



SandyMartínez, MD
BARIATRIC SURGEON



Your Pre-Operative Blueprint: BMI 30-32

Setting the Stage for a Safe, Seamless, and Permanent Transformation

Welcome to the active phase of your bariatric journey. Because your BMI is between 30 and 32, you have a unique medical advantage: **you do not require a strict, weeks-long liver-shrinking diet**. However, surgery is only a tool. The true key to a lifelong transformation lies in preparing your mind and your habits *before* you enter the operating room. This manual is your exact roadmap. It focuses heavily on metabolic preparation, optimizing your hydration, and mastering the behavioral shifts that will guarantee your success.

Dr. Sandy's Pro-Tip: *"Use this time to practice the 30/30 rule (separating liquids from solids). It's the most important habit for your new life! If you master this before surgery, your post-op recovery will be infinitely easier."*

Your Objective for This Phase: Do not focus on losing weight right now. Focus on **rewiring your relationship with food** and strictly following the medical timeline to ensure Dr. Sandy has the safest possible environment for your procedure.

The Behavioral Habits of Highly Successful Patients

Rewiring your brain is just as important as preparing your body. Your stomach will be smaller, but your mind needs to adjust to this new anatomy. Start practicing these golden rules right now to ensure a smooth recovery and avoid discomfort after surgery.

1. The 30/30 Rule: The Pillar of Bariatric Success

- **The Rule:** Stop drinking all liquids 30 minutes before a meal, and wait 30 minutes after you finish eating to drink again.
- **The "Why":** Your new stomach will function like a small funnel. If you drink liquids while eating, you will "wash" the food straight through your stomach into your intestines. This causes two major problems: it leaves you feeling hungry again almost immediately, and it can cause "Dumping Syndrome" (nausea, cramping, and fatigue). *Never wash your food down!*

2. Master the "Bariatric Chew"

- **The Rule:** Chew every single bite 20 to 30 times until it reaches an applesauce consistency before swallowing.
- **The "Why":** After surgery, swallowing unchewed chunks of food can cause painful blockages or extreme discomfort. Your stomach no longer has the same capacity to break down large pieces of food. Digestion now starts entirely in your mouth.

3. Pace Your Meals Systematically

- **The Rule:** Take a minimum of 20 to 30 minutes to finish a meal. Put your fork down on the table between every single bite.
- **The "Why":** It takes your stomach approximately 20 minutes to send the "I'm full" signal to your brain. If you eat quickly, you will overeat before your brain registers satiety, which can lead to painful stretching and vomiting post-op.

4. Identify & Redirect Emotional Triggers

- **The Rule:** Ask yourself: *Am I eating because my stomach is physically empty, or because I am stressed, bored, or anxious?*
- **The "Why":** Surgery cures physical hunger, not "head hunger." Finding non-food ways to cope now—such as a 10-minute walk, deep breathing exercises, or journaling—will protect your weight loss later.

5. Daily Intentional Movement

- **The Rule:** Begin walking 20 to 30 minutes daily.
- **The "Why":** You don't need to run a marathon. Gentle, consistent cardiovascular movement strengthens your heart and lungs, which drastically speeds up your recovery from anesthesia and reduces the risk of blood clots after surgery.

Your Pre-Surgical Medical Timeline

Your safety is Dr. Sandy's highest priority. The following milestones are not suggestions; they are **strict medical requirements** to minimize surgical risks, prevent excessive bleeding, and ensure anesthesia works perfectly.

2 Months Prior – The Clean Start

- **STOP all nicotine products (Smoking, Vaping, Patches, Gum).** * *Medical Reason:* Nicotine constricts blood vessels, severely restricting oxygen flow to your surgical incisions. This drastically increases the risk of stomach ulcers, infections, and tissue necrosis (tissue death). Ask your primary care doctor for non-nicotine support if needed.

14 Days Prior – The Internal Cleanse

- **STOP all vitamins, herbal supplements, and dietary pills.** * *Medical Reason:* Many natural herbs and supplements thin the blood or interact unpredictably with anesthesia.
- **STOP oral female supplemental hormones** (Note: IUDs and arm implants are completely safe and do not need to be removed).
- **NO alcohol, marijuana, or THC products.** * *Medical Reason:* These substances alter liver enzymes and significantly interfere with how your body processes anesthesia, making it difficult to keep you safely sedated.
- **DISCONTINUE all caffeine (Switch to Decaf).** * *Medical Reason:* Caffeine is a diuretic that causes your body to flush out water. You need to be optimally hydrated for surgery. Furthermore, quitting now prevents massive caffeine withdrawal headaches during your hospital stay.

7 Days Prior – Medication Safety

- **STOP all blood thinners** (Coumadin, Plavix, Aspirin) **and NSAIDs** (Advil, Motrin, Aleve, Ibuprofen).
- *Medical Reason:* NSAIDs are highly irritating to the stomach lining and increase the risk of severe bleeding during and after surgery. (Note: Regular Tylenol/Acetaminophen is generally safe for pain, but if you have questions about specific mandatory medications, contact our Cornerstone Bariatrics medical team immediately).

2 Days Prior: The Clear Liquid Protocol

Forty-eight hours before your scheduled surgery time, **you must STOP ALL SOLID FOODS.** You will transition into the mandatory Clear Liquid Diet. This phase is critical to completely empty your stomach and digestive tract, drastically reducing the risk of infection and complications during your laparoscopic procedure.

What is a "Clear Liquid"? The golden rule: *If you can hold the liquid up to the light and see through it, it is allowed.*

APPROVED (Drink generously to stay hydrated):

- Water (Flat, no carbonation)
- Clear Broths (Chicken, Beef, or Vegetable—strained, no noodles or chunks)
- Sugar-Free Electrolyte Drinks (Gatorade Zero, Powerade Zero, Propel)
- Sugar-Free Jell-O
- Sugar-Free Popsicles (No fruit chunks)
- Clear, Sugar-Free Apple or Cranberry Juice (Diluted 50/50 with water)

- Herbal Tea or Black Decaf Coffee (Absolutely NO milk, cream, or sugar)

STRICTLY PROHIBITED (Do NOT consume):

- Protein Shakes (They are too thick and leave residue in the stomach)
- Milk or Dairy products
- Orange Juice, Tomato Juice, or anything with pulp
- Sodas or sparkling water (Carbonation expands the stomach)
- Any solid foods, purées, or soups with chunks

8 Hours Prior: The Final Countdown (NPO)

- **ABSOLUTELY NOTHING BY MOUTH.**
- No water, no ice chips, no mints, no gum. **Nothing.**
- *Medical Reason:* This is a non-negotiable anesthesia safety protocol. If there is even a drop of liquid or stomach acid in your stomach when you are put under anesthesia, it can travel up your throat and into your lungs (Aspiration Pneumonia), which is a life-threatening emergency. **If you drink water during this window, your surgery will be canceled.**

A Final Note Before You Pack: Bring all your prescribed, medically necessary medications in their original, labeled bottles to the hospital so our anesthesiologist can document them accurately.

Take a deep breath. You have prepared your mind, you have followed the medical timeline, and you are ready. Dr. Sandy and the Cornerstone Bariatrics team are waiting to guide you through the rest.