

UVA Metabolic and Bariatric Surgery Clinic Information

Thank you for your interest in the Metabolic and Bariatric Surgery Clinic at the University of Virginia Health System. At UVA, we understand obesity is a complex disease with many causes:

1. Genetics
2. Thyroid Disorders
3. Medications
4. Diseases
5. Environment
6. Emotions
7. Physical limitations
8. Socialization
9. Learned behaviors/habits

Our Comprehensive program is designed to help individuals with specific weight loss and lifestyle needs. Each individual is unique and our goal is to help you obtain the tools for long term success. We offer the following resources:

1. Board Certified Surgeons with expertise in the field of bariatrics
2. Medical physicians specially trained in metabolic disorders
3. Dietitians
4. Certified Registered Nurses
5. Exercise Specialists
6. Behavioral Health Specialists
7. You may also be seen by fellows, residents, or medical students

To read more about weight-loss surgery at UVA please view the video by visiting:
Uvahealth.com/services/weight-loss-surgery

Contact Information

Main

UVA Metabolic & Bariatric Surgery Clinic

1300 Jefferson Park Avenue

P.O. Box 800709

Charlottesville, VA 22908-0709

Phone: 434-924-2121 Fax: 434-243-7272

Your Health Care Team

Bruce Schirmer, MD, FACS

Bariatric Surgeon

Phone: 434-924-2104

Fax: 434-243-9433

Heather Passerini, MS, ACNP-BC, CCNC-BC

Phone: 434-924-2121

Peter Hallowell, MD, FACS

Bariatric Surgeon

Phone: 434-243-4811

Fax: 434-243-9422

UVA Patient Services:

Visit uvahealth.com or call 434-924-1122 for:

- Lodging options, lost & found, directions, visiting info, general services
- Language Services – Interpreter or any help with communication aids
- MyChart signup or assistance
- Patient Relations - Concerns

What is obesity?

*Body Mass Index (BMI) is a measurement tool that compares your height to your weight and gives an indication of your weight status:

Underweight – BMI <18.5

Healthy Weight – BMI -18.5 – 24.9

Overweight – BMI - 25 – 29.9

Class I Obesity BMI - 30 – 34.9

Class II Obesity BMI – 35 – 39.9

Class III Obesity BMI - \geq 40

*BMI calculator can be found on our website:

<https://uvahealth.com/services/digestive-health/support-resources/calculate-your-bmi>

Who qualifies for weight loss surgery?

- You have a BMI of 40 or more?
- You are 100 pounds over your ideal body weight?
-Or-
- You have a BMI of 35 or greater with at least one major comorbidity (associated illness) such as diabetes, high blood pressure, sleep apnea, and more?

What is the UVA Surgical Criteria?

We follow the National Institutes of Health Clinical Practice Guidelines. In order to have surgery at UVA you must:

1. Be Age 18-^{*}65
^{*}Over 65 at surgeon's discretion and case review
2. Meet Anesthesia guidelines
3. Exclusions – these patients cannot have surgery at UVA:
 - Weight over 600 pounds (Dr. Schirmer)
 - Weight over 500 pounds (Dr. Hallowell)
 - Lack of adequate social support
 - Noncompliance with surgical program requirements

Please ask questions and make sure your concerns are addressed. Weight loss surgery is a life changing procedure.

**“Once a person has made a commitment to a way of life,
they put the greatest strength in the world behind them.
It’s something we call heart power.**

**Once a person has made this commitment, nothing can stop them
short of success.”**

-Vince Lombardi Former coach of the Green Bay Packers

What are Obesity related comorbidities that improve after Metabolic and Bariatric Surgery?

Quality of life improved in 95% of patients

Mortality reduced by 89% in five year period

1. Migraines: 57% resolved
2. Depression: 47% resolved
3. Obstructive Sleep Apnea: 74% – 96% resolved
4. Hypercholesterolemia: 63% resolved
5. Asthma: 69% resolved
6. Cardiovascular Disease
7. Hypertension: 69% resolved
8. Nonalcoholic Fatty Liver Disease: 90% resolved
9. Metabolic Syndrome: 80% resolved
10. GERD: 72% resolved
11. Type II Diabetes: 82 – 98% resolved
12. Erectile dysfunction - improved
13. Urinary Stress Incontinence: 44% resolved
14. Osteoarthritis/degenerative joint disease: 41% resolved
15. Venous Stasis disease: 95% resolved
16. Gout: 72% resolved

What is the difference between laparoscopic and open procedures?

Laparoscopic surgery is a safe alternative to traditional “open” procedures.

Laparoscopic surgery is referred to as minimally invasive. The operation involves making five to six small incisions in the abdomen through which a small scope connected to a video camera and surgical tools are inserted.

Laparoscopic surgery is intended to minimize post-operative pain, produce less scarring and enhance recovery time.

How do I choose the right surgery?

Choosing the surgery which is best for you is a personal decision.

