

LAP-BAND GUIDELINES

STAGE 1: Bariatric Liquid Diet (Weeks 1, 2, 3)

- ❖ On the day after surgery, once the upper gastrointestinal (Upper GI) series has verified that there are no leaks, you will begin the Stage 1 diet.
- ❖ Avoid sweetened beverages unless sweetened with a sugar substitute.
- ❖ Initially, 3-4 oz. of fluids should be consumed every hour while awake.
- ❖ As tolerated, fluids will be gradually increased to a **goal weight of 4 oz. (1/2 cup) per hour.**
- ❖ Liquids should be sipped **very slowly** to avoid stretching your pouch. **Do not use a straw.** Drinking through a straw can overfill your pouch with liquid and air. If the pouch gets full very quickly, you may experience nausea, vomiting and pain.
- ❖ A minimum of 48-64 ozs. (6-8 cups) of liquids should be consumed daily to replace fluid losses and prevent dehydration. **It should take you 12-16 hours to drink 48-64 oz. of liquid.**
- ❖ Avoid caffeinated, carbonated and alcoholic beverages.
- ❖ **STOP DRINKING IF YOU FEEL FULLNESS, PAIN OR DISCOMFORT.**
- ❖ The Stage 1 diet is inadequate in all nutrients, as it does not have enough calories, protein, vitamins and minerals for good health. It will be necessary for you to add a daily chewable multivitamin and calcium and to supplement your diet daily with a protein supplement when advised by your surgeon.
- ❖ Liquid protein supplements should start on the day after surgery with your physician's approval. Try a few types of low carb/sugar-free protein shakes to see which brand you like. **See attached list for suggestions.**

After bariatric surgery you will require some vitamin, mineral and protein supplementation. You will need lifelong vitamin and mineral supplementation. The protein supplements will most likely be for the first 6-12 weeks post-operatively. By that time you should be getting sufficient protein from your foods.

Vitamins and Minerals

Post-op 0-1 month

Each day, you should take two children's chewable multi-vitamins with iron for the first month after surgery. Look for "Complete" on the multi-vitamin label. You should also take calcium in chewable form Tums or Viactiv 500mg 2 per day.

Optional: Biotin 1500-3000mcg daily chewable for hair and nails.

Post-op 1 month+

After a month, switch to an adult-formulated capsule or prenatal vitamin. Take one dose each day on a lifetime basis.

Take a calcium supplement in the form of calcium citrate (500-600 mg) 3 per day or calcium carbonate (500-600 mg) 2 per day.

Optional: Biotin 1500-3000mcg daily chewable or whole.

Low Carbohydrate Protein Powders

Biochem Ultimate LoCarb Smoothie (111kcal/23g pro per scoop)

Designer Protein (90kcal/17.5g pro per scoop)

Gary Null's Muscle (110kcal/26g pro per scoop)

Green Way Pro-96 (90kcal/17g pro per scoop)

Isopure (210kcal/50g pro per 2 scoops)

ISS Whey Protein (96kcal/17g pro per scoop)

Nature's Plus Keto Slim (100kcal/23g pro per 2 scoops)

NatureAde 100% Soy (110kcal/25g pro per scoop)

NatureAde 100% Whey (80kcal/16g pro per scoop)

NatureAde Soy-free Veg Protein Powder (110kcal/22g pro per scoop-pea protein)

Sport Pharma Promax (250kcal/50g pro per 2 scoops)

Twinlabs Vegefuel Soy (210kcal/31g pro per scoop)

Twinlabs Triple Whey Fuel (100kcal/21g pro per scoop)

Twinlabs Metro Fuel Whey (100kcal/25g pro per scoop)

Twinlabs Diet Fuel Whey (120kcal/21g pro per scoop)

Pure Protein, or other Low Sugar Soy or Whey Protein Powders.

Ready to Drink Pure Protein, EAS Myoplex Lite, Isopure, Atkin's Advantage Edge

Any "Low Carb" or "No Added Sugar" shake with at least 20 grams of protein per 8 oz. serving.

