Pregnancy Touch Point Algorithm #5B
Gestational Diabetes

Testing 2 step between 24-28 weeks gestation

2 step testing contraindicated/ not tolerated
— Yes → **Fingerstick glucose 4 times daily for 2 weeks**

Glucose screen 50gm glucola ->135 mg/dl requires step 2

Able to tolerate 50gm glucola
— No → **Jelly bean protocol** ℹ → **See Document TPA 5B Doc 1**
— Yes → **3 hr GTT** 100gm glucola

Criteria for diagnosis of Gestational diabetes use Carpenter/Coustan (plasma or serum glucose) values
Fasting- 95mg/dl
1hr-180mg/dl
2hr-155mg/dl
3hr-140mg/dl

1 abnormal value (excludes fasting)
— Yes → **Consider** -nutritional counseling -lifestyle modifications -exercise -reduced calorie intake
— No →

Abnormal fasting or 2 abnormal values
— Yes → **Criteria for diagnosis of gestational diabetes met**
— No → **Criteria for diagnosis for gestational diabetes NOT met. Continue Routine Care**

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Initial management:
-Nutritional counseling with diet plan
developed by registered dietician
-Education on glucose testing with
glucometer 4 times a day
-Exercise
-Limited weight gain based on initial BMI
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Target Glucose Control Values →
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Fasting <95mg/dl
1 hr post-prandial<140mg/dl
2hr post-prandial<120mg/dl
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Diet Plan Percentages →
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33-40% carbohydrates
20% protein
40% fat
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Target control met?

Yes →
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Diet controlled gestational diabetes
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No →
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Medication requiring gestational diabetes
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Alternate if Patient Declines Insulin

Preferred →
```
Insulin
```

```
Oral antidiabetic Medication
-Metformin 500mg daily (preferred)
-Glyburide 2.5-20mg daily (acceptable)
```

```
Antepartum testing not necessary in well
controlled patients (no consensus)
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```
Antepartum testing
Daily kick counts
Growth scans-28,32,36 weeks
Twice weekly testing with NST &
BPP beginning at 32 weeks
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```
Deliver
-Expectant management up to 41 weeks
```

Delivery Indicated →

EFW >4500gms? Yes → Recommend C-section

Well Controlled?

Yes → 40 weeks

No → 37 0/7 weeks to 38 6/7 weeks

EFW >4500gms? Yes → Recommend C-section