



Your Weight Loss Surgery Guide

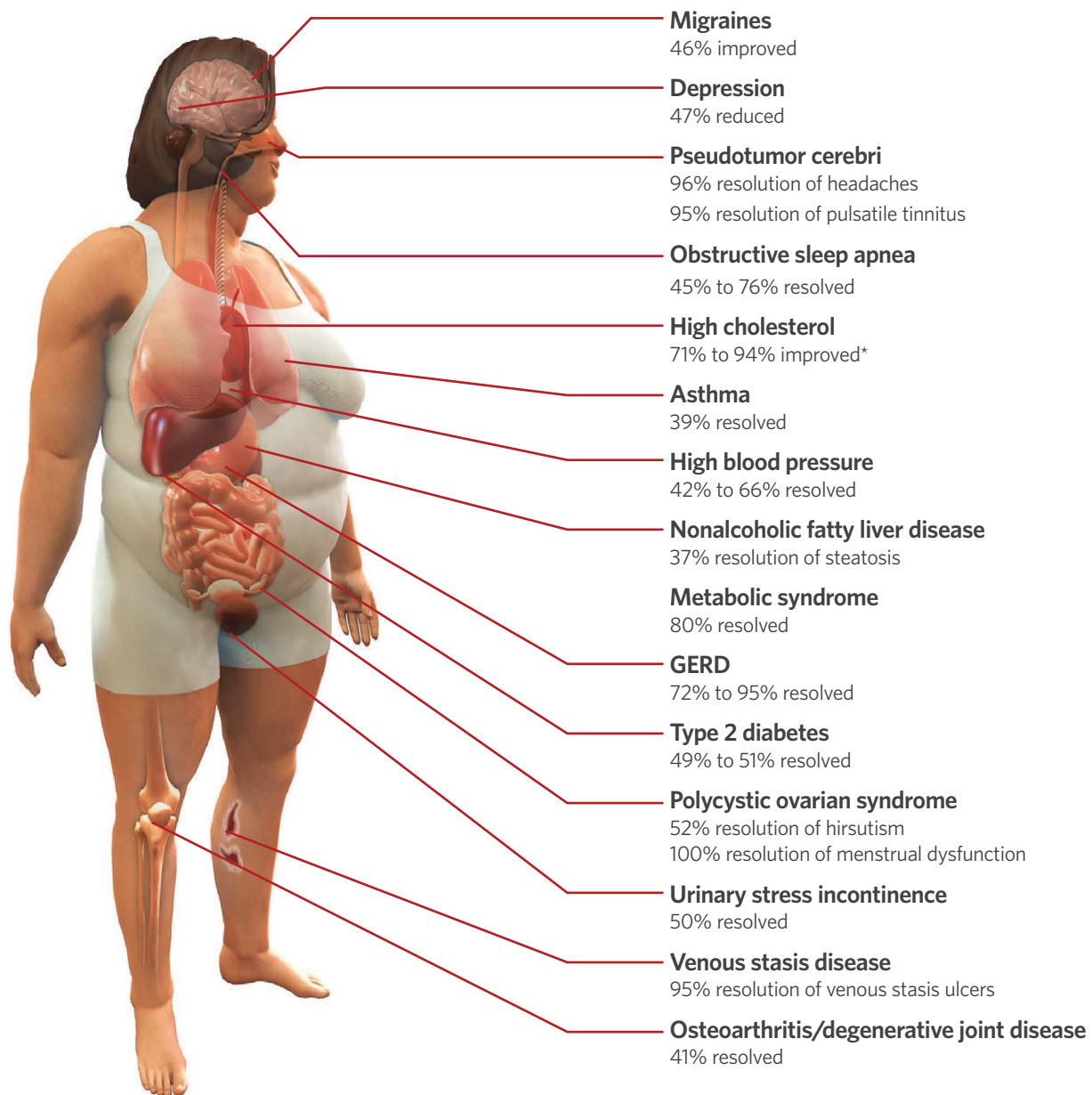


Your life is our life's work.

Getting Started

Once you and your doctor decide you're a candidate for weight loss surgery, this guide prepares you for what's next on your journey. As you complete each step, you'll be closer to a whole new you and a chance to lead a fuller, more active life.

Health Improvements Associated With Weight Loss and Bariatric Surgery



Resolution observed in the context of studies. EES has no independent data to suggest permanent resolution.

*Figure is for hyperlipidemia - a general term for high fats in the blood, which may include cholesterol and/or triglycerides.