SAMPLE MENU FOR STAGE 1:

Bariatric Liquid Diet

WHEN YOU GO HOME:

Upon discharge from the hospital, your goal will be to continue to consume 4 oz. (1/2 cup) liquid per hour while awake with a goal of 48-64 oz. (6-8 cups) per day. It should take you 12-16 hours to consume 48-64 oz. of liquid. Protein liquid supplements may begin on the day following surgery with your physician's approval. Discontinue using regular gelatin. Only diet gelatin is allowed.

SAMPLE MENU

Breakfast	8:00 am	4 oz. low carb/no added sugar, high protein drink or powder mixed with skim milk or water
	9:00 am	4 oz. plain tea (unsweetened) decaf 4 oz. water 4 oz. skim milk
	12:00 noon	4 oz low carb/no added sugar, high protein drink or powder mixed with skim milk or water
Lunch	1:00 pm- 4:30 pm	4 oz. broth 4 oz. diet jello 4 oz. herbal tea 4 oz. water
	5:30 pm	4 oz. low carb/no added sugar, high protein drink or powder mixed with skim milk or water
	6:00 pm- 10:00 pm	4 oz. diet jello 4 oz. Propel 4 oz. broth 4 oz. low carb/no added sugar, high protein drink or powder mixed with skim milk or water 4 oz. skim milk
Dinner		

PLEASE DRINK SLOWLY!!!!

****Protein Goal: 60-80 grams per day**

A PROTEIN RESOURCE:

1. Assists in helping maintain lean muscle mass, keeping your metabolic rate higher. Without adequate protein intake, our bodies will favor burning muscle tissue instead of fat.
2. Helps you to maintain fullness after a meal.
3. Important for wound healing and hair growth. Without protein, hair loss during the period of rapid weight loss can be significant.

Foods containing protein:

<u>FOOD</u>	<u>PORTION</u>	<u>PROTEIN GRAMS</u>
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Beans, baked	½ cup	6
Beans, refried	½ cup	8
Beans, black	½ cup	8
Cheese (low fat)	1 oz.	8
Chicken (boneless, baked)	4 oz.	21
Chicken breast (broiler/fryer)	½ breast	35
Chicken (canned w/broth)	½ can (2.5 oz)	16
Chicken (deli smoked breast)	2 oz.	11
Chickpeas	½ cup	6
Clams (cooked)	20 small	23
Cod (baked)	3 oz.	20
Cottage cheese (low fat 1%)	½ cup	14
Crab (canned)	3 oz.	17
Egg (hard cooked or poached)	1 egg	6
Egg (Egg Beaters)	¼ cup	5
Flounder (cooked)	3 oz.	21
Great Northern Beans	½ cup	8
Halibut (cooked)	3 oz.	23
Herring (Atlantic, cooked)	3 oz.	20
Kidney Beans (cooked)	½ cup	8
Lentils	½ cup	9
Lima Beans (canned)	½ cup	6
Liver (chicken)	3 oz.	23
Lobster (cooked)	½ cup	15
Meat substitute (Harvest Burger)	3 oz.	18
Milk (skim)	½ cup	4
Milk (buttermilk-low fat)	½ cup	4
Milk (soy)	½ cup	4
Mussels (cooked)	3 oz.	20
Navy Beans (cooked)	½ cup	20
Oysters (canned)	3 oz.	10
Peanut Butter (low fat)	2 tbsp.	8
Peas (split & cooked)	½ cup	8
Pinto Beans (cooked)	½ cup	5
Salmon (baked/grilled)	3 oz.	22
Salmon (canned pink)	3 oz.	17
Scallops	2 large	6
Shrimp (cooked)	4 medium	5
Shrimp (canned)	3 oz.	20
Soybeans (cooked)	½ cup	15
Soybeans (dry roasted)	½ cup	34
Tofu (firm)	½ cup	20
Trout (baked)	3 oz.	23
Tuna	3 oz.	25
Turkey Bologna	3 oz.	12
Turkey Breast	3 oz.	20
Turkey (ground & cooked)	3 oz.	20
Turkey (canned w/broth)	½ can (2.5 oz)	17
Yogurt (unsweetened, low fat)	4 oz.	5

Protein estimator: 1 oz. lean meat/poultry/fish/1egg/eggwhite is all 7 grams protein.

STAGE 2: Regular Texture, Calorie-Controlled Diet

(Week 4 and Onward)

GUIDELINES

Depending on your progress, at approximately one month after surgery, your physician will progress your diet to Stage 2, which is a nutritionally balanced, calorie-controlled diet.

- ❖ Continue with allowed liquids from Stage I diet.
- ❖ All solid foods must be chewed slowly and thoroughly (20-25 times) until it reaches baby food consistency
- ❖ Cut meats to the size of a pencil top eraser until able to tolerate larger sizes. Do not rush this.
- ❖ Eat slowly, taking 30 minutes to eat each meal (10 minutes per ounce)
- ❖ Put down your fork between bites
- ❖ Use a watch or clock to time yourself while eating.
- ❖ Stop eating immediately if you feel any discomfort or fullness. Do not watch television or read while eating so you can concentrate on eating slowly and be more aware of when your stomach is full
- ❖ Food intolerances will vary on an individual basis. If you have a problem with a new food, wait several days before trying it again. Record in your food diary any recurrent problems with new foods. Bring this to your next visit with the physician and dietician.
- ❖ Gradually begin to increase meal size to 4-5 ounces per day, **AVOID SNACKING, EAT 3 HIGH PROTEIN MEALS PER DAY.**
- ❖ Drink 6-8 cups of low calorie fluids between meals avoiding liquids 30 minutes before and 60 minutes after meals. Even though the amount you can take in at one time has been reduced, you can still meet your fluid needs by just sipping more frequently throughout the day.
- ❖ Continue to take the vitamin and mineral supplements as prescribed by your physician.
- ❖ Never chew gum. If swallowed, it can obstruct your stomach outlet.
- ❖ Your goal is to achieve 60-80 grams of protein a day, more if recommended.

SHOPPING LIST FOR STAGE 2:

Regular Texture, Calorie-Controlled Diet (Week 4 and Onward)

- ❖ **Clear Liquids** – Same as Week 1-3
 - ❖ **Protein Supplement** – Same as Week 1-3, use as needed, based on protein intake from your meals. Typically you can reduce your shake by ½ cup to 1 cup per week, based on your protein intake from foods. Keep food records and calculate daily protein intake.
 - ❖ **Milk Group** – Choose from:

Skim Milk	Total Greek Yogurt
Low-Fat Lactaid Milk	Low-Fat Sugar-Free Yogurt
Soy Milk if Lactose Intolerant	Sugar-Free/Fat-Free Ice Cream
Low-Fat Cheese	Low-Fat Cottage Cheese
Part-Skim Ricotta	Sugar-Free Pudding
 - ❖ **Meat/Meat Substitute Group** – Choose from:

Eggs	Tofu
Fish (soft cooked/flaked, i.e. tuna, sole, flounder, salmon, crabmeat)	Hummus
Chicken, Turkey, Low-Fat Beef (diced or ground & well-moistened)	Low-Fat Chili
Natural Smooth Peanut Butter	Low-Fat Meatloaf/meatballs
	Low-Fat Luncheon Meats (e.g. sliced deli turkey, chicken, ham)
	Beans/Lentils (cooked/canned)
 - ❖ **Grains & Starches** – Choose from:

Baked/boiled potato	Lima Beans, plaintains yucca, yams
Hot cereal (i.e., Cream of Wheat, farina, oatmeal, grits)	Saltine Crackers
Unsweetened cold cereal (i.e., Go Lean, Puffins)	Sliced Bread (must be toasted)
	Pastina
	Sweet potato, pumpkin, squash, cassava
- ***Avoid rice for at least another 8 weeks- - it is generally not well-tolerated at this time and is typically difficult after LapBand.**
- ❖ **Fruit** – Choose from:

Unsweetened canned fruits	Fresh Fruit without skin (i.e., melons, peach, banana, ripe pear, peeled apple, berries)
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- ❖ **Vegetables** – Choose from:
Soft-cooked vegetables (some patients may still need to avoid gas-
Forming vegetables)
V-8 Juice
Soft raw vegetables: tender baby lettuces, ripe tomatoes, peeled chopped
vegetables. Avoid very fibrous or stringy vegetables.
- ❖ **Fat/Oil** – Choose from:
Low-Fat mayo, Low-Fat gravy/sauce, diet margarine
- ❖ **Sweets/Desserts** – Choose from:
Diet Jello or Sugar-Free Popsicles

STAGE 2 FOOD CHOICES

Food Groups	Choose	Foods Difficult to Tolerate	Foods to Avoid
BEVERAGES:			
<p>Choose 6-8 cups/day, sipped @ 4 oz per hour</p>	<p>Water, tea, skim milk, Crystal Light, decaf coffee/tea, herbal tea, all broths, Glaceau fruit waters, diet V-8 Splash, Diet Twister, Diet Snapple, Sugar-Free Tang, any Sugar-Free beverages</p>		<p>Vitamin waters, soda, high calorie drinks, alcoholic beverages, fruit drinks, caffeinated beverages</p>
MILK & DAIRY:			
<p>Good source of protein and calcium. Choose 3 servings 1 Serving=1/2 cup or 4 oz.</p>	<p>Skim milk, 1% low-fat milk, sugar-free low-fat/nonfat yogurt or ice cream, sugar-free custard/pudding, lactose-free milk</p>		<p>Sweetened milk drinks, cocoa, ice cream, chocolate milk, sweetened condensed milk, 2% or whole milk</p>
MEAT & MEAT SUBSTITUTES:			
<p>Good source of protein, B-Vitamins and iron. Choose 6 servings 1 Serving= 1 oz. unless otherwise specified</p>	<p>Lean meat, fish or poultry, low-fat deli meats, egg or egg substitute (1/4 cup), low-fat cottage cheese, ricotta, farmers' cheese, low-fat/fat-free cheese, low-fat mozzarella, natural creamy peanut butter (2 Tbsp), casserole made with ground beef, 1/2 cup beans, tofu (2-4 oz), 3 Tbsp. miso paste *(moisten meats with fat-free gravies/sauces)</p>		<p>Fried meats, high-fat cold cuts such as salami, bologna, pastrami, corned beef, sausage, mortadella, frankfurters, bacon</p>
GRAINS & STARCHES:			
<p>Good source of energy, B-vitamins, fiber & iron Choose 2 servings 1 serving=1 slice bread; 1/3 cup pasta, potato, squash, 6 crackers, 1/2 cup dry cereal</p>	<p>Cooked or refined cereal such as oatmeal, farina, grits, Cream of Wheat, Go Lean, Cheerios, Puffins, potato without skin, rice as tolerated, pasta, toasted bread, crackers, bread sticks, baked tortilla chips</p>	<p>Pasta & rice may not be tolerated</p>	<p>All others such as bagels, doughy bread, breads with seeds/nuts, croissants, popcorn, nuts</p>

STAGE 2 FOOD CHOICES

Food Groups	Choose	Foods Difficult to Tolerate	Foods to Avoid
FRUIT:			
<p>Good source of vitamins, minerals, phytochemicals and fiber. Choose 2 servings 1 serving= ½ cup diluted fruit juice, ½ banana, ½ cup unsweetened applesauce, 1 medium size fruit, ½ cup cantaloupe or watermelon.</p>	<p>Banana, peach, pear, strawberries, raspberries, kiwi, cantaloupe, watermelon, citrus fruits without membrane as tolerated</p>		<p>Undiluted/concentrated fruit juice, pulp, seeds, skin</p>
VEGETABLES:			
<p>Good source of vitamins, minerals, phytochemicals and fiber. Choose 2-3 servings. 1 Serving=1/3 to ½ cup as tolerated</p>	<p>All; except those listed in "Foods to Avoid/Difficult to Tolerate"</p>	<p>Vegetables with tough skin or seed; fibrous vegetables such as celery, asparagus, cabbage, corn, raw vegetables, salad; gas-forming vegetables such as brussel sprouts, broccoli, onions, cauliflower</p>	<p>Vegetable skins, seeds Tolerance to different textures varies. Try new vegetables cautiously and remember to chew them well.</p>
FAT:			
<p>Essential for Healthy Skin. Choose up to 3 servings.</p>	<p>Diet margarine (1 Tbsp), regular margarine/butter (1 tsp), low fat mayo (1 Tbsp), or regular mayo (1 tsp), low fat sour cream (1 Tbsp), low fat salad dressing (2 Tbsp), 1/8 avocado, tahini paste (2 tsp), canola/olive/peanut oil (1 tsp), cream cheese (1 Tbsp), reduced fat cream cheese (2 Tbsp), low fat gravy/sauce (2 Tbsp)</p>		<p>Fried foods</p>

STAGE 2 FOOD CHOICES

Food Groups	Choose	Foods Difficult to Tolerate	Foods to Avoid
SWEETS & DESSERTS:			
<u>May Choose 1-2 Servings.</u> 1 serving= 4 oz. diet jello or 1 sugar-free ice pop	Diet jello, low-calorie/sugar-free hard candy, sugar substitutes (i.e. Splenda, Sweet & Low, Equal, popsicles made from Pedialyte, sugar-free popsicles, sugar-free jelly	Candy containing sugar, dried fruits, jams, and marmalade	Candy, jam, jelly, cakes, cookies, pies, doughnuts, ice cream, frozen yogurt, honey
CONDIMENTS/MISC:			
As tolerated	Mild herbs & spices, salt if permitted	Pepper, chili powder, mustard, horseradish, seeds, cocktail sauces, and peanuts	

**SAMPLE MENU FOR STAGE 2:
Regular Texture, Calorie-Controlled Diet
(Week 4 and Onward)**

	DAY 1	DAY 2	DAY 3
Breakfast: 8:00-8:30 am	1 scrambled egg + 1 egg white ½ slice toasted wheat bread 1 tsp. transfat free margarine	¼ cup bran flakes with 4 oz. diet yogurt ¼ banana (sliced)	4 oz. part-skim ricotta or 1% cottage cheese 4 triscuits
9:00-11:30 am	8 oz. decaf coffee or tea or water 8 oz. skim milk 4 oz. Protein Shake	8 oz. decaf coffee or tea or water 8 oz. skim milk 4 oz. Protein Shake	8 oz. decaf coffee or tea or water 8 oz. skim milk 4 oz. Protein Shake
Lunch: 12:00-12:30 pm	3-6 oz. roasted turkey, 1 slice lowfat cheese, ¼ cup unsweetened fruit cocktail	3-6 oz. baked haddock with lemon, ¼ cup cooked green beans, ¼ cup applesauce	3-6 oz. 97% fat free deli sliced ham, ½ slice toasted whole wheat bread, 2 slices tomato
1:00-5:30 pm	12 oz. water, 4 oz. Protein Shake, 8 oz. Propel	12 oz. water, 8 oz. Crystal Light, 4 oz. Protein Shake	12 oz. water, 4 oz. Protein Shake, 8 oz. Fruit 2-O
Dinner: 6:00-6:30 pm	3-6 oz. baked chicken, ¼ cup steamed spinach, ¼ peeled orange	3-6 oz. lean roast beef, ¼ cup cooked squash, ¼ cup mashed potatoes, ¼ cup unsweetened pears	3-6 oz. broiled sole or flounder, ¼ cup steamed broccoli, ¼ cup steamed carrots, ¼ cup diced cantaloupe
7:00-10:00 pm	4 oz. skim milk, 8 oz. water, 12 oz. Propel	4 oz. skim milk, 8 oz. water, 12 oz. Crystal Light	4 oz. skim milk, 8 oz. water, 12 oz. Kool-Aid w/ Nutra-Sweet

Your focus is protein foods at all meals. The veggies, fruit and finally starches are considered “condiments”. If you prioritize properly, you will need fewer Protein Shakes, although some patients prefer to use either a Protein Shake or Low Carb High Protein Bar as a convenience meal and for “protein insurance” for the day.

At this point you will use Protein Shakes as a supplement to your dietary protein intake. You will weigh the edible portion of protein foods (trim all visible fat and remove any skin, bones or shells) and estimate your daily protein intake in your food records.

Remember, you are limited to 4 oz. at meals for the first few weeks. This will gradually increase to 6oz., then finally 8oz. over the next few months. You will keep meal size at 8oz. standard size, if you can eat more than this, please call the office as you may need an adjustment. For foods with low density, such as salad, you must estimate based on compressed/chewed volume.

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