



Women's Medicine Collaborative

A program of The Miriam Hospital

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Small Intestinal Bacterial Overgrowth (SIBO) Test **Patient Instructions**

***Please bring photo identification and a list of ALL your medications and dosages.**

Test Date: _____ Appointment Time: _____ AM PM

You will have your test at: Women's Medicine Collaborative
146 West River Street, Providence, RI 02904
3rd Floor, Suite 11-D

What is this test?

This is a Hydrogen Breath Test to determine if you have an overgrowth of generalized bacteria found in the small intestine which might be a contributor to your symptoms. Glucose is a sugar that will be broken down if bacteria is present in the small intestine with hydrogen as the by-product.

What can I expect?

The test requires you to drink a 10 ounce bottle of sugared water. This is a refrigerated drink that comes in individual bottles.

You will breathe into a machine once before drinking the sugared water for a baseline measurement and then again every 15 minutes after drinking the sugared water. This test can take up to **2 hours**.

Can I take my medication before the test?

Critical medicines, such as insulin and those for your heart, blood pressure, breathing, or seizures, should be taken with sips of water on the morning of the test. Non-critical medicines, including supplements should not be taken, unless your physician or nurse has instructed you otherwise.

How do I prepare for the test? Please follow these instructions to ensure a successful test:

2 WEEKS BEFORE TEST

You must be off all antibiotics and Pepto-Bismol.
No colonoscopy or barium radiography testing.

2 DAYS BEFORE TEST

Eat a **Low Carbohydrate Diet (see next page)**. The purpose of this diet is to avoid foods that may produce gas in the intestinal tract, which can cause inaccurate test results.

12 HOURS BEFORE TEST

Do not eat or drink anything.

1 HOUR BEFORE TEST

No smoking. Including smokeless tobacco and second hand smoke for at least 1 hour before the test.
No sleeping. No vigorous exercise.

We have magazines and you are encouraged to bring anything to occupy your time during the test.

Please do not hesitate to call the office if you have any questions or concerns (401) 793-7080.

****LOW CARBOHYDRATE DIET****

	Allowed	Avoid
Grains / starches	Rice, quinoa, potato, oatmeal, corn tortillas, popcorn, gluten-free bread/crackers/pasta, Cereal: plain cheerios, plain rice/corn chex, corn flakes, rice krispies	Wheat products (including bread, pasta, crackers, cookies, cake, cereal, flour tortilla), rye, barley
Vegetables	Bell peppers (any color), carrots, chives, cucumber, eggplant, green beans, kale, lettuce, olives, parsnip, spinach, summer/winter squash, zucchini, tomato Limit to ½ cup portion: beets, butternut squash, broccoli, Brussels sprouts, corn, fennel bulb, green peas, sweet potato	Artichoke, asparagus, cauliflower, garlic, leeks, mushrooms, okra, onion/shallots, snow peas, sugar snap peas
Fruit	Banana, blueberry, cantaloupe, cranberry, grapes, honeydew, kiwi, lemon, lime, orange, papaya, pineapple, pomegranate, raspberry, strawberry	Apple, apricot, blackberry, cherry, dried fruit (raisins), grapefruit, mango, nectarine, pear, peach, plum, prunes, watermelon
Proteins	Meat, eggs, fish, tofu, most nuts (see "avoid" column), peanut butter, almond butter	Beans, hummus, edamame, cashews, pistachios
Dairy	<i>Lactose free</i> milk/yogurt/ice cream, rice milk; any aged or hard cheese (including cheddar, provolone, swiss, parmesan, feta, goat, etc)	Milk, yogurt, ice cream, cottage cheese, ricotta cheese, soy milk, almond milk
Beverages	Water, coffee, tea, sugar-free beverages (crystal light, diet pop)	Regular soda and other beverages with high fructose corn syrup
Sweeteners	Pure maple syrup, sugar substitutes (such as Stevia), table sugar	Agave, honey, high fructose corn syrup

****SAMPLE LOW CARBOHYDRATE DIET****

Day 1

Breakfast: 2 scrambled eggs and 1 banana

Lunch: salad with grilled chicken, tomato, cucumber, carrots, feta, balsamic vinegar + olive oil dressing

Snack: 1 cup fruit (such as blueberries and strawberries), small handful of peanuts or almonds

Dinner: Grilled chicken, baked potato, ½ cup steamed broccoli

Snack: 1 cup popcorn

Day 2

Breakfast: plain cheerios with lactose-free milk (such as Lactaid brand) or oatmeal with cinnamon and blueberries

Lunch: sandwich with turkey, cheese, lettuce, and tomato on gluten-free bread; plain potato chips or 1 orange

Snack: baby carrots and 1 cheese stick

Dinner: grilled salmon with lemon, brown rice or quinoa, sautéed zucchini and yellow squash

Snack: 1 cup grapes