Your Surgery Journey

The path to a successful surgery involves many steps, and Mercy's here to support you along the way. Knowing what to expect at each step makes your journey smoother and brings you closer to your new life after weight loss.

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Patient Experience Blog

With honesty and humor, Mercy co-worker Jennifer Harmon shares useful information about preparing for bariatric surgery and life after surgery on our patient experience blog.

Visit mercy.net/NoYoYo

Before & After





STEP 1

Choose Your Bariatric Team

Step 1: Choose Your Bariatric Team

Mercy's multispecialty bariatric teams include surgeons, behavioral health professionals, dietitians, exercise specialists, nurse practitioners and other professionals who are ready to provide the care and support you need before, during and after surgery. Visit mercy.net/BariatricDocs for a list of our providers.

Why Choose an Accredited Program?

Accreditation signifies a level of excellence that leads to better outcomes for surgical weight loss patients. Some insurance carriers require that you have your surgery at an accredited center — but it's beneficial even when it's not required. At Mercy, our weight loss programs have achieved bariatric center accreditation through either:



The Metabolic & Bariatric Surgery Accreditation & Quality Improvement Program (MBSAQIP) a joint program by the American College of Surgeons (ACS) and The American Society of Metabolic Surgeons (ASMBS)



The Surgical Review Corporation (SRC) a nonprofit, patient safety organization that develops and administers best-in-class accreditation programs for medical professionals, surgeons, hospitals and freestanding outpatient facilities throughout the world.



STEP 1

Choose Your Bariatric Team

To become accredited, hospitals undergo a rigorous reporting process and inspection. Along with having certain equipment geared toward the weight loss patient, accredited programs also must perform a minimum number of weight loss procedures annually to maintain their standing.

Accredited centers also provide more staff training, including:

- Obesity sensitivity
- Moving obese patients
- Recognizing complications of weight loss surgery
- Post-op care
- Post-op nutrition

Your Multispecialty Team

Your multispecialty team has achieved distinction by earning MBSAQIP accreditation. This indicates they provide safe, high-quality bariatric care. MBSAQIP accreditation is earned through rigorous assessment and maintained through ongoing, mandatory quality reporting.



STEP 1

Choose Your Bariatric Team



Our Hospitals

Since morbid obesity may involve other medical problems that need to be addressed along with your surgical care, it's important to consider hospital quality. The Leapfrog Group, a national watchdog group of health care employers, gives 10 Mercy Hospitals a Hospital Safety Grade "A" rating based on over 100 different measures of patient safety.

Several of our hospitals have also earned 100 Top Hospitals recognition from IBM Watson Health. Hospitals with this designation have better results on key clinical and operational performance indicators, including:

- Survival rates
- Patient complications
- Health care associated infections
- 30-day mortality
- 30-day hospital-wide readmission rates
- Length of stay
- Wait time in emergency rooms
- Inpatient expense
- Profitability
- Ratings from patients

As you consider your weight loss surgery options, make sure to investigate the quality of the hospital system supporting the weight loss program.



STEP 2

Understand the Surgeries

Step 2: Understand the Surgeries

It's important to know the surgical approaches to treating morbid obesity, including restrictive and malabsorptive procedures.

Restrictive procedures decrease or limit food intake, with only small amounts of food needed to feel satisfied after a meal. Malabsorptive procedures cause incomplete absorption of food intake by bypassing a portion of the small intestine.

Restrictive Procedures

Restrictive procedures reduce the stomach size without changing the anatomy of the small intestine. Typically, restrictive surgery patients can only eat 1/2 to 1 cup of well-chewed food. This leads to an overall reduction in calorie intake. While restrictive operations typically lead to weight reduction, long-term studies show they're less effective than malabsorptive surgeries in sustaining weight loss. Lasting weight reduction always depends on your ability and motivation to adopt a long-term lifestyle of healthy eating and exercise. Mercy performs two restrictive procedures:

Sleeve Gastrectomy



A small stomach pouch is created along the inner curve of the stomach, reducing the amount of food needed to feel satisfied and allowing you to feel satisfied longer after a meal. In this procedure, a thin, vertical sleeve of stomach is created, and the rest of the stomach is removed. The sleeve is about the size of a banana.

Intragastric Balloon



In this non-surgical procedure, a deflated balloon is sent down the esophagus and placed into the stomach. Once in the stomach, the balloon is filled with a sterile saline solution until it's about the size of a grapefruit. The balloon remains in the stomach for six months, where it takes up space to help reduce food intake. After six months, the balloon is deflated and removed.



