

Checklist for expectant mothers with gestational diabetes (GDM)

We understand that it can be overwhelming to be diagnosed with GDM, and so we would like to use this checklist to ensure that you have understood the information you have received from your midwife at the antenatal clinic.

Check the alternatives you would like to discuss further with your midwife.

At today's appointment at the antenatal clinic, you have received:

- Information about your results following a glucose tolerance test (OGTT).
- Information about how the blood glucose meter works and is used.
- Your blood glucose meter is personal and is not to be returned.
- Information about how often you should check your blood glucose level and the target reading.
- You must report your blood glucose readings every week. Plan telephone meetings with your midwife for the weeks you do not have any appointments.
- Do not forget to take your list of blood glucose readings to your midwife appointments.
- Information about diet and diet brochure. Referral to a dietician.
- Information about exercise, at least 30 minutes/day with a raised heart rate.

When it is time to give birth:

Do not forget to take your blood glucose meter, test strips and lancets.

After giving birth:

- Breast feeding is recommended for at least 3 months, which has positive health benefits for both you and your baby and also reduces the risk of developing type 2 diabetes later in life.
- Medication is most often stopped once your baby is born.
- Blood glucose tests at the maternity hospital as prescribed by the doctor.
- The doctor at the maternity hospital will send a referral to your health centre for follow-ups. If this has not been done, your midwife can provide a referral in conjunction with your postnatal check-up.
- Continue to watch your diet and exercise habits when you return home and, if necessary, you can ask for a new referral to a dietician.

Good luck!

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