

POST BARIATRIC SURGERY WARD PROTOCOL

Day	Gastric Bypass or Sleeve Gastrectomy	
Day 0 (Post operation)	 Gastric bypass - 30's orally Sleeve gastrectomy – nil by mouth IV fluids (as per surgeon preference) Lansoprazole fast-tab 30mg daily Refer type 1 diabetic patients to the diabetes team via EPR referral 	
Day 1	 Check U&Es and FBC before 8am Commence <u>'Stage One: Starting on Fluids' protocol</u> Physiotherapy review Encourage early mobilisation 	
Day 2	 Continue 'Stage One: Starting on Fluids' protocol Discharge day 2 	
On Discharge	Continue 'Stage One: Starting on Fluids' protocol for 4 weeks	
	 Diet Give patient a copy of 'Stage One: Starting on Fluids' protocol Ensure dietitian is informed of patient discharge Advise patient that dietitian will ring them on the next working day for review Other teams: Ensure diabetes team has reviewed prior to discharge if required. Medication for TTO's Lansoprazole fast tab 30mg OD; required for 3 months post-surgery (GP to provide 2 month supply after initial 1 month supply from hospital). Prophylactic tinzaparin (dosed by weight) for 14 days post-op. 4500units OD for <109 kg, 7000 units OD for 110-149kg and 9000 units OD for >150kg Document on the TTO that GP is to prescribe vitamin B12 injections every 3 months (lifelong treatment) Patients will be advised pre-operatively to take a chewable OTC multivitamin before surgery and for the first 2 weeks post-surgery. The bariatric outpatient dietitian will advise patient on longer term vitamin and mineral supplementation once they are discharged home. Please speak to the ward pharmacist if the patient takes any regular medication, these may need to be altered/adjusted post-op.	

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