

## **GLUCOSE TOLERANCE TESTING**

## PRINCIPLE

Glucose tolerance testing is used to detect diabetes, impaired glucose tolerance, gestational diabetes and hypoglycemia. The dosage and phlebotomy drawing schedule will be different for each of our three orderable tolerance tests:

One Hour Glucose Tolerance Test (OB Screening Test) Two Hour Glucose Tolerance Test Three Hour Glucose Tolerance Test (OB Patients ONLY)

### **SCHEDULING**

- One hour glucose tolerance test patients do not need to pre-schedule a test
- Two and three hour glucose tolerance test patients do need to pre-schedule the test These patients will contact the laboratory where they would like to have the tolerance test Performed to schedule a date and time that the laboratory can accommodate.
- Monday through Friday it is recommended that no more than 3 patients be scheduled
- Saturday for those patients unable to test Monday through Friday, it is recommended that no more than one patient is scheduled
- If a walk-in patient arrives, we will accommodate their testing at that time.

### PATIENT PREPARATION

## **\*\***Patients must remain in the clinic for the duration of the test\*\*

Members must remain within the clinic during the test. This is in case the member should have a reaction to the Glucola and need assistance.

Administering a commercial glucose beverage is our standard for oral glucose load for glucose tolerance testing. Patients exhibiting intolerance to the glucose beverage will be documented and the glucose testing will be discontinued. A formal dietary meal for the 2-hour glucose tolerance test or the 1-hour OB Screen is not clinically indicated. The 100 gram carbohydrate meal is only given to the pregnant patient after glucola intolerance has been established and the provider has been consulted.

Fasting is not necessary for the 1 hour OB glucose tolerance test. All patients must be fasting (at least 8 hours) before the 2-hour and 3-hour glucose tolerance test. Patients may have water while fasting and during the test.

### GLUCOSE TOLERANCE BEVERAGES

- Lemon lime Glucose tolerance beverage which contains 100 grams of glucose in 10 fluid ounces (10 grams per ounce)
- Orange Glucose tolerance beverage which contains 50 grams of glucose in 10 fluid ounces (5 grams per ounce) \*\* Used for the 1-hour GTT (OB screen)

## DOSAGE AND DRAWING INSTRUCTIONS

- The entire dosage must be consumed within 5 minutes.
- If the patient vomits, discontinue testing. For specimens that have been collected, send to RRL as normal. For those portions of the tolerance that cannot be collected enter a result into ARE as a comment "Patient unable to tolerate glucola beverage" in ARE. Follow the Cerner Millennium instructions for logging in a specimen and entering a result.
- OB patients returning after glucola intolerance must have provider consultation for the carbohydrate meal to replace the 100 gram beverage. The approved carbohydrate meal (3 choices) is found following this procedure.
- Document in Cerner a test comment "Provider approved meal for glucola intolerance."
- All specimens collected will be tested in the Chemistry department at Regional Reference Laboratory.

**ANALYTICAL PROCEDURE -** Analyze and report glucose values using the current glucose procedure in the Chemistry Department at Regional Reference Laboratory.

Test	Patient	Dosage	Specimen
2 HR GTT	Adult > 95 lbs.	75 gm	Fasting and 2 HR
	Pregnant (OB Screen:		
1 HR GTT	fasting not required)	50 gm	1 HR
	Pregnant (OB: Fasting		
3 HR GTT	required)	100 gm	Fasting,1 HR, 2HR, 3 HR

Give less glucose to children and adults under 95 lbs. If a child is over 95 lbs, give the regular dose. Use the following formula:

Give: 1.75 gm glucose per 1 kw wt (2.2 lbs), one ounce glucola contains 10 gms glucose.

Formula: Ounces of glucola = pt wt (lbs) X 0.08

#### **INTERPRETATION**

Patient	Fasting	1 HR	2 HR	3 HR		
			<140			
Normal non-pregnant	<110 mg/dl		mg/dl			
	110-125					
Impaired tolerance	mg/dl					
			>200			
Diabetes Mellitus	>126 mg/dl		mg/dl			
		<140	*When the 1-hour OB screen is			
Normal pregnant		mg/dl	>140 mg/dl the provider will order			
			a 3-hour GTT			
		>190	>165	>145		
Gestational Diabetes *	>105 mg/dl	mg/dl	mg/dl	mg/dl		
*Two or more of the criteria for gestational diabetes must be met						

#### REFERENCES

National Diabetes Data Group, Diabetes 28:1039, 1979, O'Sullivan, J.B. NEJM 278:1038, 1968

Optimal Insulin Delivery for the Pregnant Diabetic Patient, Diabetes Care, Vol. 5, Suppl. 1, May-June 1982, pp. 24-37

<u>Protocols for Managing Diabetes in Pregnancy</u>, a guide for Physicians and Allied Health Professionals, Jovanovic, Lois M.D., Braun, Carol M.D., Drunzin, Maurice M.D., and Peterson, Charles M.D., January 1982.

DeGroot, Leslie J. et al; Endocrinology; Sec. Ed.; Vol. 1; W.B. Saunders Company 1989.

Jacobs & DeMott, Laboratory Test Handbook, 5<sup>th</sup> Edition, 2001, p. 185.

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# For OB Patients Only

## **Three Hour Glucose Tolerance**

# **Replacement Diet for Glucola Intolerance**

## 100 grams of carbohydrate breakfast

- Come to the laboratory, after not eating or drinking anything but water for 8 hours, for a fasting blood draw.
- Then eat **one** of the breakfast menus listed below.
- Return to the lab **1 hour** after completion of the breakfast for the 1 hour blood drawn and remain in the clinic for the 2<sup>nd</sup> and 3<sup>rd</sup> hour blood draws.

<ol> <li>1 <sup>1</sup>/<sub>2</sub> cups of cornflakes <sup>1</sup>/<sub>2</sub> cup low-fat milk <sup>1</sup>/<sub>2</sub> banana</li> <li>1 tsp. sugar</li> <li>2 slices of toast</li> <li>2 tsp. margarine</li> <li>1 tsp. jam</li> </ol>	Carbohydrate grams 39 6 15 5 30 0 -14 120 T $4$ h
<ul> <li>2. McDonalds Hotcake with Butter and Syrup</li> <li>1 orange juice</li> <li>1 carton (1/2 pint) low-fat milk</li> </ul>	109 <b>Total</b> 94 18.5 12_
<ul> <li>3. 3 egg waffles</li> <li>2 tsp. margarine</li> <li>3 tsp. syrup</li> </ul>	124.5 <b>Total</b> 34 0 39
8 oz. orange juice 1 cup low-fat milk	27 <u>12</u> 112 <b>Total</b>