

A top-down view of a bowl containing a mixture of food, possibly a salad or soup, with various vegetables and grains. A semi-transparent blue overlay covers the top half of the image, where the title text is placed.

Post-Operative Nutritional Guidelines: The First 4–6 Weeks

No matter what type of ostomy surgery you have had, your post-surgical diet will begin with liquids and transition to solids. You also will begin with a diet **low in fiber/low in residue** and focus on low spice and low-fat foods. Spicy and high-fat foods may cause diarrhea and/or reflux. As your bowels return to normal, you may be able to return to your regular diet and food choices, unless your surgeon has recommended alternative choices due to your medical conditions.

Goals of a Healthy Diet after Surgery

- Maintain weight through calories and protein.
- Promote wound healing and healing of the surgical incision, by getting enough protein.
- Maintain healthy fluid levels (**hydration**) and prevent **dehydration**.
- Prevent a **stoma blockage**. Those with an ileostomy are most likely to be at risk. See [Ileostomy: Specific Post-Op Guidelines](#).

FAQ

Why a low-fiber/low-residue diet after surgery?

- Helps to rest the gastrointestinal tract after surgery.
- Foods are easier to digest and produce less gas.
- Helps with diarrhea, abdominal cramping, bowel obstruction.
- If applicable, it may help while undergoing chemotherapy or radiation therapy.

How long should I stay on a low-fiber/low-residue diet?

- Approximately 4–6 weeks after surgery. Your doctor will advise you of the exact time.
- After 4–6 weeks, gradually add fiber-rich foods back into your diet.
- This diet is meant to be temporary to help you recover from surgery.



Food Guide: Low Fiber/Low Residue (4–6 weeks)

	Allowed	Avoid
Proteins*	Lean meats Meat substitutes (tofu) Poultry, fish Low-fat dairy (milk, cheese, yogurt) Non-dairy milks (soy, almond, coconut, rice) Eggs Smooth nut or seed butters	Fatty, tough meats Beans, peas, lentils Nuts and seeds
Low-Fiber Breads, Cereals, Rice, and Pasta	White breads Crackers Cooked cereals (farina, cream of rice) Cold cereals (Puffed Rice, Rice Krispies, Rice Chex, Corn Flakes) White rice White pasta	Breads with nuts, seeds, fruit Whole-wheat, whole grains, multigrain, rye, bran and corn breads Oatmeal, kasha Buckwheat Cold cereals with whole grains Bran, nuts, dried fruit Brown or wild rice Popcorn
Vegetables	Tender, soft-cooked (microwaved or steamed) vegetables. No skins or seeds. Mashed, boiled, or pureed vegetables Peeled potatoes	Raw vegetables and vegetables with seeds Sauerkraut, cabbage, cauliflower, onions, corn Winter squash, broccoli, brussel sprouts, mushrooms Sweet potatoes Unpeeled potatoes

***For advice on protein or calorie supplements, consult your doctor or registered dietitian**

	Allowed	Avoid	
Fruits	Cooked or canned fruit (except canned pineapple) Applesauce Bananas, plantains	Prunes and prune juice Fresh or dried fruit, including berries, figs, dates, and raisins Canned pineapple	
Milk and Dairy	Plain, low-fat milk Plain or vanilla low-fat yogurt Pudding Kefir Low-fat ice cream	Full-fat milk and cheese Yogurt with whole fruit Cheese sauce or alfredo sauce	
Desserts, Condiments	Custard, sherbet, popsicles Clear jelly	Coconut Pickles Relishes Fruit preserves with seeds Marmalade Horseradish Salsa Guacamole	

Tips for Success

- Give your appetite 4-6 weeks to return.
- Focus on a balanced diet with a variety of fruits, vegetable, lean protein and grains.
- Do not force yourself to eat. Try to eat frequent small meals throughout the day vs. 2-3 large meals.
- Include lean, protein-rich foods with each meal and snack.
- Try to keep a regular schedule for meals and snacks.
- Slowly increase the amount of food you eat.
- Chew well and take small bites; digestion begins in the mouth.
- Avoid the use of straws which produce gas.
- Add new foods one at a time in small amounts and chew well. This way if a food is a problem you will be able to tell which food it is.

