

General guidelines for your Endoscopic Sleeve Gastroplasty

Why it's performed:

Endoscopic sleeve gastroplasty is a newer type of weight loss procedure. It reduces the size of your stomach using an endoscopic suturing device without the need for surgery.

Prior to Procedure:

- The hospital will call you a few days before your procedure to tell you what time to arrive. If you need information prior to receiving this call you can call the endoscopy schedulers at **732-253-3210** or the hospital endoscopy nursing line at **732-828-3000 x 5453**.
- Arrival times are given to admit you to the unit and prepare you for your procedure. Is it important that you arrive at your given time. ***Please Note: Unlike surgery centers this unit treats both inpatients and outpatients and emergencies may arise that may cause delays in scheduled procedure. Please be patient and know that we will provide you with the best care when you go into your procedure. Due to the unpredictable nature of procedure units, please be prepared to spend the day here.***
- Some procedures or recoveries require a hospitalization that we may not always be able to predict be prepared to stay in the hospital if necessary.
- Do not bring any valuables or wear any jewelry the day of your procedure as we do not have space for you to secure belongings.
- Because you will be sedated for the procedure you will need to bring someone with you to take you home. You cannot drive or take public transportation alone for 24 hours after the procedure. We have limited space in the waiting area and we only can allow one visitor to wait during your procedure.
- If you need to send proof of your COVID vaccine please email it to VaccineStatus@rwjbh.org

Evaluations

- Prior to your procedure, your doctor may ask you to complete several pre-procedural evaluations. These include, but are not limited to:

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- Nutrition evaluation
- Psychiatric evaluation

Medications

- If you are taking medications for high blood pressure, seizures, or if you are taking prednisone, you may take these medications the morning of the procedure or at least 2 hours before the procedure with a small sip of water.
- If you are diabetic:
 - If you take a “sugar” pill, **do not** take it on the day of your procedure.
 - If you are taking regular insulin (R), **do not** take it on the day of your procedure.
 - If you are taking any other insulin preparation, please contact your prescribing physician for instructions.
- If you are taking Coumadin, Plavix, or other blood thinners contact your prescribing physician for instructions on when to stop taking this medication.
- If you are taking aspirin daily continue to take this medication.
- Tell your doctor if you have allergies.
- Place the **scopolamine patch at around 6 pm** the night before the procedure behind your ear as directed.

Diet

- Please go on a **clear liquid diet**, the day prior to your procedure (anything you can see through only).
- The following foods are allowed in a clear liquid diet (If you are diabetic, you can follow this diet as long as it is sugar free):
 - Water (plain, carbonated, or flavored)
 - Fruit juices without pulp, such as apple or white grape juice
 - Fruit flavored beverages, such as fruit punch or lemonade
 - Carbonated drinks, including dark sodas (cola and root beer)
 - Gelatin (not red)
 - Tea or coffee without milk or cream
 - Sports drinks (no red)
 - Clear, **fat-free** broth (bouillon or consommé)
 - Honey or sugar
 - Hard candy, such as lemon drops or peppermint rounds
 - Ice pops without milk, bits of fruit, seeds or nuts
- You should have nothing to eat after midnight.

Pre-Procedure Shopping list

- Have these items ready **BEFORE** surgery.
 - beef, chicken, vegetable broth (canned or bouillon)
 - sugar-free gelatin
 - sugar-free, non-carbonated beverages
 - sugar-free popsicles
 - liquid protein supplements – added at full liquid phase/day 3
 - chewable /liquid multivitamin/mineral supplement
 - chewable /liquid calcium citrate with vitamin d supplement

The day of the procedure:

Your procedure will be done at Robert Wood Johnson University Hospital in the endoscopy suite on the second floor above Walgreens. The address is:

**1 Robert Wood Johnson Place
New Brunswick, NJ 08901**

If you are going to be late to your appointment or have any questions the day of the procedure please call 732-828-3000 x3210.

