eight cups of sugar-free, non-carbonated and decaffeinated beverages between meals.

Post-Surgery Stages

Post-Surgery Bariatric Diet

After bariatric surgery, the pouch won't be able to hold as much food or liquid. Initially, it can only hold about $\frac{1}{4}$ cup of food or 2 ounces at a time. To allow the new pouch to heal completely, introduce liquid and solid foods slowly. This slow introduction is done in different stages. The first stage starts soon after surgery.

The stages of the diet are as follows:

- **Stage 1:** Full Liquids
- **Stage 2:** Pureed
- **Stage 3:** Mechanical Soft
- **Stage 4:** Solid Foods

There are two things that will change in each stage:

Amount: The portions that are recommended are maximums — eat less if needed. It is important to eat only to the point of feeling satisfied.

Texture: The stages start off with very liquid-type foods and will progress toward normal solid foods.

The eating rules discussed earlier won't change during any stage of the diet. To review, here are the rules again:

Rules for Eating

1. Eat three meals a day and one or two snacks if needed.
2. Always stop eating or drinking when starting to feel satisfied.
3. Eat slowly. It should take at least 20-30 minutes to finish each meal.
4. Do not drink with meals.
5. Do not drink liquids that have calories except for low-fat milk or protein liquids.
6. Always eat protein first at meals. Each meal should be balanced by providing protein, vegetables and some carbohydrates (starch or fruit source).
7. Take vitamin/mineral supplements daily.
8. Exercise daily, 30 minutes or as recommended by your doctor or exercise physiologist.
9. Remember to advance your diet slowly per doctor's recommendations.

Stage 1: Full Liquids

Follow this diet for two weeks before and one to two weeks after surgery; DO NOT advance diet until instructed to do so by your surgeon's office.

Summary: This diet helps with hydration and focuses on eating the recommended amount of protein needed daily: 60-80 grams.

Foods Allowed: Water, sugar-free drinks, sugar-free popsicles, sugar-free gelatin, 100% fruit juices, broth or bouillon, skim or 1% milk, lactose-free milk, low-fat soy milk, protein drinks, light yogurt, fat-free/sugar-free pudding, low-fat strained creamed soups, and thinned cream of wheat. Add protein powder as needed, to meet protein needs.

Foods NOT Allowed: Any drinks with added sugar, caffeine, or carbonation, whole milk, solid foods and orange juice or grapefruit juice (these may cause gastritis/ulcer formation in the pouch).

Amounts: About 1-2 oz. (2-4 Tbsp.) at a time. Take tiny sips during the day.

Reminders: It is important to get at least 6-8 cups of fluid between meals to stay hydrated. Include protein drinks/supplements daily for adequate protein.

Sip liquids slowly; it is not possible to drink the amounts listed on the menu right after surgery.

Sample Menu: Full Liquids (Post-Op amounts are listed)

Breakfast:

7 a.m. — 4 Tbsp. (2 oz.) light vanilla yogurt

8-8:30 a.m. — Protein drink made with 8 oz. skim milk

10 a.m. — 8 oz. water or Crystal Light®

Lunch:

Noon — 2-4 Tbsp. (1-2 oz.) strained fat-free cream soup

2-4 Tbsp. (1-2 oz.) fat-free, sugar-free pudding

1 p.m. — Protein drink made with 8 oz. skim milk

3 p.m. — 4 oz. water

4 p.m. — 4 oz. beef broth with unflavored protein powder

Supper:

5 p.m. — 2-4 Tbsp. (1-2 oz.) strained fat-free cream soup

2-4 Tbsp. (1-2 oz.) light vanilla yogurt

6 p.m. — Protein drink made with 8 oz. skim milk

8 p.m. — 8 oz. Crystal Light®

Stage 2: Pureed

This diet lasts about 2 weeks. DO NOT advance diet until instructed to do so by the surgeon's office.

Summary: This diet gets the pouch ready for soft foods, along with providing the 60-80 grams of protein needed daily.

Food Allowed: All liquids or foods on the previous stage (refer back to full liquids), also scrambled eggs, scrambled egg whites, scrambled egg substitute, low-fat cottage cheese, thinned cream of wheat made with milk, mashed beans, applesauce, baby food, and any pureed fruits, vegetables, and/or meats (use a blender for this).

Food NOT Allowed: Any liquids or foods not allowed on the previous stage, along with whole milk, any solid foods that aren't pureed, fried foods, and any concentrated sweets. Avoid oranges, grapefruits, and their juices (the acid from these may cause gastritis/ulcer formation in the pouch).

