

INSTRUCTIONS FOR OB GLUCOSE TOLERANCE TESTING

Updated January 2020

Dear Patient:

Your physician has ordered a Glucose Tolerance test to evaluate how well your body is utilizing sugar (glucose). You do not need an appointment, but you must consider the length of time required for your test and arrive at a lab patient service center in plenty of time to complete the test. Please read the below descriptions and instructions for the test you will be having. If you need more information, please call 989-583-6742.

ONE HOUR POSTPRANDIAL GLUCOSE - OB

Please call lab customer service for lab service center hours at 989-583-6742.

It is not necessary for you to fast for this test. Upon arrival to the laboratory, you'll be asked to drink a beverage containing a measured amount of glucose. It is important that you finish the drink within 5 minutes. Your blood will be drawn one (1) hour after you finish the drink.

3 HOUR GLUCOSE TOLERANCE – OB

Please call lab customer service for lab service center hours at 989-583-6742.

You will need to fast (no food or drink other than water & prescription medication) for at least eight (8) hours prior to arriving at the laboratory.

Upon arrival at the lab, your blood will be drawn for a fasting blood sugar level. You will be asked to drink a beverage containing a measured amount of glucose. It is important you finish the drink within 5 minutes.

We will draw your blood one hour after you finish the drink and every hour thereafter for the duration of the test at hours 2 and 3 depending what is ordered.

You will be required to remain in the lab reception area during the entire test and you may not eat, smoke or drink anything other than water until the last specimen has been collected. If you feel uncomfortable, dizzy or ill after drinking the beverage, please notify the lab staff. You may request to lie down during your wait.

Glucose Tolerance Test Preparation Diet

Please follow this diet for three (3) days prior to your test. It is important the entire diet is followed, however you may eat more food than what is on the list.

Breakfast		Lunch and Dinner	
Fruit Juice or Fruit	1/2 Cup or 1	Sugar or Jelly	2 Tablespoons
	Medium	Milk	1 Cup
		Choose 3 different or 3 times one	
Choose 3 different or 3 times one item:		item:	
Cereal cooked	1/2 Cup	Noodles, rice, spaghetti or potato	1/2 Cup
Cereal dry	3/4 Cup	Choose 1:	
Toast	1 Slice	Cooked Vegetable	1/2 Cup
1/2 bagel or 1/2 english muffin	1 Item	Raw Vegetable	3/4 Cup
Pancake, French toast or biscuit		Choose1: Pie, cake, ice cream or	1 Med Serving
		Cookies	1 or 2
Milk	1 Cup	Choose1: Juice, Pop, Cool-aid, Hi-C	
Jelly, sugar or syrup	1 Tablespoon	Hawaiian Punch	1 Cup