

Instructions | Stomach pouch capacity test

The same week you do your lab tests (about a week before your next appointment), do this test to see how much food your stomach can hold.

Have lowfat cottage cheese or oatmeal, a one cup measuring cup, 1 oz medicine cups and your results form on-hand.

- Start with an empty stomach (just before a regularly scheduled meal is a good time) — don't eat for two to three hours before this test.
- Fill a one cup (8 ounce) measuring cup to the brim with the cottage cheese or oatmeal. Set a timer for five minutes.
- Starting from the side of the cup, eat until comfortably satisfied, taking no more than five minutes to eat.
- Stop eating when comfortable but not “stuffed” or when the timer goes off, whichever is first. If you feel nauseated, stop eating and try another day.
- Pour water into several 1 oz medicine cups, up to the fill line, marked “fl. oz. 1” just below the rim. Pour water from as many cups as you need into your cottage cheese/oatmeal cup to take the place of what you've just eaten. Use as many medicine cups as you need, even if the last one is barely emptied.
- Record the total amount of water poured off to the nearest quarter-ounce. (*The cottage cheese left in the supermarket container can be covered and refrigerated to eat another time. Throw away any food from the cup you ate from/added water to.*)
- Twenty minutes after eating the cottage cheese/oatmeal, identify your sense of fullness: not satisfied, full, comfortable, stuffed, painful, etc., and record on the worksheet. (Also available at salemhealth.org/bariatric. Click on “Resources” and scroll down to the “Patient resources” section.)
- Complete this test three times on different days at different times of day. Record the results each time. Bring your completed results form with you to your appointment.

Results | Stomach pouch capacity test

Name: _____

TEST 1

Date: _____ Time: _____

Amount of water poured off (to nearest quarter-ounce): _____

Sense of fullness (20 minutes after eating): not satisfied full comfortable stuffed painful
 other _____

TEST 2

Date: _____ Time: _____

Amount of water poured off (to nearest quarter-ounce): _____

Sense of fullness (20 minutes after eating): not satisfied full comfortable stuffed painful
 other _____

TEST 3

Date: _____ Time: _____

Amount of water poured off (to nearest quarter-ounce): _____

Sense of fullness (20 minutes after eating): not satisfied full comfortable stuffed painful
 other _____



Additional copies of this form are available by selecting the QR code or going to salemhealth.org/bariatric. Click on “Resources” and scroll down to the “Patient resources” section.

BARI-2654 457521