

Checklist for those with gestational diabetes

We know that getting gestational diabetes can be overwhelming and we want to use this checklist to make sure that you have understood the information you have received from your midwife at the Midwifery Clinic.

During today's visit to the Midwifery Clinic, you have been informed of the following:

- Your results after sugar loading/glucose loading.
- Patient information on Gestational diabetes
- How the blood glucose meter works and is used.
- That your blood glucose meter is personal and is not returned.
- How often you should check your blood sugar and what is a target value.
- That your blood sugar levels should be reported to your midwife on a regular basis.
- Bringing your blood sugar list to every midwife visit.
- Patient information on Dietary recommendations for gestational diabetes. Referral to a dietician if necessary.
- Physical activity. The recommendation is 150 min/week of heart rate increasing exercise spread over at least three days/week. Referral to a physiotherapist if necessary.
- Patient information on Breast milk stimulation during pregnancy.

When you go to the maternity ward:

Remember to bring your blood glucose meter, strips, and lancets.

After childbirth:

- Breastfeeding is recommended for at least 3 months, which has positive health benefits for both you and your baby and reduces the risk of developing Type 2 diabetes later in life.
- Drug treatment is usually stopped when the baby is born.
- Blood sugar checks in the maternity ward as prescribed by the doctor.
- The doctor in the maternity ward writes a referral to your health centre for follow-up. If this has not been done, your midwife can write the referral in connection with the follow-up visit.
- Remember your diet and physical activity when you get home, and if necessary ask for a new referral to a dietician or physiotherapist.

Good luck!

Issued by the Maternal Health Care Unit, Region Stockholm.

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