



Classification	Laboratory Parameters			
	Fasting Glycemia*	OGTT** Glycemia	Random Blood Glucose	A1c Hemoglobina****
Normal Glycemia	< 100 mg/dL	< 140 mg/dL	–	–
Impaired Fasting Glycemia	≥ 100 mg/dL e < 126 mg/dL	< 140 mg/dL	–	–
Impaired Glucose Tolerance	< 126 mg/dL	≥ 140 mg/dL e < 200 mg/dL	–	–
Diabetes Mellitus	≥ 126 mg/dL	≥ 200 mg/dL	≥ 200 mg/dL	≥ 6,5%

OGTT: Oral Glucose Tolerance Test; Hemoglobin A1c: Glycated Hemoglobin.

ATTENTION: In the absence of unequivocal hyperglycemia, the diagnosis of Diabetes Mellitus should be confirmed by repeating the test at another time.

* Fasting is defined as the lack of caloric ingestion for, at least, 8 hours. The American Diabetes Association (ADA) and the International Diabetes Federation (IDF) consider that the normal cut-off value for Fasting Glycemia should be under 100 mg/dL.

** The Oral Glucose Tolerance Test (OGTT) should be performed in accordance with the procedure described by the WHO:

1. During the 3 days leading up to the test, your diet should include over 15g of carbohydrates per day.
2. Your meal on the night before the test should contain 30g to 50g of carbohydrates.
3. Fast for 8 to 14 hours; you are allowed to drink water.
4. You are allowed to smoke or walk during the test.
5. After the Fasting Glycemia sample collection, you will be given an oral dose of 75g of anhydrous glucose in 250ml to 300ml of water for 5 minutes.
6. The clock starts counting at the moment of ingestion.
7. The blood sample should be collected 2 hours after ingesting the anhydrous glucose.

*** For patients with classic symptoms of hyperglycemia (polyuria, polydipsia, unexplained weight loss).

**** Glycated Hemoglobin (Hemoglobin A1c) has been recommended by the IDF, the ADA and the EASD (European Association for the Study of Diabetes) as a diagnosis criterion since 2009; it was also approved by the WHO in 2011. The test should be performed in a laboratory using the method certified by the National Glycohemoglobin Standardization Program (NGSP).