Amounts: About 2-4 oz. (4-8 Tbsp.) or ¼-½ cup at one time.

Reminders: It is necessary to get at least 6-8 cups of fluid daily to stay hydrated. Stop drinking 15 minutes before meals, and avoid drinking until 30 minutes after meals.

A sample menu of the pureed diet is on the next page. Remember to sip liquids slowly — it isn't possible to drink the amount listed on the menu all at one time; drink over a period of about 30-60 minutes.

Instructions for pureeing foods: Consider purchasing or borrowing a blender or food processor for this stage if one isn't already available.

1. Cut food into small pieces about the size of a thumbnail.
2. Place food in the blender or food processor.
3. Add enough liquid (ex: fat free chicken broth, fat free gravy, milk, or yogurt), to cover the blades.
4. Blend until smooth like applesauce.
5. Strain out any lumps, seeds, or whole pieces of food.
6. Use herbs and spices to flavor food (avoid really spicy and high sodium flavorings).
7. Use ice cube trays to freeze pureed foods, and pop out into Ziploc bags to avoid wasting any. This helps with portion control as each cube is about 2 oz. (4 Tbsp.).

Sample Menu: Pureed

Breakfast:

7 a.m. — ¼ cup scrambled egg or egg substitute

4 Tbsp. (2 oz.) Cream of Wheat made with skim milk — very thin or milk-like consistency

8 a.m. — Protein drink made with 8 oz. skim milk

10 a.m. — 8 oz. water or Crystal Light®

Lunch:

Noon — 4 Tbsp. (2 oz.) pureed turkey

2 Tbsp. (1 oz.) pureed green beans

2 Tbsp. (1 oz.) mashed potatoes

1 p.m. — 4 oz. grape juice

2 p.m. — Protein drink made with 8 oz. skim milk

4 p.m. — 4-8 oz. water

Supper:

5 p.m. — 4 Tbsp. (2 oz.) pureed chicken

2 Tbsp. (1 oz.) pureed carrots

2 Tbsp. (1 oz.) mashed potatoes

6 p.m. — Protein drink with 8 oz. skim milk

7 p.m. — 8 oz. Crystal Light®

Stage 3: Mechanical Soft

This diet lasts until you're able to tolerate solid food. DO NOT advance diet until instructed to do so by the surgeon's office.

Summary: This diet helps prepare the pouch for the transition to solid foods, along with providing the 60-80 grams of protein needed daily.

Foods Allowed: All liquids or foods on the previous stages (refer back to full liquids and pureed diet), also eggs, egg whites, egg substitute, low-fat cottage cheese, fish, tofu, ground lean meat, low-fat canned chicken and fish, canned fruits (in own juice or water), soft fresh fruits as tolerated, soft cooked vegetables as tolerated, potatoes **without** skin, cooked cereals made with milk, beans, toasted whole wheat breads.

Foods NOT Allowed: Any liquids or foods not allowed on the previous stages, along with whole milk, solid/crunchy foods, rice, popcorn, high-fat meats, high-fat starches, fried foods,

and any concentrated sweets. Avoid oranges, grapefruits, tomatoes and their juices (the acid from these may cause gastritis/ulcer formation in the pouch).

Note: Any food with a husk or shell may get stuck in the pouch opening if not well blended or chewed thoroughly.

Amounts: About ½-1 cup of food at each meal. Meals should last about 20-30 minutes.

Reminders:

- It may be necessary to continue drinking protein drinks at this point in order to get enough protein daily.
- Always eat your protein first at meals. Get at least 60-80 grams protein daily.
- Always chew food thoroughly to the texture of applesauce.

A sample menu of the mechanical soft diet is on the next page. Remember to sip liquids slowly — it isn't possible to drink the amount listed on the menu all at one time; drink over a period of about 30-60 minutes.

Sample Menu: Mechanical Soft

Breakfast:

7 a.m. — 1 egg

4 Tbsp. (2 oz.) oatmeal made with skim milk and fortified with unflavored protein powder

8 a.m. — Protein drink made with 8 oz. skim milk

10 a.m. — 8 oz. water or Crystal Light®

Lunch:

Noon — 2-3 oz. canned 98% fat free chicken

2 Tbsp. to ½ cup green beans

1 slice wheat toast

2 p.m. — 8 oz. water

4 p.m. — 8 oz. water

Supper:

5 p.m. — 2-3 oz. tuna in water

2 Tbsp. to ½ cup cooked carrots

2-4 Tbsp. mashed sweet potato

7 p.m. — 8 oz. Crystal Light®

9 p.m. — 8 oz. water

Stage 4: Solid Foods

Once this stage is reached, this diet is life long.

