DIABLO DIGESTIVE CARE 400 TAYLOR BLVD, SUITE 304 PLEASANT HILL. CA 94523 OFFICE: (925) 363-0069 FAX: (925) 363-0077

BREATH TESTING-PLEASANT HILL OFFICE

PRE-TESTING INSTRUCTIONS

ACTOSE MAI ARSORPTION

- AVOID ANTIBIOTIC THERAPY FOR AT LEAST 4 WEEKS BEFORE TEST
- 1 Day PRIOR TO TESTING:
 - AVOID INGESTION OF SLOWLY DIGESTING FOODS
 - BEANS, HIGH FIBER CEREALS, BRAN, ETC.
- FAST FOR 12 HOURS:
 - NO FOOD OR DRINK CONSUMPTION EXCEPT FOR WATER.
 - AVOID SMOKING, EXERCISING OR SLEEPING FOR AT LEAST 1 HOUR BEFORE YOUR TEST

*EACH BREATH TEST REQUIRES A SEPARATE TEST AND CANNOT BE PERFORMED ON THE SAME DAY.

APPT DATE & TIME

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FRUCTOSE MALABSORPTION:	APPT. DATE & TIME:
FRUCTAN MALABSORPTION:	APPT. DATE & TIME:
 EACH TEST REQUIRES 60 MINUTES DRINK: FOLLOWING SUBSTRATE 30 MINUTES BEFORE YOUR TEST & NOTHING ORALLY UNTIL TESTING COMPLETE 	
LACTOSE: 12 oz. of M	MILK (FAT CONTENT OF MILK DOES NOT MATTER)
FRUCTOSE: 12 OZ. OF APPLE JUICE OR 7-UP (NO DIET OR SUGAR-FREE)	
FRUCTAN: 1 FRUCTAN	PACKET MIXED IN 8 OZ. WATER
BACTERIAL OVERGROWTH: APPT. DATE & TIME:	

- TESTING REQUIRES 90 MINUTES
- DRINK:
 - o 1 LACTULOSE (KRISTALOSE 10 GM) PACKET IN 8 OZ. OF WATER
 - CONSUME 60 MINUTES BEFORE YOUR TEST & NOTHING
 ORALLY UNTIL TESTING COMPLETE