

The 14 questions.

To ask before you choose a bariatric clinic — or pay a deposit. You only get one first operation.

By **Dr. Scott Gmora, MD, FRCSC, FACS** — bariatric surgeon, and a sleeve patient himself

- ☐ **Ask in order, the big three first.** Tick the box when a question is answered clearly and specifically — and use the line to note what you actually heard. Vague answers and no-answers count too. Do not commit until every box deserves its tick.

THE BIG THREE

If a clinic stumbles here, nothing else will save it

- ☐ **01 Is this clinic owned by the surgeon who will be doing my surgery?**
The most predictive question on this list.
- ☐ **02 Does my surgeon work here full-time — or is he hired on an as-needed basis?**
The critical fallback. A per-case surgeon operates and leaves.
- ☐ **03 Can I join your patient community now — before I book anything?**
Yes on the spot, or a reason why not. Note which.
- ☐ **04 How large and how active is that community?**
A big, busy, unfiltered group — or a quiet room.
- ☐ **05 Do you regularly perform bypass, duodenal switch and revisional surgery — not just sleeves?**
Removing lap-bands doesn't count.
- ☐ **06 Do you regularly perform bariatric surgery in the public hospital system?**
In Canada, one of the best credential checks there is.

THE NUMBERS

- ☐ **07 How many weight-loss operations have you personally performed — career, and of my exact procedure?**
Surgeon-specific, not clinic-specific. Scopes don't count.
- ☐ **08 How many times have you returned to the operating room to fix a complication — out of how many cases?**
A rate, a period, a denominator. All three.

TRAINING & OWNERSHIP

- ☐ 09 **Are you fellowship-trained in an accredited bariatric surgery fellowship — specifically?**
Adjacent fellowships (oncology, upper GI) are different training.

- ☐ 10 **Is this clinic primarily a cosmetic surgery practice?**
Tummy tucks and liposuction do not treat obesity.

ACCESS & AFTERCARE

- ☐ 11 **Is there an emergency number that reaches my surgeon — directly, any time?**
"Just go to the ER" as the only plan is a major red flag.

- ☐ 12 **How many patients have you personally managed after surgery — not handed to the team?**
And can I access you when I need you?

- ☐ 13 **What does aftercare consist of after the first few months — and who notices if I disappear?**
A few months of appointments plus "call us" is not aftercare. Verify in the community.

- ☐ 14 **Why is your price what it is — and what exactly does it include?**
If it sounds too good to be true, it is.

VERIFY INDEPENDENTLY

No permission required

THE REGULATOR

Look your surgeon up with the medical regulator in their jurisdiction (in Ontario, the CPSO public register) for licence status and discipline history.

THE HOSPITAL

A public-system bariatric practice is checkable — ask which hospital, and confirm the affiliation.

THEIR PATIENTS

The community (question 3) is the verification layer for everything else on this page.

Listen to your heart. *It already knows.*

Does this person get it — do you feel judged, or understood? You are not hiring a technician. **If any nagging feeling says they care more about selling a surgery than helping you change your life, there is nothing more to discuss. Turn around and walk out.**

Always pick the surgeon and the program over the discount.