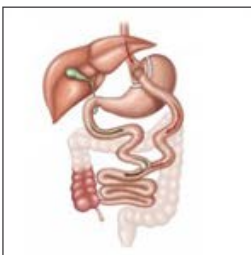
STEP 2

Understand the Surgeries

Malabsorptive Procedures

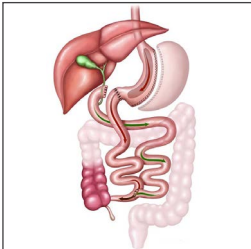
Malabsorptive procedures bypass a large amount of the small intestine, reducing the absorption of nutrients and calories. Close monitoring, nutritional supplements, vitamins and lifelong medical surveillance are crucial to maintaining health. As with restrictive procedures, lasting success depends on adopting a long-term lifestyle of healthy eating and exercise. Mercy performs one malabsorptive procedure:

Roux-en-Y Gastric Bypass



This procedure changes the stomach's shape, its capacity to hold food and the time needed to empty the stomach of food. It re-routes the food as it leaves the new stomach. Gastric bypass combines gastric restriction with malabsorption.

Duodenal Switch



This procedure creates a tube-shaped stomach pouch similar to the sleeve gastrectomy. Food from the smaller stomach bypasses roughly 75% of the small intestine (the most of any procedure), which significantly reduces absorption of calories and nutrients.

Attend an Educational Seminar

If you haven't already, be sure to attend a seminar. We offer both online and live sessions. Visit mercy.net/GetStarted



STEP 2

Understand the Surgeries

Complications and Risks

When considering any type of surgery, it's essential to know the risks and benefits. As part of your surgery preparation and education, review these potential complications:

Complication	Description
Ulcers	Ulcers (erosions in the lining of the GI tract) can develop and may lead to perforation and leakage. Tobacco use, overeating, using aspirin or non-steroidal anti-inflammatory drugs and cortisone use can cause ulcers.
Organ function	Risks include cardiovascular issues (heart attack, heart failure, irregular heartbeat or stroke), liver or kidney problems. Gallbladder disease is associated with obesity, and gallbladder removal may be needed. Injury to the spleen or potential removal of the spleen are also potential risks.
Pulmonary function	Pulmonary complications include blood clots, pneumonia, lung collapse, fluid in the chest or other breathing problems.
Anesthesia reaction	All surgeries carry a risk of potential general anesthesia reactions, but they're more common in people with excess weight.
Infection	Risks include wound, bladder and skin infections, pneumonia and deep-abdominal infections that can be life-threatening.
Vomiting and Dehydration	Persistent vomiting may be due to a structural issue and should be reported to your care team. Stay well hydrated to avoid dehydration.
Hernia	Cuts in the abdominal wall can lead to hernias after surgery. Internal hernia (twisting of the bowel) can occur after gastric bypass.
Narrowing (stricture) or stretching	Narrowing or stretching at the connection between the stomach and small bowel can occur, requiring endoscopic dilation or re-operation.
Bowel obstruction	Abdominal procedures can create scar tissue, increasing the risk for bowel obstruction.
Bleeding	Internal bleeding or bleeding requiring blood transfusion may occur.
Specific gastric bypass complications	Ulcers at the site of the stomach or intestinal opening or ulcers in the non-functional, large-stomach pouch may occur.
Specific gastric sleeve complications	Leakage, strictures, narrowing of the pouch, bleeding, esophageal dilation or reflux are possible with this procedure.
Vitamin and mineral deficiencies	Deficiencies in vitamin D, B12 and iron may develop and should be closely monitored after surgery.
Psychological issues	Conditions like anxiety and depression can occur while adjusting to a new lifestyle after weight loss surgery.

When choosing a surgery provider and hospital, it's important to check complication rates as well as techniques. Our surgeons are happy to discuss these with you.



STEP 2

Understand the Surgeries

Side Effects

Following gastric bypass, some patients experience intolerance to certain food types — usually sweets, dairy and/or fatty foods. This intolerance is called dumping syndrome. Dumping syndrome can occur after gastric bypass or sleeve surgery. Dumping syndrome is characterized by unpleasant symptoms, including sweating, nausea and shaking that can last from a few minutes to a few hours. We consider this an after effect, as it reinforces good dietary choices.

Upon re-admittance to a hospital for any reason, please inform staff of your weight loss surgery. This ensures a proper diet during your hospitalization.

Long-Term Outcome

More than 250,000 weight loss surgeries are performed in the U.S. each year. Statistics show excellent, sustainable weight loss and improved health from these procedures. But surgery by itself doesn't guarantee long-term success. **It's possible to defeat the surgery** if you ignore program guidelines by drinking high-calorie liquids, snacking continually and avoiding physical activity. Weight loss surgery is a tool that allows you to feel satisfied while eating less and choosing a healthy lifestyle.



