



Frequently Asked Questions:

About Dr. Cervantes and Weight Loss Surgery

Q: How long have you been a bariatric surgeon and how many procedures have you done?

A: I have been specializing in bariatric surgery for nearly 4 years. I have assisted in thousands assisting other surgeons. And I have done hundreds of bariatric procedures on my own.

Q: Why did you choose being a Bariatric Surgeon as your specialty?

A: I love helping people. Obesity hinders so many people from achieving their best life. So many suffer from depression and other co-morbidities such as diabetes, high blood pressure, and sleep apnea. Most of these ailments are no longer an issue after surgery. People deserve a second chance in life and I am beyond honored to be the one to help them achieve their goals. My patients are like my family. I wouldn't have it any other way.

Q: What would you tell people who would like to have the gastric sleeve but are scared to do it in another country like Mexico?

A: First of all, I understand their concerns. Over the years the media as stereotyped Tijuana as a bad and dirty place. We supposedly ride donkeys everywhere and that our hospitals are not sanitary and that we send our patients' stomachs to the restaurants as meat for their tacos! But actually, Tijuana has become the #1 destination for medical tourism for dental & plastic surgery etc. I advise you to keep doing your research. I have an impeccable team who will take amazing care of you before, during, and after your procedure. I want my patients to get to know me and fully trust me.

Q: How many surgeries do you do per day?

A: I choose to perform only 3-5 bariatric surgeries per day to ensure that I have time to be with my patients and give them the best care possible. Having too many procedures would not make that possible. My patients' care is the most important thing to me. I don't want them to be just a number to me.

Q: I have a history with really bad acid reflux. Will this be an issue with being sleeved?

A: 20% of sleeved patients that have a history of acid reflux usually have a hiatal hernia. Once we start the bariatric procedure we must fix the hiatal hernia in order to proceed with the surgery. In this case, we will take a video to show you after the surgery. A hiatal hernia repair is an additional cost.

Q: What is the big deal about the liver being shrunk during the preop diet?

A: Anatomically your liver is right in front of your stomach. In most patients, having a fatty liver will need a liver retractor to help lift up the liver to access your stomach. This liver retractor will be the 5th incision.

Q: I've heard that you can do a single port incision through the belly button only. How would I qualify for that?

A: Only patients with a BMI lower than 35-36. It is slightly higher in cost because there are different methods and instruments used. It's an additional \$1,000

Q: How do I decide on which bariatric surgery is good for me?

A: During your scheduled video conference call, Dr. Cervantes will be able to determine which procedure will be best for you.

Q: Who is usually there in the operating room? Is there an assistant surgeon?

A: Dr. Cervantes has an experienced surgical team consisting of the following:

- 1) An assistant surgeon who also is an experienced bariatric surgeon and is also a board certified trauma surgeon.
- 2) An anesthesiologist to help monitor your vitals during surgery
- 3) Two surgical nurse that assists with the many instruments used

Q: How long does the gastric sleeve procedure last?

A: The actual surgery procedure lasts about 40-45 mins. Then the patient spends about 60-90 mins in recovery.

Q: I'm very scared of complications during surgery. What can be done to prevent it?

A: With any surgery there is always a risk. Prior to surgery, we have our patients wear compression socks and a shot of Clexane: at blood thinner used to treat and prevent deep vein thrombosis & pulmonary embolism. Also, it is very important that after waking up from surgery that the patient walks as much as they can to help circulate the blood. I cannot emphasize enough how important it is to walk after surgery.

Q: I have heard that surgeons in Mexico do not use the same staples in the United States and how unsafe this is. What do you use?

A: We only use Covidean and Ethicon titanium staples. They are very safe and are the same high quality materials used in the United States.

Q: What happens if I have to stay longer because of a complication? Is the hospital equipped to have emergencies? Or do I have to be sent somewhere else?

A: Complications during surgery are rare. However, the hospital has an ICU where you will be monitored in case of any complications.

Q: Do you do a leak test to make sure my stomach isn't leaking?

A: Yes, however we do **THREE leak tests**. TWO during surgery. 24 hours later, the 3rd leak test is done with a barium swallow and an Xray to determine if there is a leak. You will get to take home your Xray.

