

HISTORY OF PRESENT ILLNESS: ,I have seen ABC today for her preoperative visit for weight management. I have explained to her the need for Optifast for weight loss prior to these procedures to make it safer because of the large size of her liver. She understands this.,IMPRESSION/PLAN:, We are going to put her on two weeks of Optifast at around 900 calories. I have also explained the risks and potential complications of laparoscopic cholecystectomy to her in detail including bleeding, infection, deep venous thrombosis, pulmonary embolism, injury to the small intestine, stomach, liver, leak from the cystic duct, common bile duct, and possible need for ERCP and further surgery. This surgery is going to be planned for October 6. This is for cholelithiasis prior to her Lap-Banding procedure.,I have also reviewed with her the risks and potential complications of laparoscopic gastric banding including bleeding, infection, deep venous thrombosis, pulmonary embolism, slippage of the band, erosion of the band, injury to the esophagus, stomach, small intestine, large intestine, spleen, liver, injury to the band, port, or tubing necessitating replacement of the band, port, or tubing among other potential complications and she understands. We are going to proceed for laparoscopic gastric banding. I have reviewed her entire chart in detail. I have also gone over with her the Fairfield County Bariatrics consent form for banding and all the risks. She has also signed the St. Vincent's Hospital consent form for Lap-Banding. She has taken the preoperative quiz for banding. She has signed the preop and postop instructions,

and understands them and we reviewed them. She has taken the quiz and done fairly well. We have reviewed with her any potential other issues and I have answered her questions. She is planned for surgical intervention.,