



PEDIATRIC
GASTROENTEROLOGY
CENTER

CELIA Z. PADRON, M.D., F.A.A.P.

A Lactose Malabsorption Test has been schedule for _____

Date: _____ M T W TH

Time: _____

Patient instructions and pre-conditions

1. The patient **should not have eaten slowly digesting foods like beans, bran, or other high cereals** the day before the testing
2. The patient should **fast for 12 hours**, with no food and only water to drink before testing
3. The patient should **not smoke, sleep, or exercise vigorously** for at least ½ hour before, or at any time during the test.
4. **No antibiotics for at least 7 days prior to the test.** Notify the technician at the time of the test if you have diarrhea the day before the test.

The test is composed of two visits. These instructions apply to the two visits needed for completion of the test.

FIRST VISIT (baseline)

This baseline breath sample **can be done without fasting** at the physician/Technician discretion providing that the baseline value is less that 5 ppm.

A breath sample will be collected and analyzed to establish the baseline for breath Hydrogen (H₂). **The H₂ baseline is typically less than 5**, a value greater than 5 may indicate not enough fasting time or the presence of bacterial overgrowth in the small intestine. (A separate test may be required if overgrowth of bacteria is suspected).

SECOND VISIT (Testing)

After the 12 hours fasting, drink _____ ounces of milk (**not lactose free milk.**)
The second sample of breath H₂ should be collected 3 hours after the ingestion of milk.
The patient needs to be at the office at least 2 ½ hours after drinking the milk, and notify the front desk of the time of milk ingestion to time the second breath sample accordingly.

THIS TEST REQUIRES A REFERRAL AND A COPAY