Q: What is all this talk about gas pains and some people feel it all the way up in their shoulders? Where does the gas come from?

A: During surgery, Dr. Cervantes uses laparoscopic gas which is a lighter gas that is used to open the peritoneal cavity to view the procedure and organs properly. Therefore, it travels up of the body's cavity.

Q: Would you ever cancel someone's surgery? For what reasons?

A: Before surgery, if the patient does not stop taking blood thinners (such as baby aspirin), oral birth control then these are factors to not perform the surgery. Not stopping these things will be very detrimental to the surgical procedure. DURING SURGERY if Dr. Cervantes finds a huge liver that cannot even be lifted or retracted or there are too many scar tissues from prior surgeries, the bariatric procedure cannot be done. Also, if the patient arrives having respiratory issues or an abnormal lab test perform their surgery. This respiratory issue has only happened once.

Q: Do you offer a support group for your patient's after care?

A: Not only do I offer a support group for their after care, but I also offer one before, if they are undecided. I have an amazing online support group with my past and current patients. And even people that are curious and still in the research phase of their journey. They all support each other and we have weekly live broadcasts to keep everyone updated. It truly has been a wonderful support system for my patients. I want to help keep my patient's promises themselves and to remember why they chose to have weight loss surgery.

Frequently Asked Questions:
Booking and Traveling to Tijuana

Q: How do I start the booking process to have bariatric surgery with Dr. Cervantes?

A: You may fill out the medical application through the website. Afterwards, our patient coordinator will be in contact to serve any needs and concerns you might have. You will let us know the surgery date of your choice and our coordinator will send you instructions on how to send the \$500 deposit. The remaining balance is due when you arrive at the hospital/before your surgery. Cash and certified check will be accepted.

Q: When is the best times to fly into San Diego for same day surgery?

A: ***Airport code is: SAN.*** If you fly in between 6am-11am you may have your surgery the same day. Please send a screen shot of your flight itineraries to info@drcervantesbariatric.com once you book your flight.

Q: What if I cannot fly in that early? What is the best time to fly in?

A: If you cannot make it during 6am-11am, it is best to arrive 5pm. If you arrive after 5pm you may check in at the hospital and stay overnight for your surgery without incurring additional costs to your stay.

Q: After I have my surgery what are the best departure times for me to fly out of San Diego?

A: Please book your departure flight out of San Diego after 12pm. This gives you ample time for any border delays. If you must schedule an early morning flight there will be a \$50 additional charge for our chauffeur to pick you up from the hotel.

Q: What are the requirements to enter Mexico?

A: A current US passport or a passport card is preferred. If you do not have one or cannot get one in time, a valid US identification card and your birth certificate is sufficient. However, birth certificates and ID's might run the risk of having to go to a secondary inspection which will delay your time crossing the border back to the United States. Border patrol agents have become very strict and they prefer a valid and current US passport or passport card.

Q: How soon can I book to have the gastric sleeve done?

A: We can book you in our calendar as early as 3 weeks before your desired surgery date.

Q: Why does it take at least 3 weeks? Why not sooner?

A: With bariatric surgery, there is a period of at least 2 weeks to do the preop diet to get your body ready for the procedure. This is also to help with shrinking your liver. We also want to make sure we can pre-register your time and not be overbooked at the hospital.

Q: Do I need to convert my US money to Mexican currency in Tijuana?

A: US dollars are used and you do not need to convert your dollars into Mexican currency.

Q: Is it important to have a companion?

A: Having a companion isn't mandatory. Several patients come alone but are never really alone. We have an excellent nursing staff who give 24 hour care. There is a couch for the companion in the hospital room. There are no extra fees for a companion. Your companion will be responsible for their food. There is a small cafe located next to the bariatric floor entrance on the 3rd floor. There are also two highly recommended restaurants next to the hospital. (adjacent to the hospital and directly across the street). If you cannot come with a family member we will be your family so no need to worry if you are coming alone

Frequently Asked Questions:
PREPARATION BEFORE SURGERY

Start your preop diet 2-4 weeks before your surgery date. The higher your BMI (over 50) you may start 4 weeks early.