Your surgeon and support team can help you make an informed decision based on your individual health history and current health conditions.

Make sure you research the different options available.

Surgeries Performed At UVA

GASTRIC BYPASS SURGERY:

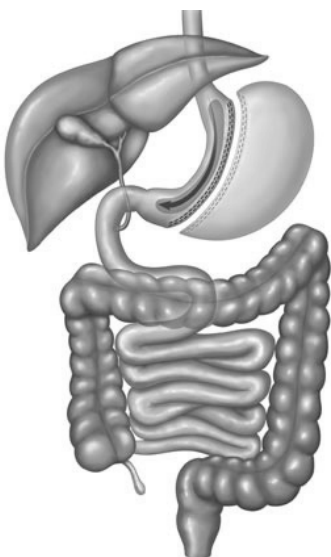


We create a pouch by cutting and stapling the upper part of the stomach. The pouch is the size of a small egg.

We measure 100-150 cm (40-60 inches) of the small intestine. We cut here. The bottom end is connected to the pouch.

The top of the small intestine is joined lower down so the stomach acids and digestive enzymes join with the food. This way you can absorb nutrients.

SLEEVE GASTRECTOMY



80% of the stomach is removed. The remaining stomach is a tubular pouch (it looks like a banana). This restricts the amount of food that can be eaten.

For more detailed information visit: asmbs.org/patients

**THE PRE-OPERATIVE PHASE STEPS TO FOLLOW
(DETAILS OF EACH STEP FOLLOW THIS OVERVIEW):**

1. Call our office to register for our live Metabolic and Bariatric Surgery Clinic Educational Seminar: 434-924-2121. The seminar is also available on our website. You can register on-line and our office will call to schedule your appointment.
2. Call your insurance company to see if surgical weight loss is covered. Review your policy and begin gathering records to show your previous weight loss attempts. Do you need a supervised diet? If so, for how long? Three, six or 12 months?
3. Make an appointment with your Primary Care Physician (PCP) to discuss if a surgical solution is appropriate for you. Your PCP should send a referral to our Clinic. The referral can be sent electronically (electronic medical record) or faxed. We will also need copies of your medical records and requested labs.
4. Initial consultation will be scheduled with the Surgeon/Nurse Practitioner and Dietitian. An exercise prescription will be given to you as well as a referral to our Behavioral Health Specialists. Your Provider will discuss with you additional requirements/specialist clearances
5. Attend support group meetings and other required classes.

Insurance approved – Come for your pre-op appointment with surgeon. This includes a History and Physical examination; review and sign of consent form, and pre-admission testing (PETC) visit (lasts about 2 hours). Attend pre-op education workshop.

#1 - Educational Seminar - We require you to attend one of our free educational seminars. The educational seminars are designed to inform you in the following areas:

1. Surgical approaches for weight loss
2. Understanding of procedures/physical changes
3. Expected outcomes
4. Complications
5. Insurance information
6. Dietary changes
7. Psychological Changes
8. Hospital stay
9. What to expect before, during and after surgery
10. Answer questions

#2 - Insurance Coverage - For questions please contact:

Patrice White, Pre-Cert Authorization Coordinator
(Phone) 434 243-6191 (Fax) 434 243-6656

Frequently Asked Questions:

How do I know if I am covered for Bariatric Surgery? Contact your insurance company and check if you have bariatric surgery coverage. Also, ask if this is an optional benefit.

What if I need a supervised diet? Depending on your insurance carrier it can be completed with your PCP or our registered dietitians.

How many supervised diet visits do I need? You have to go consecutively once a month every month without missing a visit. If you do not follow the guidelines, your insurance company will require you to start over. We will give you the required form that includes: _ your weight, BMI, and a summary of your goals that you are working towards in details. (ex: exercise, food diaries, food changes, and low calories diet. All information **MUST** be documented.

Psychological Evaluation: You can schedule an appointment with our Behavioral Medicine Department (434)924-5314. (You may be given several questionnaires to complete before your appointment.) or, you may choose a behavioral health professional outside of UVA, however, they must be a Licensed Counselor, Psychiatrist, or Psychologist familiar with bariatric surgery psychological guidelines.

Do I have to lose any weight during my supervised diet? Most Insurance companies do not have a policy that you must lose weight before you get approved for surgery. However, **do not gain any weight during your supervised diet.** If you gain weight, they may deny you.

Who do I notify when I am done with my insurance requirements? Call Patrice White; she must have all required documentation before she can start the authorization process.

How long will it take before you hear back from my insurance company for my authorization? It can take up to 14 days for the insurance company to respond. You will be notified with their response. You will be scheduled to see the surgeon, and any additional testing required.

Do you know what my out of pocket expense would be for my surgery? Depending on the type of bill, please contact our billing department; Medical Center or University Physicians Group.

What happens if I am denied? This requires an appeal. It can be a lengthy and long process (which may not lead to an approval.) Call the appeals department of your insurance company for an explanation of the steps required.

