



The journey to a healthier, more active, thinner life.

Our Mission

Our mission is to improve our patients' health through lasting weight loss by reducing life threatening risk factors, improving self-esteem and enhancing quality of life. We use scientific knowledge, medical technology, advanced surgical expertise and ongoing support to help our patients succeed. We employ a comprehensive preoperative program-oriented approach to reduce the risks of surgery, enhance long-term health and safe weight loss.

What is your BMI range?

One measure of weight is a number called body mass index (BMI). A healthy BMI is about 18-25. A BMI of 30 or greater signals obesity. A BMI of 40 or more is classified severe (morbid) obesity.

Body Mass Index (BMI) Chart

BMI	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54
Height (inches)	Body Weight (pounds)																		
58	172	177	181	186	191	196	201	205	210	215	220	224	229	234	239	244	248	253	258
59	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247	252	257	262	267
60	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255	261	266	271	276
61	190	195	201	206	211	217	222	227	232	238	243	248	254	259	264	269	275	280	285
62	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273	278	284	289	295
63	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282	287	293	299	304
64	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291	296	302	308	314
65	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300	306	312	318	324
66	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309	315	322	328	334
67	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319	325	331	338	344
68	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328	335	341	348	354
69	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338	345	351	358	365
70	250	257	264	271	278	285	292	299	306	313	320	327	334	341	348	355	362	369	376
71	257	265	272	279	286	293	301	308	315	322	329	338	343	351	358	365	372	379	386
72	265	272	279	287	294	302	309	316	324	331	338	346	353	361	368	375	383	390	397
73	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378	386	393	401	408
74	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389	396	404	412	420
75	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399	407	415	423	431
76	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410	418	426	435	443

BMI Categories

Healthy weight = 18.5–24.9

Overweight = 25–29.9

Obese = 35-39.9

Morbidly Obese = 40 and greater

Health Risks of Obesity

Obesity may lead to problems that include but not limited to:

- Type 2 Diabetes and certain cancers
- Heart and circulation problems, including heart disease, high blood pressure, and stroke.
- Sleep Apnea and/or other breathing problems
- Back and/or joint problems
- Problems with skin, urination, and menstruation
- Depression and/or other mental health problems

Treatment Can Help

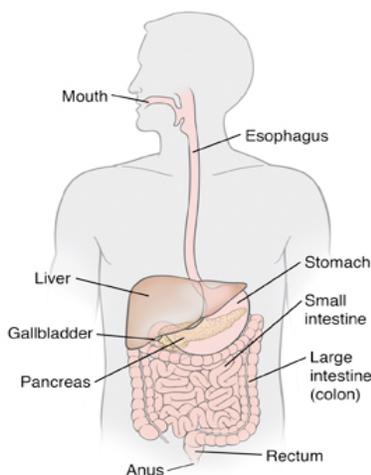
Bariatric surgery is a method of addressing morbid obesity and treating, if not resolving, associated obesity-related diseases. Surgical treatment is the only proven method of achieving long-term weight control for the morbidly obese, when all other therapies have failed. However, it is important to understand that surgery alone is often not enough. Changing eating habits and incorporating an exercise plan is essential to have a successful outcome.

Your doctor has proposed the possibility of an operation to assist you in your attempts to lose weight. In many cases, the surgery cannot be reversed. So if you're considering surgery, please take time to learn about the surgeries before you decide.

What Is Bariatric Surgery And How Can It Help Lose Weight?

Bariatric surgery (also called weight-loss surgery) is a surgery designed to allow patients to achieve long-term and significant weight loss. Bariatric surgery changes how the body responds to food. During surgery, the functional size of the stomach is reduced. This limits the amount of food that can be eaten at one time and leads to a feeling of fullness after a smaller amount of food. Certain procedures bypass part of the small intestine. This changes the release of hormones, leading to decreased appetite. Thus, you become full after less food and feel less hungry overall so you eat less and lose weight. A shorter intestine may also absorb fewer nutrients and calories from food.