You may start taking a probiotic at least 4 weeks prior to your surgery.

Q: I am a smoker. Do I really have to stop smoking?

A: **Yes!!!** For the best results of your procedure I require you to stop smoking 3-4 weeks before your operation.

Q: Do I need to stop all my medication for my preop diet?

A: People do NOT need to stop taking medicine for the following:
Blood Pressure
Diabetes
Anxiety
Depression.

PLEASE MAKE SURE TO BRING THESE MEDS WITH YOU.

HOWEVER, if you are taking blood thinners you must stop taking them 7 DAYS BEFORE YOUR SURGERY DATE. THIS IS VERY IMPORTANT. Not adhering to these instructions may result in cancelling your surgery.

Q: I sleep with a C-PAP machine. Do I need to bring that with me?

A: **Yes, it is very important that you bring your machine.** If not, there will be an additional charge of \$100.

Q: I've heard that people elect to have their gall bladder removed. Why do people choose to have this done during their bariatric procedure?

A: Studies suggest that a patient undergoing weight-loss surgery can have as high as a 25-30 percent risk of developing symptomatic gallstone disease within the first year after their bariatric procedure; therefore, some physicians suggest the routine removal of the gallbladder for all patients undergoing weight loss surgery. This is an additional cost.

Q: I have a high BMI over 60. When can I start the preop diet?

A: Patients with a higher BMI can start the preop diet 4-6 weeks prior to their surgery.

Q: Are the extra fees that I might need to be aware of in addition to the cost of my weight loss procedure?

ENDOSCOPY: \$350

GALL BLADDER REMOVAL: \$500

HIATAL HERNIA REPAIR: \$500

(In case Dr. Cervantes finds that you have a hiatal hernia during your procedure, he will video it to show you after your weight loss surgery)

FROM LAP BAND TO SLEEVE REVISION : \$1,000

FUNDOPLICATION TO SLEEVE REVISION: \$1,000

Frequently Asked Questions:
POST SURGERY

Q: Do I have to bring extra money for post op medicine?

A: Extra money is not needed. Your take home meds are: pain meds, antibiotics, anti gas, and heartburn meds. They are all included with your fee. Extra money is only needed for shopping trips and perhaps tipping your driver.

Q: How long do I need to take off work after surgery?

A: Most patients may go back to work after 10 days but it depends on each patient and the type of job they have. Some patients go back to work within 48 hours. It just all depends on the type of physical activity associated with their work.

Q: After surgery when are we allowed to have sex?

A: As with any physical activity, with the movements, the abdominal stitches might rip. It is best to wait at least two weeks to have intercourse or until your abdominal stitches have healed.

Q: I have heard that after having surgery drinking carbonated drinks is a no no. Why is that?

A: Because carbonated drinks have bubbles in them that can expand your new stomach.

Q: When may I drink alcohol?

A: Your new stomach is now just a fraction of the original size. Wait for a few weeks. It cannot take in a whole lot of liquids. It maybe able to take in 3-4 ounces. Alcohol contains a lot of calories and you will not be able to tolerate as much as before. Be careful about drinking carbonated beverages such as beer because it will expand your new stomach.

Q: Based on your experience, what is the most issues people face after having bariatric surgery such as the gastric sleeve?

A: Being dehydrated is one of the most common issues. Because you cannot drink during your meals you must make sure you are able to hydrate constantly all day a minimum of 64 fluid ounces. Dehydration can also lead to kidney stones.

Other complications are developing a hematoma and infections in abdominal wounds from not taking proper care when at home. You must wash your wound sites.

Q: I am a parent and I have very young toddlers. Am I able to carry them when I get home from surgery?

A: At the risk of having your abdominal sutures tearing I would advise that only after 10 days you may carry and up to 18-20 pounds only.

Q: I have already had bariatric surgery and now I think my husband and I want to start a family. Is this ok after being sleeved?

A: Because your body is still adjusting to your new sleeve and getting to know your nutritional limits, **12 months post op is ideal**. Waiting a year will be best so your baby will be able to receive enough nutrients from your body.