

Grupo CHRISTUS MUGUERZA®

Information about:

Gastric Bypass

For International Patients

INDEX

About Gastric Bypass	3
Characteristics	3
Surgical Indications	3
Suggested studies for case examination	4
Sample schedule	6
How do I get started.....	9
Contact information.....	10

****This document provides general information about the procedure of interest; details may change depending on each individual patient's case. This document is purely informational with no definitive indications or clinical recommendations for an individual patient.*

Gastric Bypass

Gastric bypass procedures (GBP) are any of a group of similar operations used to treat morbid obesity—the severe accumulation of excess weight as fatty tissue—and the health problems (comorbidities) it causes. Bariatric surgery is the term encompassing all of the surgical treatments for morbid obesity, not just gastric bypasses, which make up only one class of such operations.

A gastric bypass first divides the stomach into a small upper pouch and a much larger, lower "remnant" pouch and then re-arranges the small intestine to allow both pouches to stay connected to it. Surgeons have developed several different ways to reconnect the intestine, thus leading to several different GBP names. Any GBP leads to a marked reduction in the functional volume of the stomach, accompanied by an altered physiological and psychological response to food.

Surgical Indications

Indications for any surgical treatment of obesity*

- 1) BMI* (Body Mass Index) above 40, or 100 lbs above ideal weight, or BMI between 30 to 40 in the presence of other associated diseases that may improve with weight loss (high blood pressure, diabetes, sleep apnea, and painful joint condition arthritis proven by x-ray)
- 2) Age between 18 and 55 years
- 3) Stable obesity for more than five years
- 4) Failure of dietary or weight-loss drug therapy for more than one year
- 5) Absence of glandular diseases such as hypothyroidism
- 6) Comprehension of the procedure and compliance by the patient
- 7) No dependency on alcohol or drugs
- 8) Acceptable operative risk

Note: These are the surgical Indications recommended by The American Society of Bariatric Surgery.

Suggested studies and indications for case examination

Laboratory Results:

- CBC
- Prothrombin time (PT) and activated partial thromboplastin time (aPTT)
- BUN, Creatinine, glucose.
- Liver Enzymes
- Thyroid function test
- Basic Blood Chemistry Tests

Note: Preferably, studies should not be more than 4 months old

Radiological Results:

Abdominal ultrasonography

In patients over 40 yr:

CXR

E.K.G.

Other tests:

In patients with BMI over 40, heavy smokers or with Chronic obstructive pulmonary disease

Respiratory function tests

Note: Preferably, studies should not be more than 2 months old

History and Physical Medical Records

- Medical History completed by patient (Medical Questionnaire)

- With actual medication (complete type and dose)

Which characteristics discard the patient or makes it high risk patient (cases where additional or special care or procedures will be needed):**Patient discarded by having:**

- If the surgery or treatment represents an unreasonable risk to the patient.
- Glandular diseases such as hypothyroidism.
- Inflammatory diseases of the gastrointestinal tract such as ulcers, esophagitis or Crohn's disease.
- Severe cardiopulmonary diseases or other conditions which may make them poor surgical candidates in general.
- Dependency on alcohol or drugs.
- Mentally retarded or emotionally unstable people.
- Scleroderma and other autoimmune diseases.
- End Stage Renal Disease.
- Dilated cardiomyopathy
- Chromosomal disorders

High risk patient by having:

- a) Age > 60.
- b) Major elective cancer surgery (>2 hr surgery)
- c) Elective abdominal aortic aneurysm repair
- d) Congestive cardiac failure
- e) Ischaemic heart disease
- f) Cardiac arrhythmia
- g) Hypertension
- h) COPD
- i) Pulmonary embolus
- j) Chronic renal insufficiency

- k) Diabetes mellitus with end-organ damage
- l) Long term steroid therapy
- m) Chronic liver disease
- n) Cerebrovascular disease
- o) Peripheral vascular disease
- p) Severe carotid or peripheral vascular disease

Additional Requirements in Home State after Acceptance:

Criteria for Postponement of Procedure:

- 1) Fever, respiratory diseases, urinary tract infection, diarrhea.

Preop tests required:

- CBC, PT and PTT.
- BUN, Creatinine, glucose.
- Liver Enzymes
- Thyroid function test
- Basic Blood Chemistry Tests

* Barium upper gastrointestinal series 1 day prior to procedure

Instructions before procedure:

- Clear liquid diet for 1 day prior to surgery
- No eating or drinking after 10 PM the day before surgery.
- You must not take any drugs containing aspirin for two weeks before the surgery. These drugs may cause you to bleed more than normal. If you take Coumadin, check with your physician about when to discontinue the drug.
- Stop birth control pills and estrogen hormone therapy 2 weeks prior to surgery
- You must stop smoking 2 weeks before surgery. People who smoke have more mucous in their lungs, which is hard to remove after surgery.
- If you are diabetic, check with your doctor about your diabetic medicines.
- The day before surgery, you will need to scrub all your body several times with a special soap to kill germs. (This recommendation may change over time).

Sample Schedule

Sample Schedule		
(2 nights at hospital, 2 recovery nights at hotel)		
Day 1	AM	Departure
	12PM	Arrival to Monterrey
	4PM	Consultation with Bariatric surgeon at his office
	6PM	Pre-operative studies at CHRISTUS MUGUERZA
	7PM	Studies are left at Bariatric surgeon's office;
		confirmation
		Of the procedure by phone or in person; hotel stay
Day 2	9AM	Procedure takes place; hospital stay
Day 3	AM/PM	Hospital stay
Day 4	AM	Discharge; Hotel stay
Day 5	AM/PM	Hotel Stay
Day 6	AM	Consultation with Bariatric surgeon

Discharge Instructions for this procedure will be provided by the doctor.

Follow-up Protocol from Remote Provider:

- The patient will be able to call the remote provider to answer any questions.
- Make sure the local Bariatric surgeon writes a confirmation email to the remote provider about the patient's progress.

How do I get started?

1. Choose your surgeon, package and preferred travel dates. Please contact us if you need any additional information.
2. Fill out the **Online Bariatric Preevaluation** form at:
<http://www.corporativocm.com/bc/preevalform.asp>

and the **Contact Information**

You can send it to us by:

- Email internationalpatients@christusmuguerza.com.mx
- Fax: +52 81 8155 5151 to Medical Travel Department
- Mail to the following address:

CHRISTUS MUGUERZA MEDICAL TRAVEL
*Carretera Nacional 6501 Col. La Estanzuela
Monterrey, NL, Mexico CP. 64988*

3. Please let us know:
 - a) if you have any pictures, tests or studies relevant to your condition
 - b) the physician you selected and
 - c) the date(s) you would prefer to have your procedure done

4. All this information will be reviewed by our medical team to determine if you are a candidate for surgery
5. One of our CSRs (Customer Service Representatives) will contact you to let you know the final review of your case, program a conference call with the surgeon if needed, inform you about travel arrangements and visas, and answer any additional doubts you may have.
6. Make payment and confirm
7. All this information will be reviewed by our medical team to determine if you are a candidate for surgery
8. Your assigned representative will confirm consultation and surgery dates and coordinate with you to make all travel arrangements

Contact Information



Toll Free: 1 866 55 860 70

Direct Phone: + 52 818 174 3519

Fax: +52 81 8155 5151

Email: internationalpatients@christusmuguerza.com.mx

Website: www.christusmuguerza.com.mx

Address: Carretera Nacional 6501 La Estanzuela
Monterrey N.L. México 64988

