

BOMSS pre-consultation questionnaire for patients

Please complete and bring to your medical review appointment

The aim of this questionnaire is to help us to assess your diet and eating pattern during the last 12 months. Please answer as honestly as you can, but don't worry if you can't remember every detail. This is not a test of your spelling or writing. Your answers will be useful to help discussions at your appointment.

Although the questionnaire asks about eating patterns and weight it is important than in the consultation you can discuss how you are feeling about things generally after your bariatric surgery.

Section 1

It will be helpful to discuss your surgical history, please answer the following questions (please write in the boxes):

Type of surg	ery				
Date of Surg	ery				
Hospital who	ere surgery	was perform	ned		
How are you	ı feeling ger	nerally follow	ving your	surgery?	
What is your	current we	eight?			
What was yo	our weight b	efore bariat	ric surge	ry?	
What was yo	our lowest v	veight after l	bariatric	surgery?	
Is your weigl	ht steady or	has it chang	ged in the	e last 3	
months?					
If so, is it goi	ng up or do	wn?			
If your weigh	ht is increas	sing and you	would l	ike help ple	ase discuss a referral to a dietitian at your appointment
	you taken a ne boxes be	•	mineral	s, fish oils, f	ibre or other food supplements over the past year? (please
	YES		NO		
2) Are yo	ou having vi	tamin B12 ir	njections NO	?	
	. = 0				
3) As far		ware are yo		the same su	upplements as recommended on discharge?
	YES		NO		



upplements tha	t you are currently ta	king or bring then	n with you to y
			al needs
f eating (pleas	e complete the box	res)	
Rarely	Occasionally, a few times a week	Once or twice a day	Several snacks a day
Fruit	Crisps	Biscuits, cereal bars	Cake
Sweets, chocolate	Cheese and biscuits	Yoghurts	Other- please list
	of eating (pleas Rarely Fruit	Rarely Occasionally, a few times a week Fruit Crisps	a few times a day Fruit Crisps Biscuits, cereal bars

											BESITY & METAI GERY SOCIETY
3)	Do you ever feel	earful when	eating o	or around	food?						
	YES	1	NO								
4)	If yes, please note	e the types of	situatio	ons when	this hap	pens an	nd if this	is some	thing yo	u are wor	ried about
5)	Do you ever find	yourself using	g food ii	n respons	se to fee	lings, eit	ther pos	itive or ı	negative	?	
	YES	ſ	NO								
6)	If yes, please note or would like to c		situatio	ons when	this hap	pens an	nd if this	is some	thing yo	u are wor	ried about
Section	on 4 Dietary ar	d nutritio	nal in	take							
We are	e now going to look	at your dieto	ary and	nutritiond	al intake						
1)	Do you have any you can eat? For				_			s that re	strict th	e types of	food that
	YES	1	NO								
2)	If yes, please give	details belov	v								
3)	Are you vegetaria	n, vegan or p	escatar	rian (don't	t eat me	at but e	at fish)				
	YES	1	NO								
					_						
4)	If yes, please give	details below	V								



5) If you eat meat, poultry, fish or seafood, we are interested to learn whether you have any difficulty eating these foods. More specifically, how easily can you eat the following (please tick the box with your answer):

Meat? (beef, lamb, pork, goat,	Easily	With some	Not	I never
venison)		difficulties	at all	eat
				meat
Poultry? (chicken, turkey, duck)	Easily	With some	Not	I never
		difficulties	at all	eat
				poultry
Fish?	Easily	With some	Not	I never
		difficulties	at all	eat fish
Seafood?	Easily	With some	Not	I never
		difficulties	at all	eat
				seafood

6) How many meals a day do you eat protein at (please tick the box)?

Protein is found in meat, fish, poultry, nuts, beans and pulses, quorn, tofu, eggs, cheese, milk, yogurt, protein shakes

One/day	Two/day	Three/day	More than	
			three/day	

7) Do you use protein supplements daily?

YES	NO	

8) If so please list the type of supplement or bring it to the review appointment

You need at least 60g of protein a day every day after bariatric surgery. You should aim to have 20g of protein at a main meal. If you are concerned that you may not be getting enough protein you may need to see a dietitian.

If you are eating protein less than 60g a day you may need extra advice from a dietitian.

The table below shows a list of example foods that contain high amounts of protein. Other foods including cereals contain smaller amounts of protein. You can use the list below to work out how much protein you are eating

Food	Portion	Protein content
Milk skimmed and semi-skimmed	200ml	7g
Dried milk powder	20g	7g
Soya milk	200ml	6g
Low fat Greek Yogurt	150g (small pot)	7g
Hard cheese (e.g.cheddar)	25g (small matchbox size)	6g
Low fat cottage cheese	75g	10g
Eggs	2 large	16g
Red meat, lean cooked	75g	22g
Ham	75g	14g

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Chicken thighs cooked	75g	19g
Chicken breast cooked	75g	23g
Tinned mackerel drained	75g	15g
Tinned tuna in brine drained	75g	18g
Cod cooked	75g	18g
Prawns cooked	75g	12g
Butter beans cooked	200g	12g
Baked beans	200g	10g
Lentils cooked	100g	8g
Quorn mince	75g	8g
Nuts	25g	5g

Fruit and vegetables

We are interested in learning more about your fruit and vegetable intake. This includes whether you have any difficulties in eating them

1) How easily can you eat the following (please tick the boxes):

Salad?	Easily	With some difficulties	Not at all	I never eat salad
Vegetables?	Easily	With some difficulties	Not at all	I never eat vegetables
Fruit?	Easily	With some difficulties	Not at all	I never eat fruit

A portion of fruit is a handful of berries, 1 apple, 1 small banana, 2 satsumas, or a small fruit juice. Only one small fruit juice a day is recommended as part of your 5 a day.