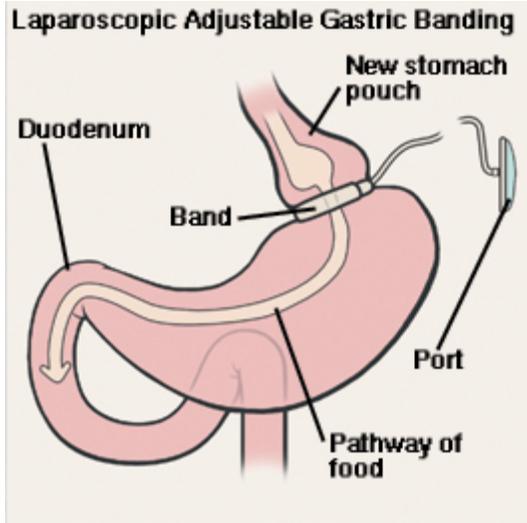
The Role of the Digestive System



- The **esophagus** moves food from mouth to stomach
- The **stomach** stores food and breaks it down. It slowly sends food into the small intestine.
- The **small intestine** received food from the stomach. It breaks food down and absorbs nutrients and calories into the body.
- The **large intestine** receives liquid waste from the small intestine. It absorbs fluid from this waste. It sends the remaining through the rectum as stool.
- The **liver**, **gallbladder**, and **pancreas** provide enzymes and chemicals that help with digestion.

Types of Bariatric Surgery

Laparoscopic Adjustable Gastric Banding



A band is placed around the top of the stomach. Less solid food can then be eaten at one time. Food passes through the band slowly, resulting in a longer feeling of fullness. Using a port placed under the skin, the size of the band and speed that food passes can be adjusted.

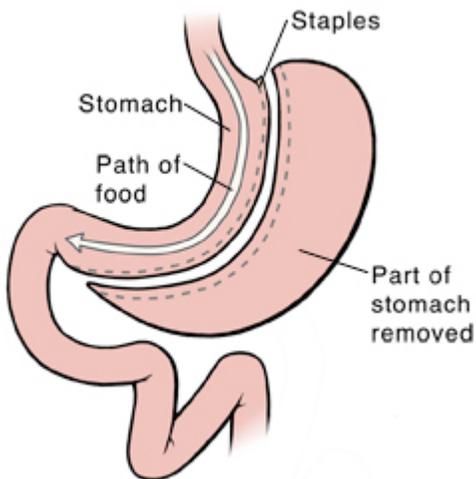
PROS

- Shorter hospital stay
- Can be adjusted or removed

CONS

- Less weight loss
- May require revision surgery
- Band Slippage
- Band erosion into stomach

Vertical Sleeve Gastrectomy (VSG)



A large part of the stomach is removed. This results in a feeling of fullness after eating a much smaller amount of food. Removal of this part of the stomach also decreases the level of a powerful hunger hormone.

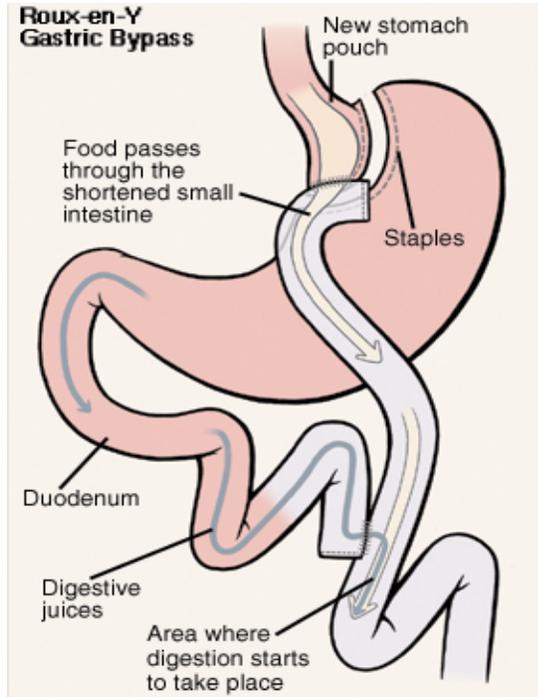
PROS

- Simpler surgery than bypass
- More reliable weight loss than banding

CONS

- Cannot be reversed
- Less weight loss than bypass

Roux-en-Y Gastric Bypass



A large portion of the stomach is closed off. This leaves a small pouch to hold food. Less food can be eaten at one time. The small intestine is cut and reattached to the new stomach pouch. This bypasses about a third of the intestine, shortening the time the food is in the intestine. Appetite is often decreased.

