Abstract
The focus of the poster presentation is to create a program proposal to include occupational therapy intervention after bariatric surgery to incorporate what the clients value in their occupations into a program that builds new and healthy habits. Most healthcare systems focus solely on the medical and nutritional aspects of weight loss after bariatric surgery. This focus limits the client as it does not address the modification of their occupations and maladaptive behaviors to ensure long-term success. Through the introduction of this program, the goal is to integrate occupational therapy as a standard of care post-bariatric surgery to ensure the clients reintegrate into daily occupations and modify maladaptive behaviors for long-term success.

Learning Objectives
1. Identify the role occupational therapy can contribute in post-bariatric surgery aftercare.
2. Describe the evidence-based research that positively supports occupational therapy implementation in post-bariatric care.
3. Identify the step-by-step process of implementing the program proposal into a bariatric specialty department.

Purpose/Background
• The focus of the program will be to implement rehabilitation (specifically occupational therapy), nutritional, and medical intervention in one central location at a large bariatric specialty hospital.
• Currently, the only post-surgical follow-up is with the physician and with the registered dietician and not at times is occupational therapy (OT) consulted or used to determine the client’s physical activity or life experiences.
• Obesity is a rapidly growing health issue globally with over 2.8 million resulting deaths each year (World Health Organization, n.d.).
• Obesity is the leading preventable risk factor that contributes to early mortality (AOTA, 2012).
• The medical related costs for treatment of obesity are estimated at $147 billion annually in the United States, which is 10% of total medical spending in the country (Finkelnberg, Trogdon, Cohen, & Dietz, 2009).
• A program is needed that addresses more than surgical complications and nutritional restrictions to encompass the functional effects of surgery that involves the client’s reintegration into instrumental activities of daily living and leisure activities that are physical in nature (Mata, Mikkola, Loveland, & Hallowell, 2015).
• A study completed by Nijamkin et al. (2012), found that clients with morbid obesity who participated in a comprehensive post-surgical program, demonstrated greater excess weight loss, body mass index reduction, and an increase in physical activity, compared to the normal no activity or life experiences.
• A study completed by Faccio, Nardin, and Cipolletta (2016) focusing on the clients’ changes in their body experience and at no time is occupational therapy (OT) consulted or used to determine the client’s physical activity or life experiences.

Literature/Evidence
• Libby, B., Bond, T., Linnan, V., and Hanson, S. (2016), used the Bandura’s social cognitive theory as a theory to assist the authors in understanding why the participant changed behaviors. The participants were able to identify negative attitudes, healthy influences, and environmental modification to create healthy behaviors.
• Leathley, Bond, Twinn, Crowther, and Ling (2009) indicated that as a health and occupational therapy intervention, and the vitality to thrive in practice.

Future Implications/Conclusion
• The Centennial Vision was established as a guide and vision for the future of occupational therapy to remain relevant and viable in healthcare (AOTA, 2006). The drivers of change that directly relate to the program proposal are longevity, health care costs and reimbursement, prospective and preventative medicine, lifestyle values and choices, stress and depression, and universal design for an active living (AOTA, 2006).
• The focus of the proposed program is on providing client-centered care with clients post-surgery to ensure their care is customized, cost-effective, client-centered, and evidence-based, which is in direct alignment with the Vision 2025 (AOTA, 2016).
• The program proposal aligns with the Centennial Vision and Vision 2025 by focusing on an emerging niche of obesity and bariatric surgery. The program will expand the scope of practice to enable occupational therapy to reach a new population within the healthcare system and positively affect clients in occupation reintegration after rapid weight loss.
• The focus on occupation reintegration, behavioral modifications, and increased physical activity are vital for long-term success in weight loss management. Occupational therapy is specialized to focus on the functional and psychological issues that arise and provide intervention to create positive outcomes after bariatric surgery.
• The sharing and reflecting on my knowledge and experience in occupational therapy will hopefully assist other clients after bariatric surgery cope with the dramatic changes that occur physically and psychologically.

References
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