

TESTfacts

An Educational Health Series From National Jewish Health®



Fundoplication Surgery Postoperative Care

Postoperative Care

Now that your fundoplication surgery is done, you begin the postoperative care phase of your treatment. This involves advancing your diet slowly to prevent uncomfortable side effects from eating, yet having adequate nutrition to promote healing and prevent unintentional weight loss.

Advancing Your Diet

Your health care provider will work with you to determine how to advance your diet. This is very important for your surgery to be completely successful.

The purpose of advancing your diet is to provide foods that can be safely and successfully swallowed at different stages of recovery. You will start with a clear liquid diet, advance to full liquids, and then soft foods before you return to a normal diet. How long it takes to return to “normal eating” is different for everyone.

Once on a normal diet, your eating habits may need to change permanently, and that is to be expected. You may better tolerate eating small, frequent meals. You also may need to eat more slowly and chew your food extremely well.

How to advance your diet:

Please follow the guidelines below:

Clear liquid diet: Start with a clear liquid diet for the first 24 hours. Drink at least 4 – 6 cups of clear, non-carbonated liquids to meet fluid needs.

- Clear liquids include: Boost Breeze®, broth, (skim the fat off the top), clear fruit juices (no citrus), Ensure Clear®, Gatorade, flavored gelatin without fruit, herbal teas (no caffeinated or decaffeinated coffee or tea), and popsicles without fruit or cream. Avoid carbonated drinks, which can contribute to bloating.

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Full liquid diet: Stay on a full liquid diet for approximately 1 – 2 weeks to promote healing. You should be able to eat enough calories and protein on a full liquid diet to maintain a healthy weight. Choose foods with a very smooth texture. Consistency of foods should be no thicker than Cream of Wheat® or a milkshake.

- **Full liquids include everything on the clear liquid diet and the following beverages/foods:** Cream of Rice®, Cream of Wheat®, grits, homemade or premade fruit or protein shakes/smoothies, ice cream (no chocolate, coconut, coffee), milk, nutritional supplements including Boost®, Carnation Instant Breakfast®, Ensure® (no chocolate), protein powder dissolved in fluids, pudding (no chocolate or coconut), sherbet, soy milk, yogurt with a smooth texture (no chunks). Limited coffee and tea are allowed: no more than two 6-ounce cups of coffee and/or tea daily (maximum of 12 ounces per day). Avoid citrus.

Soft diet: If you are doing well on the full liquid diet, advance to the soft diet for approximately 1 week. Foods should still be easy to chew and swallow: “bite-size” (1/2” or smaller), pureed or soft. Avoid foods that are crusty, edged, hard, sharp, sticky or thick. Avoid foods that form masses when swallowed. Eat slowly, and chew food very well. **See the table below for soft diet options.**

Soft Diet Options		
Food Category	Foods to Choose	Foods to Avoid
Beverages	<ul style="list-style-type: none"> • Water • Herbal teas (avoid mint) • Low-fat milk (1% or fat-free), soy milk, almond milk, rice milk • Non-citrus juices (apple, grape) • Fruit nectars • Nutritional supplements (Ensure®, Boost®, Carnation®) • Limited coffee and tea (no more than two 6-ounce cups daily) 	<ul style="list-style-type: none"> • Alcohol • Carbonated drinks • Chocolate milk, cocoa or other chocolate flavored drinks • Citrus juices (cranberry, orange, grapefruit, lemon, lime, pineapple) • Energy drinks • Excessive caffeinated and decaffeinated coffee and tea (no more than two 6-ounce cups daily) • Higher fat milk (2% and whole)
Starchy Foods	<ul style="list-style-type: none"> • Pancakes, French toast and waffles that are well moistened • Moistened or soft breads and muffins • Well-cooked, plain hot cereals such as Cream of Rice®, Cream of Wheat®, grits or oatmeal • Plain cold cereals (Cheerios, Cornflakes, Rice Chex), well moistened/softened with milk • Peeled, mashed or boiled white potatoes or sweet potatoes without skin • Oven-baked potatoes without skin • Soft pasta or noodles 	<ul style="list-style-type: none"> • Dry bread/toast, bagels, baguettes, Kaiser or hard rolls, English muffins • Dry cakes or cookies • Dry crackers, crackers with nuts or seeds • Dry cereal, cereal with fresh or dried fruits, nuts, seeds or coconut • Coarse cereals such as bran or Shredded Wheat • Fried, brown or wild rice • Fried potatoes (white or sweet), potatoes with skin • Hard taco shells, soft taco shells, tortilla chips • Potato chips, pretzels and other hard or sharp snack foods

