Testing for diabetes in pregnancy flowchart

(for women without known diabetes mellitus)

High risk women

Major clinical risk factors for overt diabetes/early GDM:

- Obesity (BMI >30)
- Previous GDM
- Polycystic ovarian syndrome
- Previous macrosomia
- High risk ethnic group
- Previous perinatal loss

Non high risk women

Early pregnancy diagnosis – initial pregnancy blood tests including random venous plasma glucose (RVPG) level**

Random venous plasma glucose (RVPG) ≥ 8.0 mmol/L - Offer 75 g Oral Glucose Tolerance Test (OGTT)

Early pregnancy diagnosis – 75 g OGTT for all high risk women and "non high risk" women with RVPG ≥ 8.0 mmol/L

Random venous blood glucose Level ≤ 7.9 mmol/L
Pregnancy care as woman has requested
Offer diagnostic OGTT at 26 – 28 weeks pregnant

If OGTT results
Fasting ≥ 5.5 mmol/L
And / or
2 hour ≥ 8.0 mmol/L

Refer to Gestational Diabetes Education Clinic and Obstetric Physicians/ Endocrinologists.
Pregnancy Care through Obstetric/ Midwifery Schedule, Antenatal Clinic MMH

If early OGTT results
Fasting ≤ 5.4 mmol/L
And
2 hour ≤ 7.9 mmol/L

Pregnancy care offered as woman has requested
Offer Oral Glucose Tolerance Test at 26 – 28 weeks of pregnancy

Universal 26 – 28 week 75 g OGTT (if not previously abnormal)

If OGTT results:
Fasting ≥ 5.5 mmol/L
And/or
2 hour ≥ 8.0 mmol/L
Refer to GDM education/obstetric medicine/ Endocrinology
Pregnancy care via obstetric/midwifery schedule, ANC, MMH

If OGTT values normal (Fasting ≤ 5.4 mmol/L and 2 hour ≤ 7.9 mmol/L)
Continue routine care

**** If random venous plasma glucose markedly elevated (e.g. > 15 mmol/L) at any stage, consider as very high likelihood of diabetes. Discuss urgently with treating team/obstetric medicine service for immediate care**

Mater Mothers' Hospital