How long does it take to get an appointment to see the Surgeon after I have been approved for surgery? Usually within two weeks.

#3 - Primary Care Provider (PCP)

Make an appointment to discuss if a surgical solution is appropriate for you. We need the following from your PCP:

1. Letter of Medical Necessity (Sample provided)
2. Referral for surgery
3. Copy of your Medical Record from your PCP
4. Diet attempt history with notes (Sample provided)
5. **Labs: (most recent drawn and results sent to our Clinic)**

#4 Advanced Practice Provider – Clinic Visit #1

At your initial consultation our provider will review your medical history. They will determine if more medical testing is necessary.

If you currently smoke or use tobacco, you will receive information on how to quit.

You will also meet with our program dietitian.

IMPORTANT: If you are taking any blood thinning medications like **Coumadin (warfarin), Plavix (Clopidogrel), Pletal (cilostazol), Catapres (clonidine), Xarelto (rivaroxaban), eliquis (apixaban), Lovenox (enoxaparin), or others**, be sure to tell your doctor and nurse as these may need to be stopped before surgery.

The following is a list of additional preoperative testing and clearances that may be necessary:

1. Cardiology
2. Pulmonary
3. Sleep Study (evaluation for sleep apnea)
4. Endocrinology
5. Upper Endoscopy, Upper GI series
6. CT scan of abdomen and pelvis
7. Labs
8. Neurology

#5 – Additional Requirements/Other Specialists:

Psychological Evaluation

It is important to understand what caused your weight problem. Many people are not aware of the reasons they gained weight. This is an integral part of the process, recognizing and identifying problems that will help you improve your lifestyle. Behavior health can help you with the following:

1. Why weight gain occurs
2. Emotional eating/triggers
3. Using foods to cope
4. Eating habits
5. Compulsive eating
6. Abusive/negative relationships
7. Conscious Eating
8. Fear
9. Re-learning healthy attitudes toward food and adapting to a healthier lifestyle
10. Building self-esteem and self-value
11. Being realistic in your surgical expectations
12. Personal accountability

Weight loss surgery changes your anatomy, not your “thinking.” Friendships, family and marital relationships can be challenged because of your decision to adapt a healthy lifestyle. As you lose weight you will have an adjustment getting used to your new physical appearance. Our team is here to support you through these changes. Remember it is a “process.”

...“The only thing that matters is that you look ahead to where you are wanting to go, and that you take one step. The next step. That is all you need to do.”

-Anne Marie Bennett

Dietitian

You will meet with our Registered Dietitians. The dietitians will evaluate your current eating behaviors based on your completion of the food journal. They will develop a personalized plan including goals to help you prepare for the surgery. You will also meet with them throughout the pre-op and post-op phases including:

1. Phases of the diet
2. Protein intake
3. Vitamin/mineral supplements
4. Nutritional deficiencies
5. Shopping lists and tips
6. Recipe booklet
7. Restaurant card (for smaller meal portions)
8. Support group calendar
9. Keeping a food log

“No plan, no pill, and no surgery will succeed unless you eat nutritious food in portions that are right for you.”

Exercise and Physical Activity

Being active will help you lose weight and keep it off! Many studies show that people who exercise regularly benefit from a positive boost in mood and lower rates of anxiety and depression. “Exercise” does not mean you need to join an expensive gym or buy equipment. You can increase your physical activity in many ways

1. Walk
2. Take the stairs
3. Park your car at the far end of the lot
4. Use your lunch time or break to walk
5. Find a workout buddy
6. Try yoga to improve flexibility
7. Strength training (using weights) or other resistance can build muscle. Muscle burns more calories.
8. Water aerobics is excellent for joint pain/arthritis
9. Mix it up – keep it fun!
10. Consider group fitness

Whatever kind of exercise you do, start slowly and build up. For example, you could walk just 5 or 10 minutes twice a week. Then, gradually build up to 30 to 60 minutes five or more days a week.

Our office can provide you with a referral to a Physician Referred Exercise Program. This is a guided exercise program for patients undergoing bariatric surgery. There are several locations throughout the state of Virginia.

#6 – Support Group Meetings

We will give you information about local groups and other support services.

#7 - Pre-operative Appointment with surgeon and Pre-operative Educational Workshop

You will have a final appointment with the surgeon and the bariatric team for:

1. History and Physical Exam, consents and Anesthesia History
2. Pre-op Educational workshop
3. Pre-surgery preparation
4. Pre-evaluation Testing Center visit (PETC) The nursing staff will ask you questions and may perform or order the following:
 5. Discuss type of anesthesia, and pain relief
 6. EKG
 7. Chest X-ray
 8. Labs

**You will receive a notebook with all your preparation instructions.
Enhanced Recovery After Surgery (ERAS)**

Please bring this notebook to the hospital with you.

Use it to keep your education materials and planning documents organized.

NOTES: