

Your Pathway through Bariatric Surgery

Coming to hospital

Please do not eat or drink anything on the morning of your operation. On arrival on the Theatre Admissions Unit, you will be assessed by nursing staff, anaesthetists and surgeons before your operation. After these assessments you will then change in to a hospital gown before walking to theatre with a nurse escort.

The anaesthetic

You will arrive in the anaesthetic room accompanied by a member of staff and will be asked to position yourself on the operating table. You will have your blood pressure and heart rate taken and oxygen levels in your blood will be measured. The anaesthetist will insert a drip into a vein, so that we can give you anaesthetic medication. Before you go off to sleep, you will be asked to take some deep breaths through an oxygen mask. This is to keep your lungs open and fill them with extra oxygen. A second drip may be inserted after you have gone to sleep.

For patients who are having a gastric bypass or sleeve gastrectomy, a blue dye test will be performed during surgery to confirm that the stitches in your stomach are watertight and do not leak. As a result, you may have some blue dye in your mouth, around your lips and tongue when you wake up. This will wash off with time. The dye test is not required for those having a gastric band inserted.

Waking up after your surgery

You will wake up in your bed in theatre and soon afterwards go to the recovery room. There will be a nurse assigned to look after you closely and help treat sickness or discomfort that may develop.

The types of discomfort patients can experienced include abdominal pain, feeling bloated or a trapped wind sensation. Some people may experience a discomfort in their shoulder, which is a result of the gas distending your abdomen during the operation. You will receive painkillers in theatre and regularly afterwards with an option of more in between doses if you require. It is important that you tell us how you feel.



Most patients undergoing bariatric surgery will feel some nausea afterward. Some patients may vomit as your body gets used to the new internal anatomy. You will be given two anti-sickness drugs as a precaution but some nausea may persist. You may be given anti-sickness medication to take home.

Some people will wake up having a sore and dry throat. This is caused by a combination of factors: fasting before the surgery, the anaesthetic process and the need to stay fasting for those receiving a gastric bypass or sleeve gastrectomy.

The ward

From the recovery room, you will go to the high dependency unit (DCC) or Ward 20/21. This decision will have been made before your operation, depending on your weight, the presence of sleep apnoea (interrupted breathing during sleep) and other factors. We will have emptied your bladder in theatre before you wake up, but you will not have a urine catheter (except in special circumstances). This will encourage early mobility after your operation (see below).

Mobilising

Early mobilisation is very important, as blood clots following bariatric surgery are one of the most common complications. We will ask you to mobilise as soon as you are safely able to do so, probably on the same day as your operation. This will help to minimise the risk of blood clots in your legs following your surgery. You will also be wearing Flowtron boots that help the circulation in your legs by massaging your calves, TED (thromboembolic deterrent) stockings and will have received heparin injections.

Contact details:

Specialist nurse for bariatric surgery: Tel: 0776 6070570 (Office hours).

Patient Advice & Liaison Service (PALS)

PALS staff are available to offer advice or information on healthcare matters. The office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email. PALS staff can also visit inpatients on all Trust sites.

The contact details are:

Telephone: 01302 553140 or 0800 028 8059

Minicom (Text talk): 01302 553140

Email: pals.dbh@dbh.nhs.uk