Hydration Needs After Surgery

One reason for readmission to the hospital after surgery is dehydration. To be fully hydrated, your body needs 8-10, eight-ounce glasses of fluid each day on average. Follow the guidelines below to get the hydration you need from the best sources. (See also [Hydration, Fluids, and Electrolytes](#))

Recommended Fluids

- Water, the perfect hydrator
- Soup, broth; discuss low sodium or regular with your doctor or registered dietitian
- Gelatin
- Vegetable juice
- Diluted fruit juice, to decrease sugar consumed

Signs of Dehydration

- Dark urine
- Passing urine less often than normal
- Feeling light-headed
- Headache
- General weakness
- Frequent feeling of thirst

Everyone's experience with food and hydration needs differ after surgery. The information in this section provides basic nutritional and hydration guidelines for the first 4 to 6 weeks after ostomy surgery. However, your doctor or dietitian may want to create an individualized plan for you. Always follow your doctor's instructions for your diet following your surgery.





Ileostomy: Specific Post-Op Guidelines

Stoma Blockage

If you have a new ileostomy, you are at greater risk for a stoma blockage than someone with a colostomy for several reasons. First, the stoma created from the **ileum** (small intestine) is smaller in diameter than one created from the **colon**. In addition, post surgical inflammation of the bowel is normal, large particles of food don't break down easily. These particles can get stuck where the intestine comes through the abdominal wall (**stoma**), creating a blockage.

Signs of a stoma food blockage

- Abdominal cramps and pain
- Abdominal distention
- Watery stools with bad odor
- Stool released in spurts
- Absence of stool output
- Pressure at the stoma but little or no output of stool

Contact your doctor immediately if you feel you have a stoma blockage.

How to Avoid Food Blockage after Surgery

By following the guidelines in the [Food Guide: Low Fiber/Low Residue](#) chart and avoiding the foods mentioned in this section, you lower your chances of having a food blockage. In general, remember the following:

- Avoid high-fiber/high-residue foods
- Avoid vegetables and fruits with skins
- Avoid raw fruits and vegetables; cook them well or use canned
- Chew your food well; if you see visible chunks of food in your pouch, you are not chewing well

Foods to avoid for 4–6 weeks after surgery

See Food Reference Chart on Page 72

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|----------------------------|--|
| ● Mushrooms | ● Salad greens |
| ● Corn | ● Dried fruit |
| ● Celery | ● Coconut |
| ● Whole nuts and seeds | ● Grapes and cherries |
| ● Lentils and kidney beans | ● Brown and wild rice and whole grain breads |

Warning:

After surgery, a blockage of the small bowel can also happen for many reasons including from scar tissue (adhesions). If stool is not coming out of your stoma, it is best to call your doctor or go to the hospital immediately to determine if you have a stoma blockage related to food, or a small bowel obstruction.

For more information on ileostomy stoma blockage visit
www.ostomy.org/ileostomy-blockage

Preventing Dehydration

People with an ileostomy no longer have the large intestine to absorb water and fluids. As a result, **ileostomates** have a greater chance of becoming dehydrated. The best way to prevent this is to drink an average of 8–10 glasses of fluid a day. This can include many different types of liquid besides water. Be mindful, however, that caffeinated drinks can add to dehydration.

Follow the **Hydration, Fluid, and Electrolyte** guidelines contained in this guide to ensure you balance your intake. Also avoid the foods and liquids listed in the **Preventing Dehydration** chart below, which may cause high volume stool output.

What is a High Volume Stool Output?

- An ileostomy that produces 1,500 milliliters or more of stool per 24 hours
- Normal output is less than 1200 milliliters per 24 hours. The goal is to have an output between 600-900 mls/24 hours.

How to measure ileostomy output:

To measure your output, you can use a container from the hospital that fits on the toilet or any kind of container with a measuring guide. Another option is to fill your pouch with water half to $\frac{3}{4}$ full – the same amount of stool you would have in your pouch when you empty it. Empty the water and measure it. This way, you can calculate your output based on the number of times you empty your pouch in a day.

Preventing Dehydration Avoid the Following	To Help Thicken Loose Stool Add the Following	Stay Hydrated
Coffee	Bananas	Sip throughout the day.
Caffeinated tea (herbal is good)	Peeled potatoes	Drink one glass of fluid every time you empty your pouch.
Drinks high in sugar (juices, some sports drinks, soda/colas). Always read the label first.	White rice, bread, pasta, unseasoned crackers	Drink 8–10, eight-ounce glasses of fluids a day from the following list: <ul style="list-style-type: none"> • Water • Water-diluted juice and sports drinks • Jell-O, broth, and vegetable juice
Fried and/or spicy foods	Applesauce	
Alcohol	Marshmallows	
Chocolate	Creamy peanut butter	