STEP 3

Verify Insurance & Financing

Step 3: Verify Insurance & Financing

If you're having weight loss surgery, planning for the costs of your procedure and follow-up care is an important step. Talk with your treatment coordinator about how you're planning to finance these costs, which must be paid in full before surgery. Payment options* that may be available to you include:

- Medical insurance
- Private financing
- Self-pay

Medical Insurance

Some patients offset their bariatric surgery costs with help from their medical insurance plan. Your first step is contacting your plan to determine if weight loss surgery coverage is available. If your employer offers several different plans, find out if any of them cover bariatric surgery. If coverage is available, some plans require medical documentation of your weight history, obesity medications you've taken and medically supervised weight management programs you've tried.

Your health plan may cover certain bariatric procedures if your body mass index (BMI) is 35 or greater and you have one or more obesity-associated conditions (e.g., diabetes, obstructive sleep apnea, hypertension, coronary artery disease or osteoarthritis), plus you've been unsuccessful with medical treatment for obesity.

Some Mercy Bariatric Centers participate in financing programs that help insured patients spread their out-of-pocket surgical expenses out over time. Program participants must meet eligibility criteria and have no outstanding balances with Mercy. Ask your treatment coordinator if you're eligible for this program, so you can make an informed decision.

*This information is for education purposes only and is not intended to provide, and should not be relied on for, specific financial or tax advice. You should consult your own financial and tax advisors before engaging in any transaction. Reference in this document to any specific commercial product, service, or company does not constitute its endorsement or recommendation by Mercy.



STEP 3

Verify Insurance & Financing

Private Financing

Consider the following options if you need private financing to cover some or all of your costs:

- **Family or friends** – Patients often find support from family members or friends who want to help them on their journey to better health
- **Life insurance** – Permanent life insurance policies often have a cash value component that can be borrowed against once your policy's value is large enough; check with your insurance agent or policy underwriter to see if you qualify
- **Health savings account (HSA)** – An HSA works like a personal savings account, but the pre-tax funds can only be used for health-related expenses, such as weight loss surgery; funds roll over to the next year if you don't use the money; check with your employer, health plan administrator, bank or other financial institution about opening an HSA
- **Flexible spending account (FSA)** – An FSA is a pre-tax account you can use to pay for eligible medical, dental and vision expenses that aren't covered by your health plan; check with your employer to see if they offer an FSA, to verify you can use the account for weight loss surgery and to explain documentation requirements
- **Retirement plan loans** – While retirement savings should be reserved for your golden years, some people with obesity-related health problems consider this option; after comparing interest rates and long-term costs of other options (and potential lost retirement earnings), you may find it's the best option; contact your employer or retirement plan to find out whether loans or hardship withdrawals are allowed; ask about any penalties and consider the income tax implications of this option
- **Secured medical loan** – This is a type of loan you secure from a bank or other financial institution with collateral; if you don't pay it back, the lender can take ownership of the collateral
- **Direct lenders & credit cards (unsecured loans)** – Unsecured loans allow you to borrow money without collateral, but the tradeoff is an interest rate you pay back to the lender over time; ask your financial institution if they have medical financing options available

Self-Pay

Self-pay means paying for your treatment yourself instead of using health insurance coverage or private financing. Mercy offers competitive self-pay pricing to help people who choose this option. Check with your treatment coordinator to learn more.

Contact Your Care Team

Your treatment coordinator may also be aware of other financing options. Be sure to contact them if you have questions.



STEP 4

Prepare for Surgery

Step 4: Prepare for Surgery

Pre-Surgery Documentation

Mercy offers tools to help make the referral process as easy as possible for your primary care physician. Some insurance companies require you to have a physician-supervised weight loss program for a specific time period before surgery. The pre-surgery tools we provide help your physician meet most insurance company requirements. Ask your treatment team for tools you can share with your primary care physician.

Pre-Surgery Assessments

As you prepare for weight loss surgery, you'll undergo individual assessments, including:

Psychiatric & Social Evaluations

- Potential conditions that may delay recovery and long-term success
- Realistic expectations
- Appropriate psychological readiness
- Risk of post-operative depression
- Ability to comprehend and carry out required lifestyle changes
- Commitment to long-term follow-up care

Nutritional Evaluations

- Nutritional status and exams before and after surgery
- Readiness to change dietary behaviors
- Individual planning
- Understanding of healthy food choices and meal planning

Exercise Evaluation

- Physical fitness status before and after surgery
- Readiness to change exercise and activity behaviors
- Individual exercise and activity planning
- Understanding of the importance of exercise for successful obesity treatment
- Review of the fundamentals of good health and weight maintenance

Tobacco-Cessation* Evaluation

Guidelines include:

- A minimum of six weeks being completely tobacco- and nicotine-free
- Lab-test confirmation of cessation
- Availability of counseling to assist with cessation

* A tobacco-cessation assessment may be required.
Talk with your treatment coordinator or physician.



