Impact of Nursing Care on Bariatric Surgery Patients

May 19-20, 2011

Do-It-Yourself Gastric Bypass Surgery Kit

Paying $35,000 for a gastric bypass surgery is fine—if you want it performed by "doctors." But who needs that now that Amazon.com is selling Do It Yourself gastric-bypass surgery kits for only $263.95? And with three sets of supplies in each kit, even the most untrained amateur surgeon should be able to get it right by the third try.

UPDATE: Amazon has removed the DIY gastric-bypass surgery kit from its website. Apparently people will have to settle for kitchen knives and rubber bands from now on.
Agenda

- Bariatric Surgery Procedures
- Bariatric Surgery Inclusion Guidelines
- Bariatric Surgery Volume
- South Bay Medical Center Bariatric Team
- Comprehensive Carepath
  - South Bay Options Program
  - Surgery Consultation & Surgery
  - Post-op and Follow-up
- Post Bariatric Care
- Bariatric Surgery Sensitivity

The Facts About Obesity Bias

- Obese people report feeling discriminated against both in their daily lives and by healthcare providers
- Studies show that health professionals self reported that they do regard obese patients as “lazy”, “dirty”, “non compliant”, “stupid”, and “ugly”
- One study found that 48% of nurses said they were uncomfortable caring for obese patients and 31% of nurses said they would prefer not to care for an obese patient at all
- A national study noted that 2/3 of MDs reported obese patients “lacked self control” and 39% reported that they were “lazy” and “had poor hygiene”
- 80% of surgery patients in another study reported being treated disrespectfully by medical professionals
- Anti fat bias and prejudice results in obese people avoiding doctors and hospitals until they are very sick
- Obesity is a chronic condition and should be treated as such. No one laughs at other chronic conditions
What You Can Do as a Health Care Professional

- Know your personal biases and keep your personal feelings out of professional care
- Take an extra minute to think before you speak or act. Unsolicited or inappropriate comments can be hurtful
- Know your HIPAA privacy policies. Don’t assume that visitors know the type of surgery a patient is having
- Avoid signs, labels on equipment, messages on phones that indicate obesity to others
- Don’t tolerate whispers or quiet jokes from your colleagues
- Be prepared with appropriately sized equipment
- Don’t make loud requests for large gowns, BP cuffs and other equipment
- All patients have the right to be treated with equal dignity and respect
- Focus on the person, not their obesity. Treat them with the same respect, tact, and concern you would treat any other patient

South Bay Medical Center Bariatric Team

South Bay Medical Center
Bariatric Team

Outpatient Team
Sin Young Calantoni, AMGA
Ronald Navarro, AMD
Kathy Manshukani
Donna Menacola
Javiera Aceituno
John Chew
Claudia Vega Suree

Bariatric Providers
Gary Belzberg, MD
Robert Zane, MD
Edward Mun, MD
Alan Toben, MD
Fadi Hendee, MD

Inpatient Team
Kevin Pusavat, MD
Sharron Hickey
Renato Razonable
Kathleen Frengel
Bariatric Surgery Procedures

Bariatric surgery includes a variety of procedures:
- Gastric banding - reducing the size of the stomach with an implanted medical device
- Sleeve gastrectomy - removal of a portion of the stomach
- Gastric bypass - resecting and re-routing the small intestines to a small stomach pouch

Bariatric Surgery

Referral indications

- BMI > 40, with or without co-morbidities
- BMI 35 to 39.9, with significant co-morbidities that confer a high risk for obesity-associated morbidity or mortality
Kaiser Permanente Southern California
Bariatric Surgery Volume

The KP SCAL demand for bariatric surgery has grown by 860% since 2004. We forecast a demand of 5,772 surgeries in 2011.


Source: South Bay Access Database
South Bay Bariatric Volume by Surgery Type

<table>
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<th>South Bay</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011*</th>
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<tbody>
<tr>
<td>Surgery Type</td>
<td>Actual</td>
<td>%</td>
<td>Actual</td>
<td>%</td>
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<tr>
<td>Total RYGB</td>
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<td>35%</td>
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<td>25%</td>
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<td>591</td>
<td>100%</td>
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</table>

2011 includes cases from 1/01/11 – 3/31/11

Comprehensive Carepath

- The South Bay Bariatric Team created a comprehensive program by bridging the newly developed Inpatient care pathway to the existing Outpatient Options Program and Post-Operative care pathway
South Bay’s Comprehensive Program

- South Bay Medical Center’s Comprehensive program features:
  - Improved handoffs from the pre-surgery Options Program to the inpatient surgery to outpatient recovery
  - Identified opportunities to improve patient outcomes decrease our inpatient length of stay by focusing on patient population
  - Implemented initiatives to improve the patient care experience

Comprehensive Carepath Options Program
## Post Bariatric Care

- Monitoring and treatment of blood work to assess vitamin deficiencies
- Reinforcement of lifestyle changes including diet and exercise
- Assessing percentage of weight loss after surgery
- Reinforcement of recommended vitamin replacement regimen

## Questions?
Contacts

- Complete Care Website:  
  http://kpnet.kp.org/scal/completercare/index.html

- Contact: Kathleen Frengel, Bariatric Coordinator

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