PROS

- More weight loss than Sleeve and Banding
- Lower rate of weight regain

CONS

- Risk of malnutrition
- Risk of ulcers and obstruction

Our Program

The program at Ventura Bariatrics is a comprehensive surgical program for the treatment of patients who are obese. The program focuses on an individualized approach to weight loss with a multidisciplinary preoperative assessment process and offers comprehensive, life-long postoperative care. We work with the patient to carefully select the appropriate surgical procedure. All surgeries; Laparoscopic Gastric Banding, Vertical Sleeve Gastrectomy and Roux-en-Y Gastric Bypass are performed at Ventura County Medical Center in Ventura, California.

Initial Consultation: Detailed consultation with our surgeon. During your consultation, the surgeon will determine whether you are an appropriate candidate for weight loss surgery and allow you to learn more about the program and surgical options.

Nutritional Consultation: Detailed consultation with our Bariatric Dietitians to help modify behavior and learn more about preoperative and postoperative nutritional recommendations.

Psychological Evaluation: Detailed consultation with our Bariatric Psychologist.

Post-Operative Follow-up: Postoperative appointments will be scheduled at 7-10 days after your release from the hospital. Subsequent appointments will be made at 6 weeks, 3 months, 6 months, 12 months, and once or twice yearly for a lifetime. This will allow our team to monitor your progress and ensure your success.

Long Term Support: Our surgeon, Dieticians, Psychologists, Nurse Practitioner and Registered Nurses are available to you lifelong.

Support Groups: Monthly sessions available to you before and after surgery.

STEPS FOR SURGERY

STEP 1: INFORM YOURSELF

We recommend attending support group meeting to meet individuals who have had bariatric surgery. Talking with someone that has experienced these changes is a great way to determine if bariatric surgery is appropriate for you.

STEP 2: CONTACT OUR PROGRAM COORDINATOR

Our Bariatric Clinical Coordinator is available by phone or e-mail at (805) 652-6565 or (805) 652-6201, or by e-mail at: gladys.navarro@ventura.org to answer questions regarding our program, surgeries offered and eligibility.

STEP 3: INSURANCE APPROVAL

We suggest that you call your insurance company to determine if bariatric surgery is a covered benefit in your plan, and if so which procedures are covered benefits.

STEP 4: REFERRAL TO BARIATRIC CLINIC

Your primary care physician must submit a referral requesting a Bariatric Surgery consultation. Once received, the Bariatric Clinical Coordinator will review the referral and schedule your consultation.

STEP 5: SURGICAL CONSULTATION

At this appointment, you will meet with your surgeon to discuss your health and bariatric surgery. It is recommended that you bring a family member or close friend with you.

STEP 6: ADDITIONAL CONSULTATIONS

Your surgeon needs you to complete other consultations to evaluate your candidacy for surgery. All patients are **required** to undergo a psychological and nutritional evaluation as part of our program. Our staff will help you schedule all required appointment.

- **Psychological Consultation:** A mental health evaluation is necessary to ensure that if any psychiatric disorders are present, they are being optimally managed. This may include treatment with medication and/or counseling. Furthermore, this consultation establishes contact with a member of the mental health community should further support be needed in the post-operative period.
- **Dietary Consultation:** A dietary consultation is an important step to success in this program. Many patients find it helpful to identify current dietary patterns, and begin to develop a new plan to meet dietary guidelines following surgery.
- **Other Consultations at surgeon's discretion:** Cardiology, Pulmonary, Endocrinology or other specialists as deemed necessary by the surgeon.

STEP 7: WEIGHT LOSS

Preoperative weight loss through behavior modification is a very important step to the success of your operation. This not only shows understanding and dedication to the behaviors necessary to succeed with your weight loss program and it also reduces the amount of intra-abdominal fat and the size of the liver, which aids the surgeon in performing your operation.

STEP 8: SURGERY PREPARATION

You will have your preoperative appointment approximately three weeks prior to having your surgery. You will meet with the surgeon and the risks and benefit will be detailed out for you. You will also meet with the Registered Nurse; preoperative and postoperative instructions will be given to you in detail at this appointment.

STEP 9: AFTER SURGERY

The following schedule is meant only to be a guideline; your surgeon may request to see you more depending on your circumstances.

The first post-operative visit occurs 7-10 days after discharge from the hospital. Subsequent appointments will be made at 6 weeks, 3 months, 6 months, 12 months, and once or twice yearly for a lifetime. This will allow our team to monitor your progress and ensure your success.

BARIATRIC PROGRAM DIETARY GUIDELINES

INTRODUCTION

Our goal is to give you the tools to help you lose and become healthier, but a strong commitment from each individual is essential for long term success.