STEP 4

Prepare for Surgery

Surgery Preparation

Review this check list as you prepare for surgery:

- ☐ **Weight loss** – Meet with a licensed dietitian before surgery to prepare yourself for weight loss. After surgery, a dietitian is a great resource for maintaining weight loss long-term.
- ☐ **Increased daily activity** – Boost your daily activity level before surgery to improve cardiovascular function, strengthen muscles and build lean mass.
- ☐ **Tobacco cessation** – Check with your treatment coordinator or physician about tobacco-cessation requirements and options to help you stop smoking.
- ☐ **Liquid diet instructions** – Continue to follow the liquid diet as instructed during your consultation visit.
- ☐ **Pain reliever usage** – During your consultation visit, use of aspirin or non-steroidal medications before surgery will be discussed.



STEP 5

Plan for Your Hospital Stay

Step 5: Plan for Your Hospital Stay

After your surgery is scheduled, your bariatric care team provides specifics on the date, time and other procedures. Looking ahead to your hospital stay, here are a few other things to know:

- **Specialized equipment** – A majority of Mercy's programs are designated as Bariatric Centers of Excellence. That means we offer state-of-the-art medical equipment that supports your special needs as a weight loss surgery patient.
- **Typical procedure length** – Weight loss surgery usually takes from 90 to 120 minutes. If open surgery is performed, there is a vertical incision from four to eight inches in the upper abdomen area. The laparoscopic approach requires five to seven 1-inch incisions. Your surgeon will discuss options before surgery.
- **Length of your hospital stay** – Using our advanced surgical techniques, your hospital stay is usually one to two days. An abdominal binder may be used to support the abdominal muscles and incision. You'll receive further instructions on this before and after your surgery.
- **Movement and breathing after surgery** – Important requirements immediately after surgery include moving, walking, coughing and deep breathing. Remember, the more you move and walk, the more you decrease the risk of forming blood clots or developing pneumonia — and your energy returns much sooner. Using a breathing device provided by the hospital helps you prevent pulmonary complications.
- **Discharge from the hospital** – You'll be discharged when your surgeon determines it's safe for you to return home. Patients traveling to Mercy for care may be required to stay in the area a few days after hospital discharge. This is determined on an individual basis by your surgeon. When traveling home after surgery, you'll be required to stop and walk every hour to reduce the risk of blood clots. Plan for rest breaks accordingly.



STEP 6

Get Ready for Recovery

Step 6: Get Ready for Recovery

Before you leave the hospital, you'll be given specific instructions on nutrition, physical activity and follow-up care.

- **Nutrition** – Nutritional instructions are provided at the time of your dietary consultation(s). Continuing the appropriate eating habits learned before surgery aids in the prevention of early swelling and/or stretching of the new stomach. And you'll need to make changes in your menu and eating patterns as instructed by your dietitian.
- **Activity** – We encourage physical movement throughout the day to increase circulation and prevent complications. Check with your bariatric care team on the type and amount of activity that's right for you.
- **Follow-up Care** – Your post-operative care is vital to your recovery and success. We ask you to commit to a minimum of the following visits:
 - Immediate post-surgery visit
 - One month after surgery
 - Three months after surgery
 - Six months after surgery
 - One year after surgery
 - Annually

Celebrating a healthier you.

Having weight loss surgery can feel like getting your life back. As the pounds fall away, you may take less medication, have more energy, find it easier to breathe and move — and get more out of life. By committing to a healthy lifestyle, you can enjoy long-term success. At Mercy, we're honored to be part of your ongoing journey.

Helpful Resources

Mercy recommends these additional resources for your weight loss journey:

American Society for Metabolic and Bariatric Surgery

American Heart Association

American Diabetes Association

The Academy of Nutrition and Dietetics

U.S. Department of Agriculture (USDA) MyPlate

Find out more about surgical weight loss at Mercy and view videos featuring our weight loss specialists.

Visit mercy.net/Bariatrics

Experience a sense of community with others on a weight loss journey by joining our support group.

Visit mercy.net/SurgerySupport