Arrive 1 ½ hours prior to your scheduled procedure time. When you arrive, you will register and give your medical history.

- Take the **EMEND** (aprepitant) capsule at 6 am the day of the procedure, with a little bit of water.

During Endoscopic Sleeve Gastropasty:

- We will start an IV in your vein to administer fluids, anesthesia, antibiotics, and other needed medications.
- The procedure is done using an endoscope with a camera and an endoscopic suturing device.
- The endoscope is inserted down through your mouth into your stomach. Your doctor will view images on a screen.
- Using the endoscope the doctor places approximately 24 sutures in the stomach, leaving it shaped like a tube. This restricts the amount of calories your body absorbs.

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Post procedure:

Once the procedure is finished you will recover from anesthesia in the endoscopy unit. Your doctor will discuss the procedure with you. *Please be advised, it is common after receiving anesthesia to forget some of the conversation you had with your doctor. For this reason, we suggest a family member be available for this conversation at your request.*

After the procedure you might have a brief stay in the hospital or you may be discharged home if you feel well.

If you are discharged home, do not drive, operate heavy machinery, or drink alcohol for 24 hours. You should go home and rest after your procedure.

It is important to drink lots of fluids to rehydrate.

Common side effects:

- Stomach spasm
- Nausea
- Trapped gas
- Dehydration

Please Note: *These symptoms usually resolve on their own within 24-72 hours after your procedure. If your symptoms are severe or persist please notify your physician or go to the emergency department.*

Medications after discharge:

You will be given a variety of medications, below is a schedule of when to take each one.
Regular Meds (please take regularly post procedure)

- Anti-acid medications (prilosec, nexium or omeprazole), twice a day for two weeks
- Antibiotics (Augmentin or Levaquin) as prescribed for three days
- Anti-nausea medication Zofran 4mg every 4 hours or 8mg every 8hours

The following medications may be prescribed **as needed:**

- **Pain (Pain medications will be prescribed on the day of the procedures)**

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- Liquid Tylenol with codeine up to 15ml every 6 hours *OR*
Tramadol (crushed) 1 to 2 tablets every 6 hours
- **Nausea:**
 - Levsin may be prescribed for up to a week.
 - Scopolamine patch to be changed every 72 hours
 - Zofran (Ondansetron) 5ml (4mg) every 4 hours, or 8mg every 8 hours
 - Compazine (prochlorperazine) suppository 25mg (One suppository) every 12 hours
- **Constipation:**
 - Miralax 1 capful every day (dissolve in 4 oz of water)

Follow up:

Contact your physician to schedule a follow up appointment:

Clinical Academic Building (CAB)
125 Paterson Street
Suite 5100B
New Brunswick, NJ 08901
Phone: 732-235-7784

We recommend the following schedule for follow up with your doctor:

- 1 month office visit
- 3 month office visit
- 6 month office visit
- 9 month- phone call
- 1 year office visit

It is important you get your upper GI series (X-ray) scheduled within one-week post procedure.

IMPORTANT PHONE NUMBERS:

Rutgers GI Clinic: 732-235-7784

Robert Wood Johnson Schedulers: 732-828-3000 x3210

RWJ Endoscopy Nurse line: 732-828-3000 x5453 (Leave a message and you will receive a call back within 24 business hours)

For after hour **emergencies** call 732-235-7784

Nutrition:

It is very important you follow up with nutrition, twice a month at least for the first three months, and then once a month after that (as deemed necessary by the nutritionist).

Nutritionists/Dieticians: For a complete list of Nutritionists/Dieticians please contact your insurance company.

Robert Wood Johnson University Hospital-Outpatient Nutrition Services

1 Robert Wood Johnson Place
New Brunswick, NJ 08901
Phone: (732) 253-3100

Wellness Nutrition Services

123 Dunhams Corner Road
East Brunswick, NJ 08816
Phone: (732) 254-0113

Lorraine Matthews-Antonsiewicz

225 May Street, Suite F
Edison, NJ 08837
Phone: (732) 494-1140

Sandra Byers-Lubin

Specializing in Cholesterol and Diabetes

59 One Mile Road Ext
East Windsor, NJ 08520
Phone: (609)275-6237

You are responsible for confirming that the provider you have chosen accepts your insurance.