Bariatric Surgery reduces your stomach capacity to about 1/3 cup. This means that small portions of food will make you feel full and satisfied. If you eat or drink past the point of feeling full, you will feel very uncomfortable and may vomit.

The aim of the dietary guidelines following surgery is for patients to be able to eat three small, protein rich meals each day and avoiding snacks and high-caloric beverages. Regular exercise will help achieve and maintain weight loss.

FIRST FEW DAYS AFTER SURGERY

Immediately after your surgery, you will not be allowed to eat or drink anything until the next morning. The day after surgery you will be started on the ***Stage One Diet***. This diet consists of clear liquids that are low-caloric or sugar-free, and have no caffeine or carbonation.

As soon as you can tolerate this diet without difficulty, you will be advanced to the ***Stage Two Diet***. Stage 2 immediately post op consists of protein shakes.

The Registered Nurse will visit you in the hospital before you are discharged and review dietary guidelines with you.

AFTER YOU RETURN HOME

You will need to continue the Stage Two Diet at home for another 2-3 weeks after your surgery. Your surgeon will discuss advancing your diet to stage three at your postoperative appointment.

The *Stage Three Diet* is composed of soft or pureed foods that are easy to chew and digest.

The *Final Stage Diet* is reached four to six weeks after surgery when you may introduce other foods such as sliced, tender meats, and some raw fruits or vegetables.

PERMANENT DIETARY CHANGES

PROTEIN REQUIREMENTS

Since your stomach capacity is severely restricted, you must be sure to have enough protein in your diet to keep healthy. Foods that are high in protein include lean meats, poultry, fish, low fat cheese and eggs, beans, and other legumes. At each meal, concentrate on eating your protein foods first so you don't fill up on other foods and leave out the protein. Protein-rich foods are more satisfying and more filling than carbohydrates, and will help you lose weight quickly and safely. A high protein intake will also promote healing of your incision, and help your skin shrink as you lose weight.

MILK PRODUCTS

Many patients have trouble tolerating milk due to a naturally occurring sugar known as lactose. The inability to digest lactose may cause gas, cramps, and sometimes diarrhea. If you are sensitive to lactose, you may try 100% lactose-reduced milk, use Lactaid milk, or pills. Milk products such as cottage cheese and yogurt are naturally low in lactose. If unable to tolerate any milk products, you may shift to soy milk products. Also, we recommend that you supplement your calcium intake with calcium citrate tablets.

Gastric Banding patients will be unchanged from their preoperative state regarding their tolerance of lactose.

FLUID REQUIREMENTS

It is very important that you drink at least six 8-ounce cups (64 ounces) of fluid each day to avoid dehydration. You must sip your liquids slowly, consuming about 4 ounces every hour between meals throughout the day, since your stomach capacity is so small. Do not drink liquids for 30-45 minutes before or after your meals because there is not enough room in your stomach for both food and fluids. If you drink too much fluid at one time, or take fluids with your meals, you may vomit.

Recommended beverages include water (the best), sugar-free drinks, decaffeinated tea or coffee, and skim milk if you can tolerate it. Studies show that a high-water intake helps promote weight loss, wound healing, skin shrinkage, and helps prevent constipation. Avoid carbonated beverages or allow them to go flat before drinking because the bubbles can cause severe cramping. Carbonated beverages containing sugar and/or caffeine will stimulate your appetite, and should be avoided. Eliminate high-caloric drinks such as regular soda, fruit juices, non-skim milk, milk shakes, and alcoholic beverages as these will impair your weight loss. These drinks are a common reason for weight gain.

VITAMIN SUPPLEMENTS

Your body may not be able to absorb all the vitamins it needs. Vitamin supplements are required lifelong. A list of required vitamins will be provided at your preoperative appointment.

MEALS

We do not recommend frequent small meals; instead you should eat three well-balanced meals and avoid snacking. Eat at a table in a relaxed environment. Stop eating when you start to feel full. Practice chewing slowly and being aware of your pace of eating.

EXERCISE

It is very important to sustain regular exercise to maintain your weight loss. At the minimum, we recommend 30-40 minutes of exercise 3 to 4 days each week. Stretching and weight-training is enjoyable, but less effective in promoting weight loss than cardio-type exercise, such as brisk walking or biking. Always consult your physician before embarking on a vigorous exercise regimen.

SLEEP

It is also important to attempt to get 7 hours of sleep per night on the average.