Summary: It is important to progress the diet slowly, and add new foods in one at a time to assess tolerance. The most important point to remember when starting to eat solid foods is to eat very slowly and make sure to chew foods very well before swallowing. Each meal needs to be balanced by providing both protein and carbohydrates, along with a small amount of fat.

Foods Allowed: All liquids and foods on the previous stages (refer back to all stages), also whole wheat toast, whole wheat toasted English muffin, whole grain cereals, wheat tortillas, whole wheat pasta.

Foods NOT Allowed: Any liquids or foods not allowed on the previous stages, along with white flour, rice, popcorn. Some vegetables, such as corn and peas may not be well tolerated. Avoid oranges, grapefruits, and their juices (the acid from these may cause gastritis/ulcer formation in the pouch).

Note: Any food with a husk or shell may get stuck in the pouch openings if not well blended or chewed thoroughly.

Amounts: About ½-1 cup of food at each meal. Meals need to last about 20-30 minutes.

Reminders:

- Learn to listen to the pouch and stop eating or drinking when starting to feel satisfied. Never eat past the point of fullness.
- Drink at least 6-8 cups of liquid daily to stay hydrated. Avoid carbonation, caffeine and alcohol. Include water, sugar-free beverages and protein drinks (as needed).

Please Note: Food intolerance varies with each person and at different times.

What wasn't tolerated three months after surgery may be fine six to nine months after.

Tips for better food tolerance:

- As a general rule, it's best to try only one new food per day.
- Make a note of the foods that are tolerated well, along with those that aren't.
- Avoid foods that aren't tolerated for one to three months before trying them again.

Week One

(Please note: The portions listed may be too much, remember to ONLY EAT to the point of feeling satisfied.)

MONDAY	WEDNESDAY	FRIDAY	SATURDAY
Breakfast: 6 oz. cup light, fat-free yogurt* ½ cup unsweetened applesauce ½ cup oatmeal	Breakfast: 1 scrambled egg ½ cup pears 1 slice whole grain toast	Breakfast: 2 oz. lean ham, 1 oz. low-fat cheese ½ small banana ½ whole wheat English muffin	Breakfast: 6 oz. light, fat-free yogurt* ½ cup blueberries ½ cup Cream of Wheat with milk*
Lunch: 3 oz. tuna canned in water ½ cup peaches, canned in juice/light syrup 6 whole wheat crackers	Lunch: 1 cup chili 1 small apple, peeled, thinly sliced 6 oz. light, fat-free yogurt*	Lunch: ½ cup egg salad (low-fat mayo) ½ cup spinach 6 whole wheat crackers	Lunch: 3 oz. chicken salad (low-fat mayo) 1 small apple, peeled, thinly sliced 1 slice whole grain toast
Dinner: 3 oz. baked chicken ½ cup cooked carrots ¼-½ cup whole wheat spaghetti	Dinner: 3 oz. lean pork chop ½ cup cooked carrots ½ cup mashed potatoes*	Snack: ½ cup low-fat cottage cheese	Dinner: 3 oz. baked salmon ½ cup green beans ½ small baked potato, no skin
TUESDAY	THURSDAY	Dinner:	SUNDAY
Breakfast: ½ cup low-fat cottage cheese ½ cup peaches, canned in juice/light syrup 1 slice whole wheat toast	Breakfast: High protein bar 6 oz. light, fat-free yogurt*	½ cup low-fat refried beans ½ cup low-fat shredded cheese 1- 6 in. whole grain tortilla	Breakfast: Small 2 egg omelet ½ cup pears, canned in juice/light syrup 1 slice whole wheat toast
Lunch: 3 oz. lean turkey ½ cup low-fat cream soup ½ small banana	Lunch: ½ cup low-fat cottage cheese ½ cup edamame (soybeans) ½ cup peaches, canned in juice/light syrup	Dinner: 3 oz. turkey "meat" loaf ½ cup spinach ½ cup baked sweet potato	Lunch: 3 oz. tuna - canned in water ½ cup spinach 6 whole wheat crackers
Dinner: 3 oz. baked fish ½ cup green beans 6 oz. light, fat-free yogurt			Dinner: 3 oz. baked chicken ½ cup cooked carrots ½ cup navy beans

*fortify with protein powder

Week Two

(Please note: The portions listed may be too much, remember to ONLY EAT to the point of feeling satisfied.)