If your insurance requires a referral to see a specialist, please contact the referral department at (732)235-8617 or (732)235-7204 with the following information to obtain a referral:

- Name of the Physician
- Specialty of the Physician
- Address of the Physician

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- Phone number of the Physician
- Date of your appointment

INFORMATION & DIETARY GUIDELINES

- Your new stomach pouch will hold about 4 oz. of food.
- Follow the diet progression included in this packet to allow for optimal weight loss and healing of your stomach pouch.
- Even if you think you feel well enough to advance your diet early, it is important to follow the diet below.
- The procedure is a weight loss “tool.” Healthy food choices and exercise will help you maximize your weight loss and maintain your nutritional health.
- Taking a (chewable) multivitamin and calcium + vitamin D supplement after surgery will help maintain optimal nutritional status. After one month, you may switch to pill form.

DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT/12AM THE DAY OF THE PROCEDURE.

POST-OPERATIVE DIET PROGRESSION

- 1) Days 1-2: Clear Liquids
- 2) Days 3-14: Full Liquids
- 3) Week 3: Soft Foods
- 4) Week 4: Continue Soft Foods; Add Cooked Vegetables and Soft Fruits
- 5) Week 6: Add Starches (Whole grain recommended)

1. Post-Op Days 1 and 2

CLEAR Liquids (Non-Carbonated, No Sugar, No Caffeine)

- ✓ CLEAR liquid protein supplements (try Isopure Ready To Drink)
- ✓ Broth (chicken, beef or vegetable)
- ✓ Sugar-free popsicles or fruit ices without pulp
- ✓ Water, tea, Crystal Light, or other sugar free non-carbonated drinks

REMEMBER:

- *Your goal is to allow your gastrointestinal tract to rest and heal*
- Sip beverages slowly throughout the day – no more than 2 oz. at a time
- STOP drinking before you feel overly full

2. Days 3- 14

FULL Liquids

- ✓ All the above clear liquids
- ✓ Protein liquid supplements (protein shakes - see guide at end of handout)

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- ✓ Fat-free cream or pureed soups (no chunks)
- ✓ Low fat plain yogurts or plain, low fat Greek yogurt

3. Start of Week 3 (Day 15)

Advance diet to replace Full Liquids with Soft Foods (as tolerated)

Soft Foods: Focus on protein sources that are soft, moist, diced, ground or pureed

- ✓ All above beverages/foods
- ✓ Eggs, ground poultry, soft moist fish (fat free gravy or bouillon/broth/light sauce to moisten if needed)
- ✓ Cooked beans / bean soup
- ✓ Tuna fish with light mayo
- ✓ Skim milk cottage cheese, skim milk ricotta cheese, or low-fat soft cheese

4. Start of Week 4 (Day 22)

Advance diet to include cooked/soft fruit and vegetables (as tolerated)

Soft Foods Continued: Add cooked, soft vegetables and soft and/or peeled fruit

- ✓ All above beverages/foods
- ✓ Well cooked, soft vegetables
- ✓ Soft and/or peeled fruit

5. Start of Week 6 (Day 36)

Advance diet to include starches (in limited amounts)

- ✓ All above beverages/foods
- ✓ Add rice, bread, pasta – preferably in whole grain form and in small amounts (quinoa, whole wheat bread, brown rice)
- ✓ Eat protein and vegetables at meal before the starch
- ✓ Raw vegetables / salads permitted as tolerated – consult with surgeon

A FEW GUIDELINES:

- Do not drink during mealtime. Wait 30 minutes after each meal to consume liquids.
- Eating behavior: chew thoroughly (20 chews!), eat slowly, take small bites
- Always eat protein first at meals, followed by vegetables and lastly starch, only if you are still hungry.
- Your daily protein goal is 60 grams for women and 70 grams for men. It is ok if you are not always meeting that goal, but remember to prioritize protein foods over other foods.

