

2019 ASMBS Guidelines for RNY

Multivitamin				
Thiamine	At least 12mg / day *			
Folic Acid	400-800 mcg / day from MVI			
	800 - 1000 mcg / day total			
	(female, child bearing age)			
B12	Oral: 350 - 1000 mcg / day			
Vitamin D	3000 IU (75 mcg)			
Vitamin A	5000 - 10000 IU (1500 - 3000 mcg) / day			
Vitamin E	15 mg / day			
Vitamin K	90 - 120 mcg / day			
Copper	2 mg / day from MVI			
Zinc	8 - 22 mg / day from MVI			
Zinc to copper ratio: 8 - 15 mg of zinc for every 1 mg of copper				
Iron				
At least 18 - 60 mg / day **				
CANNOT take with calcium				
Calcium				
1200 - 1500 mg /day				
Take in divided doses				

Take in	divided dose	S

Calcium Citrate may be taken with or without meals

Other		
Protein (often individualized)	Minimum of 60 g / day, with some patients needing higher amounts of 80 - 90 g / day	
Fluids (often individualized)	At least 1,5L / day to ensure adequate hydration	

^{*} At risk patients: rapid weight loss, protracted vomiting, the need for parenteral nutrition, excessive alcohol, neuropathy, encephalopathy, and / or heart failure. At risk patients need at least 50-100 mg of thiamine daily.

Information adopted from Mechanick et al SOARD. 2020; 16: 175-247

^{**} Low risk patients (males and patients without a history of anemia) need 18 mg of iron from their multivitamin. Higher risk patients (menstruating females who have had VSG, RNY, or BPD / DS or those with anemia) need at least 45-60 mg of iron daily.