MONDAY

Breakfast:

1 Tbsp. peanut butter
1 slice whole wheat toast
6 oz. light, fat-free yogurt

Lunch:

1 cup bean soup
6 whole-wheat crackers
½ cup cantaloupe
(if tolerated)
1 small plum, peeled

Snack:

1 protein bar
(10-15 grams protein)

Dinner:

3 oz. turkey meatballs
with BBQ sauce
½ cup zucchini, peeled
and cooked
1 ounce low-fat string
cheese

TUESDAY

Breakfast:

1 hard boiled egg
½ mini whole wheat
bagel, toasted
½ cup apricots, raw or
canned in juice/light
syrup

Lunch:

3 oz. shredded chicken
1- 6 inch whole grain
tortilla
2 Tbsp. salsa (if tolerated)

Dinner:

3 oz. baked lean ham
½ cup broccoli and
cauliflower floret medley
½ baked sweet potato,
no skin

WEDNESDAY

Breakfast:

½ cup cottage cheese
½ cup strawberries
½ cup oatmeal*

Lunch:

2 oz. sliced turkey, 1 ounce
low-fat cheese
1 piece whole wheat toast
½ banana

Dinner:

3 oz. baked tilapia
½ cup spinach
½ cup soft peas, mashed

THURSDAY

Breakfast:

1 cup skim milk
1 packet no sugar added
Instant Breakfast
½ cup dry Cheerios®
(wait 30 minutes)

Lunch:

3 oz. canned salmon
1 oz. whole grain pita chips
½ cup pears, canned in
juice/light syrup

Dinner:

3 oz. baked chicken
½ cup chopped asparagus
¼-½ cup whole wheat
pasta

FRIDAY

Breakfast:

1 scrambled egg
½ - 4 inch whole grain
waffle
2 tsp. light syrup
1 small apple, peeled

Lunch:

1 cup garbanzo beans,
black beans, chopped
avocado, and chopped
tomato, if tolerated
1 oz. whole grain pita chips
6 oz. light, fat-free yogurt

Snack:

1 protein bar
(10-15 grams protein)

Dinner:

2 oz. ham, 1 ounce
mozzarella cheese
½ whole grain English
muffin, toasted
½ cup green beans

SATURDAY

Breakfast:

6 oz. light, fat-free yogurt*
½ cup blueberries
½ cup low-fat granola

Lunch:

3 oz. chicken salad
(low-fat mayo)
6 whole-grain crackers
1 small pear, peeled

Dinner:

3 oz. grilled lean pork
½ cup broccoli florets and
carrots, cooked
½ cup mashed potatoes

SUNDAY

Breakfast:

2 egg omelet
½ piece whole grain toast
½ banana

Lunch:

½ cup cottage cheese
½ cup peaches, canned in
juice/light syrup
½ cup yellow squash,
peeled and cooked

Snack:

6 ounces light, fat-free
yogurt*

Dinner:

3 ounces tuna canned in
water (low-fat mayo)
4 Melba toast crackers
½ cup steamed
cauliflower florets

*fortify with protein powder

Additional Menu Ideas

Choose one from each category to complete the meal: *Always eat protein source first at every meal.*

PROTEIN

98% fat free turkey
 Boneless, skinless chicken
 Pork tenderloin
 Sirloin or round beef*
 Lean ham
 Veal*
 Tuna
 Orange roughy
 Halibut , tilapia, cod, sole
 Salmon
 Seafood (blend shrimp)
 Light low-fat yogurt
 Skim milk
 1% milk
 Low-fat soy milk
 Low-fat lactose-free milk
 Evaporated skim milk
 Low-fat or 2% cheese
 Low-fat collage cheese
 Mozzarella cheese
 Egg/egg whites
 Tofu and soy protein products
 Chili, mild
 Natural peanut or almond butter
 Protein drink/shake
 Unflavored protein powder
 No-sugar added Instant Breakfast
 Non-fat dry milk

VEGETABLES

Carrots
 Tomatoes*
 Spinach salad (if tolerated)
 Green beans
 Sweet bell pepper
 Cucumbers
 Cauliflower**
 Broccoli**
 Zucchini/squash**
 Cabbage**
 Brussels sprouts**
 Beets
 Asparagus, chopped**
 Eggplant
 Artichokes
 Mushrooms
 Vegetable juice**

STARCH OR FRUIT

Fruits:

Peaches, peeled or canned in water
 Nectarine, peeled, chopped
 Pears, peeled or canned in water
 Apricots, peeled
 Mango, papaya, guava
 Blueberries
 Strawberries
 Banana
 Cantaloupe**
 Apple, peeled**
 Honeydew melon**
 Watermelon**
 Applesauce
 Plum, peeled
 Kiwi, peeled

Grain/Starch:

Whole wheat pasta
 Whole wheat toast
 Whole grain cereal* (not coarse bran)
 Whole wheat tortilla
 Whole wheat crackers
 Whole grain waffle
 Whole wheat English muffin, toasted
 Whole wheat pita, toasted
 Oatmeal
 Cream of Wheat
 Grits

Starchy Vegetables:

Mashed potatoes
 Potato sweet, white or red (skins*)
 Cooked beans (good protein)
 Low-fat refried beans (good protein)
 Black-eyed peas (good protein)
 Soybeans (good protein)
 Pumpkin
 Peas (skins*)

Good Fat Sources

Limit to 3-4 servings/day
 Avocado
 Cooked beans (good protein)
 Olives
 Low-fat refried beans (good protein)
 Olive oil, canola oil, peanut oil
 Black-eyed peas (good protein)
 Natural peanut butter or almond butter (to supplement)
 Soybeans (good protein)

Ground flaxseed
 Pumpkin
 Spray or tub margarine
 Light salad dressing - oily type

*Not in the first 6 months

**May cause gastric discomfort

Tips for Limiting Sugary, Greasy and Processed Foods

It is important to limit greasy and sugary foods as these foods can cause dumping syndrome in RYGB and are overall not tolerated well in gastric sleeve patients. Choose foods low in added sugars and avoid fried foods.

FOOD GROUP	Better Choices (choose more often)	Less Healthy Choices (choose less often)
Grains, breads, cereals, starchy vegetables	Whole-grain toast, whole-grain cereals and crackers, whole wheat pasta, whole-wheat English muffin, pretzels, oatmeal, grits, cream of wheat, corn, peas, potatoes, beans, whole grain tortillas, hummus, quinoa, couscous	Muffins, biscuits, cornbread, granola, French fries, croissants, high-fat snack crackers, potato chips, candy, pastries, cakes, cookies
Fruits	All fruits tolerated, 100% fruit juices (limit to no more than 4 oz. per day), fruits canned in 100% juice	Fruits canned in heavy syrup, fruit cobblers, more than 4 oz. of fruit juice
Vegetables	All vegetables tolerated, 100% vegetable juice	Au-gratin vegetables, fried vegetables or prepared with cheesy sauces
Milk, yogurt	Milk, plain yogurt, no added sugar yogurt	Yogurt with added sugar, ice cream
Protein (meats and meat substitutes)	Baked, broiled, stir-fried, grilled chicken, fish, turkey, pork, beef, eggs, cottage cheese, non-processed cheese, beans, peanut butter, tofu	Fried meat, fish, and poultry, bologna, hot dogs, bacon, sausage, processed cheese (American), bratwurst, salami

* High-fat foods (especially greasy foods) and simple sugars can cause dumping syndrome for patients who have RYGB.

Fats

Monounsaturated sources – choose most often: olive oil, canola oil, peanut oil, olives, peanut butter (natural is best), avocado, oily dressing, flaxseed (ground), spray or tub margarine.

Saturated sources – use sparingly as they can lead to heart disease and high cholesterol: butter, cream, cream cheese, sour cream, shortening, bacon, sausage, coconut, coconut oil and palm oil.

Tips for Dining Out

Once you can tolerate solid food, feel free to enjoy dining out with friends and family. It's important to be very careful about the quality of food chosen, portion sizes, and the length of time it takes to eat. It's also essential to chew foods well. Review the following tips to help make dining out part of a healthy diet:



- **Plan ahead.** Decide what to order before going to the restaurant. Once the main course arrives, decide how much to eat and stick to it. Ask for a to-go box right away and fill it with extras.
- **Be familiar with menu descriptions.** “Breaded, fried, creamed, scalloped, au gratin, and rich” are sources of extra calories and fat. Instead, choose items that are poached, roasted, broiled, steamed or stir-fried, as they are usually lower in fat.
- **Ask about ingredients and preparation.** Ask that items be prepared without butter, gravy, cream sauce or other fats. Trim all visible fat from meat and remove skin from poultry before eating.
- **Ask about serving sizes.** Restaurants may not be able to meet every request, but most will try to make changes. Request half portions, share a full entree with a dining partner, or order ala carte. Some restaurants permit ordering off the senior’s menu and/or child’s menu.
- **Ask for items that are not on the menu.** Non-fat or low-fat milk is usually available upon request. Light, broth-based soups, fresh fruit, yogurt, and steamed vegetables are often available even though they may not be included on the menu.
- **Beware of the bread basket.** Ask that bread, chips and crackers not be brought to the table before your entree is served. This allows you to save room for foods with more nutritional value.
- **Caution at the salad bar.** Be careful with salad dressings, toppings and creamy salads (potato, macaroni, cole slaw). These can quickly add up to many calories and loads of fat. Remember to control portion sizes.
- **Avoid desserts.** They can be loaded with unnecessary calories and can cause “dumping” in RYGB patients. Instead, try fresh fruit sorbet, seasonal fresh fruit or sugar free gelatin.
- **No alcoholic beverages.** They are not only high in calories, but can also irritate the new pouch and cause dehydration. All beverages should be consumed between meals.
- **Try new foods at home first.** This is to avoid embarrassment at a restaurant, should you develop nausea, vomiting or dumping syndrome.
- **When dining out, always remember to follow the same eating principles observed at home.** Take your time and chew well.

Changes after Surgery

Complications

Even though change to the size of the stomach is a useful tool, it can cause serious problems if you don't follow healthy eating habits and meal planning. Complications can happen at any time (days, weeks, months or years) after surgery.

Following the diet guidelines for portion size, specific foods and supplements will help prevent complications. Common complications and ways to prevent them are listed below.

COMPLICATION	POSSIBLE CAUSES	WAYS TO PREVENT COMPLICATION
Dehydration	Not enough fluid	Drink at least 6-8 cups (48-64 oz.) liquid daily.
	Vomiting	See ways to prevent vomiting below.
Nausea and Vomiting, Heartburn	Too much food	Follow guidelines for portion control. Always stop eating when you feel satisfied.
	Eating too fast or not chewing thoroughly	Eat slowly, chew food thoroughly.
	Blockage	Meals should last 20-30 minutes. If having more than 1-2 vomiting episodes a day or vomiting after every meal, call your doctor immediately.
Constipation	Not enough fiber	Try to eat more vegetables, fruits and whole grains. Please note: limit bran, whole grain bread and raw fruits and vegetables immediately following surgery. Add these foods slowly so the pouch can adapt to them. Do not take any fiber pills or laxatives without talking to your doctor. See ways to prevent dehydration above.
	Dehydration	

COMPLICATION	POSSIBLE CAUSES	WAYS TO PREVENT COMPLICATION
Protein deficiency	Not enough protein	Make sure to eat protein first at all meals. It's important to get at least 60-80 grams protein daily. (See <i>Protein and Supplement Guidelines</i> on pages 9 and 14.)
Vitamin and mineral deficiency	Not enough vitamins and/or minerals	Always take multi-vitamin and any other supplements required from your doctor or dietitian. (See <i>Supplement Guidelines: Vitamins</i> on Page 17.)
Diarrhea	Lactose intolerance	Try lactose-free milk or soy milk.
	Dumping syndrome	See below for ways to prevent dumping.
Blockage of the stomach opening	Not chewing food well	Chew food 30 times before swallowing. Call your doctor if pain, nausea and/or vomiting persist.
Stretching of stomach pouch	Eating past point of fullness	Avoid large quantities of food.
Weight gain or a plateau	Snacking, not exercising, consuming caloric beverages, grazing behavior.	Avoid snacking, caloric drinks, high-fat and high calorie foods. Exercise regularly.
Dumping syndrome (RYGB only)	Simple sugars, high fat foods, drinking with meals	Avoid simple sugars, sweets, high fat foods and drinking liquids with meals.

Additional Resources

Helpful Bariatric Websites

ObesityHelp.com

BariatricAdvantage.com

asmbs.org

WLSLifestyles.com

unjury.com

NaturesBest.com

Helpful Calorie Counter Books and Websites

The Complete Food Counter
by Natow & Heslin

CalorieKing.com

The Complete Book of Food Counts
by Corinne Netzer

TheDailyPlate.com

FitDay.com

Biggest Loser Complete Calorie Counter

SparkPeople.com

The Calorie King Calorie, Fat & Carbohydrate Counter

Loselt.com

MyFitnesspal.com

Calorie Count

CalorieCount.com

If you have questions about your diet before or after surgery, please contact a Registered Dietitian at **Mercy**.



Your life is our life's work.