	<ul style="list-style-type: none"> • Moist, white rice • Well-cooked acorn or butternut squash 	<ul style="list-style-type: none"> • Sweet rolls, coffee cakes or doughnuts
Proteins: Dairy, Eggs, Legumes, Meats	<ul style="list-style-type: none"> • Meat or poultry that is ground, minced, moistened, pureed, tender or thinly sliced to ease swallowing and digestion • Baked, broiled or poached fish • Canned tuna/salmon • Low-fat cottage cheese or ricotta cheese • Mild soft cheese such as low-fat American or fresh Mozzarella • Eggs (poached, hard boiled or scrambled) • Egg, chicken or tuna salad prepared without celery or hard vegetables • Legumes, hummus • Smooth yogurt 	<ul style="list-style-type: none"> • Thick or tough meats with a lot of gristle or skin • Fried, highly seasoned or high-fat meats like bacon, bologna, hot dogs, ribs, salami, sausage, etc. • Fish with bones • Crunchy peanut butter • Cubes of cheese or strongly flavored cheese • Yogurt with nuts, seeds, coconut or chunky, fruited texture
Fruits	<ul style="list-style-type: none"> • All canned and cooked fruits • Soft, peeled fresh fruits such as banana, berries, kiwi, cantaloupe, honeydew, nectarines, peaches, plums, watermelon (without seeds) • Applesauce or other pureed fruits 	<ul style="list-style-type: none"> • Citrus fruits (oranges, grapefruit) • Dried fruits such as raisins, berries • Fresh or canned pineapple • Fruits with peels (grapes) or seeds • Hard fruits such as apples or pears • High-pulp fruits like mango, papaya • Fruit roll-ups, fruit leather, fruit snacks
Vegetables	<ul style="list-style-type: none"> • Well-cooked, soft, diced/minced vegetables without seeds or skins such as asparagus tips, carrots, chopped/cooked spinach, baby peas, etc. 	<ul style="list-style-type: none"> • Raw vegetables • Gas-producing vegetables like broccoli, Brussels sprouts, cabbage, cauliflower, cucumber, onions, radishes and sauerkraut • Vegetables with skins like corn, etc.
Desserts <i>Eat in moderation</i>	<ul style="list-style-type: none"> • Custards or pudding • Gelatin • Frozen yogurt, ice cream (preferably low-fat) • Popsicles • Sherbet or sorbet 	<ul style="list-style-type: none"> • Candy (chewy or hard) • Desserts containing chocolate, coconut, nuts, seeds, fresh or dried fruit, peppermint or spearmint
Fats/Miscellaneous <i>Eat in moderation</i>	<ul style="list-style-type: none"> • Butter, margarine or oils • Mayonnaise • Salad dressings • Sour cream • Salt, pepper • Ketchup, mustard • Gravy 	<ul style="list-style-type: none"> • Cream cheese • Fried foods • Highly seasoned salad dressings or sauces • Lard • Nuts/seeds • Olives • Spicy foods

How can I prevent uncomfortable side effects from eating as my diet is advanced?

Advancing your diet slowly will help prevent uncomfortable side effects from eating.

Follow these guidelines:

- Eat small, frequent meals (five to six per day) and snacks. Stop eating when you feel full.
- Limit fluids to ½ cup (4 fluid ounces) or 1 cup (8 fluid ounces) with snacks.
- Avoid very hot and cold liquids.
- Sit upright while eating and for 30 minutes after eating. Sit upright for 2 hours after your last meal of the day. Avoid lying down after eating.
- Eat slowly. Take small bites, and chew your food well.
- Think of any meal plans you already have, and continue them also, such as low carbohydrate, low sodium restrictions, etc.
- **Avoiding gas**
 - Expect to have some gas. It should gradually decrease.
 - Avoid drinking through a straw. Avoid chewing gum. Chew with your mouth closed. These actions help avoid swallowing air.
 - Avoid foods that cause gas; these are different from person to person. Examples include beans, broccoli, Brussels sprouts, cabbage, cauliflower, cucumber, onions, radishes and sauerkraut.
 - Avoid carbonated drinks.

How closely do I have to follow reflux recommendations?

After fundoplication surgery, it is appropriate to avoid/limit foods that promote reflux, both during diet advancement and after you are back to eating normally.

Medicines

- You will receive a prescription for a pain reliever. Take your pain medicine as directed and as needed.

Wound care

- Tape strips (steri-strips) may be used to close your skin. Do not try to remove these.
- When you take a shower, cover the tape strips, sutures, staples or glue with a plastic wrap the first week. Avoid taking a bath, going swimming or going into a hot tub until your health care provider tells you.

Activity

- Walk several times a day.
- Plan on taking 1 – 2 weeks off from work to recover from surgery. The time may need to be longer if you have a strenuous job.
- Avoid exercise, and limit any exertion for at least 2 week following surgery. This includes no bending, lifting (more than 10 pounds) or straining. Your surgeon will be able to advise you when it is safe to begin exercising again.

When to call the doctor

If you have the following symptoms or have questions, **please call National Jewish Health at 303.388.1355. Choose option 4.**

- Temperature of 101.5 degrees F or higher that lasts longer than 24 hours
- Severe pain not controlled by your pain medicine
- Incisions that are bleeding, red, warm to the touch or have a discharge
- Swollen stomach
- Problems swallowing that keep you from drinking and/or eating or do not go away for 2 – 3 weeks
- Dry heaving or vomiting. If you experience nausea that leads to dry heaving/vomiting, please contact us immediately. We want to avoid/manage these symptoms, since this puts stress on the surgical site and may cause it to fail and slip, in effect, 'undoing' the surgery.

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