Aim for 6-8 glasses / 36-64 oz. of liquids per day (this includes water, protein shakes, etc)

Listen to your body – stop eating when you are “comfortably full.” Your tolerance may be limited to 2 tablespoons at each meal.

REQUIRED NUTRIENT SUPPLEMENTS

1. Chewable Supplement Vitamin Mineral Supplement (2x per day – CONFIRM with your surgeon)
2. Chewable or Liquid Calcium Citrate with Vitamin D

SHOPPING LIST:

Have these items ready BEFORE surgery.

- beef, chicken, vegetable broth (canned or bouillon)
- sugar-free gelatin
- sugar-free, non-carbonated beverages
- sugar-free popsicles
- liquid protein supplements – added at full liquid phase/day 3
- chewable /liquid multivitamin/mineral supplement
- chewable /liquid calcium citrate with vitamin d supplement

Frequently Asked Questions

1. How much pain or nausea will I be in?

This varies from person to person. Generally the pain feels sharp and cramp like. It should not last for more than a few days. The pain medications given should help. You can alternate between Tylenol with codeine and tramadol (take every 3 hours). You can also just take liquid Tylenol.

For nausea there are three medications prescribed, so you can alternate between them. The nausea again should only last 2-3 days.

2. I'm feeling tired or fatigued after the procedure?

You are likely dehydrated. Make sure you have a sip to sips of water every five to ten minutes. Start taking a multivitamin if you haven't already. You need water infused with electrolytes

3. I have a fever is that normal?

A fever post procedure the first three days is normal, if persistent please call the office. You can take Tylenol every 6hours (remember there is Tylenol in the codeine so DO NOT take both).

4. How much pain is "ok"?

Discomfort is normal post procedure, pain that persist, worsens or if you abdominal distension you need to call the office. Remember you can take Tylenol with codeine or liquid Tylenol. You can alternate with tramadol.

5. I have double vision, what does this mean?

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This is a side effect from the scopolamine patch, remove the patch and if it still persists please call the office.

6. I haven't had a bowel movement in a few days?

Have you tried taking the miralax, increase from daily to twice a day and add senna 1-2 tabs at bedtime. Again increase your water intake.

7. When is it ok to resume exercise?

You can resume light exercise day 5- no abdominal exercises. No heavy lifting until post your 1 month follow up visit

8. I feel acid or chest discomfort?

If you are on once a day acid medication, increase to twice a day. You may also add Zantac or Pepcid at night (start at 75 mg and increase as needed to max 300mg at bedtime).

9. I am still hungry?

You need to increase your protein intake. Liquids also do not make one full. Once you start eating solids this should resolve as well. Remember not to over think and worry about the size of the stomach. It definitely is smaller!

10. I don't feel full?

(Same as above). Do not push your limit and test your capacity- as your stomach is still small even if you do not feel discomfort as a form of restriction. We do not want you to feel pain, so do not eat until you get there. This will tear and stretch your stomach.

11. When can I have alcohol and will the procedure affect my tolerance?

NO alcohol for 3 months. However it is recommend to minimize or avoid all alcohol for 6 months for better weight loss. Your tolerance may be affected, proceed with caution.

12. When can I resume sexual activity?

Nothing strenuous, but generally 2-3 weeks post procedure.

13. How often should I follow up with Nutrition?

It is your responsibility to call to make appointments – **Strongly** recommend following up with the nutritionist at least 1-2 times a month. It is also recommended to call and set these apt ups **prior** to the procedure in order to get timely appointments.

14. When can I fly?

You can fly on day 5 post procedure. This is just to make sure all is well. You need to have had your upper GI series before your travel.

15. How soon can I return to work?

This is completely up to you. People vary and can return from the very next day to a few days later.