A portion of vegetables (fresh, frozen, tinned) is 3 tablespoons or one cereal bowl of lettuce, spinach or other leafy vegetables

Potatoes are not included as vegetables.

2) On an average day how man	ny portions	of fruit do you eat	daily?
How often do you eat a portion of fruit?	Never	A few times a week	A few times a day
3) On an average day how man	ny portions	of vegetables do you	eat daily?
How often do you eat a portion of vegetables or salad?	Never	A few times a week	A few times a day

It is recommended that people eat at least 5 portions of fruit and vegetables a day to get enough vitamins, minerals and fibre.

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For further information about fruit and vegetables and ways to increase intake, this is an excellent resource https://www.bda.uk.com/resource/fruit-and-vegetables-how-to-get-five-a-day.html

What type of milk do you drink? (please tick the boxes)

Cows milk	Soya Milk	Nut milk	Other,	
	fortified	fortified	please	
	with	with	specify	
	calcium	calcium		

1)	Do yo	ou drink	more	than	half	a	pint	of	milk	daily	/?
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2) Do you eat dairy products such as yoghurts and cheese daily?

Dairy products are an important source of calcium to protect you from osteoporosis (thin bones). If you don't eat or drink dairy products you may need dietary advice to improve your calcium intake.

This leaflet contains useful information about calcium and ways in which it can be increased https://www.bda.uk.com/resource/calcium.html

Alcohol

1) Do you ever drink alcohol?

YES	NO	

2) If yes, how much would you drink over a typical week?

If you have concerns about your alcohol intake please raise this at your appointment

This leaflet discusses the importance of keeping within recommended limits for health https://www.bda.uk.com/resource/alcohol-facts.html

Additional issues to discuss at review appointment

1) Do you get heart burn?

YES	NO	

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2) If so, how often?
3) Do you vomit or does food get stuck, causing discomfort and making you bring up slimy mucus (some people call this the foamies)?
YES NO
4) If so, how often?
5) If you do vomit or get the foamies is it related to certain food(s)?
YES NO
6) Please list the types of food which are likely to cause issues
7) Do you experience 'dumping syndrome? (episodes of feeling shaky, clammy, sick or faint after eating sugary or fatty foods, sometimes followed by diarrhoea)
YES NO
8) If so, how often?
If you are experiencing these symptoms frequently or it is affecting your daily activities please discuss this at
your review appointment
9) Have you any concerns about your diet? If so, please note your concern(s) below:
10) Would you like to see a dietitian for further help and advice?
YES NO
If you are planning pregnancy or become pregnant you should contact your GP or specialist as soon as possible

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as you need advice on changing vitamin supplements and possible medication.



If you have any other physical problems such as hair loss, excess sweating, diarrhoea, night blindness, problems with excess skin, pins and needles or numbness or constipation you should also discuss this at the review appointment.

Bariatric surgery has many effects on both your physical and mental/emotional health. It is common to notice mood changes and sometimes hard to understand and accept changes in your body shape. Please do raise any psychological issues that you need help with at your review appointment.

Dr Denise Ratcliffe has written a very helpful book Living with Bariatric Surgery Managing your mind and your weight, ISBN 9781138217126, Routledge 2018, https://www.routledge.com/Living-with-Bariatric-Surgery-Managing-your-mind-and-your-weight/Ratcliffe/p/book/9781138217126

The book, 50 Ways to Soothe Yourself Without Food by Susan Albers may also be helpful to you.

You might also find it helpful to get information from organisations that help support people living with obesity:

- Obesity UK https://www.obesityuk.org.uk/ runs a discussion forum https://www.wlsinfo.org.uk/ and also a closed Facebook group Obesity UK Bariatric and Metabolic Surgery Support Group
- European Coalition of People living with Obesity- works collaboratively across Europe to improve the lives of people who are living with obesity through advocacy, policy and education https://eurobesity.org/
- Irish Coalition of People living with Obesity (ICPO) https://icpobesity.org/
- Additional tips for weight loss maintenance are available from the European Association for the Study of Obesity website: https://easo.org/practical-tips-for-patients-after-bariatric-surgery/

Developed by the working group: Dr Carly Hughes, Mary O'Kane RD and Dr Helen Parretti with input from Professor Ailsa Welch, Ken Clare, Dr Esther Waterhouse and Dr Emma Shuttlewood.