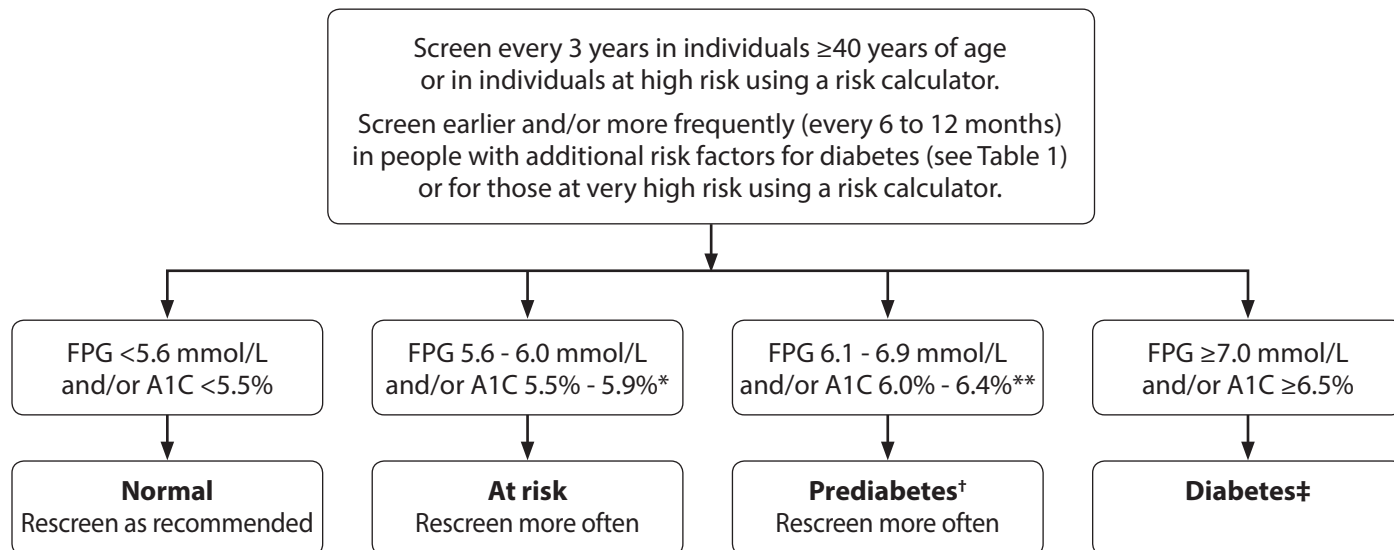




Appendix A: Screening Algorithm for Type 2 Diabetes in Adults

(adapted from Diabetes Canada with permission)¹

Note: an interactive form of this tool is available here: guidelines.diabetes.ca/ScreeningAndDiagnosis/Screening



If both FPG and A1C are available, but discordant, use the test that appears furthest to the right side of the algorithm.

*Consider 75 g OGTT if ≥ 1 risk factors; ** Consider 75 g OGTT (see Tables 3 and 5 in the Definition, Classification and Diagnosis of Diabetes, Prediabetes and Metabolic Syndrome chapter, p. S10 for interpretation of 75 g OGTT).

[†]Prediabetes = IFG or A1C 6.0 to 6.4% (see Table 5 in the Definition, Classification and Diagnosis of Diabetes, Prediabetes and Metabolic Syndrome chapter, p. S10).

[‡]In the presence of symptoms of hyperglycemia, a single test result in the diabetes range is sufficient to make the diagnosis of diabetes. In the absence of symptoms of hyperglycemia, if a single laboratory test result is in the diabetes range, a repeat confirmatory laboratory test (FPG, A1C, 2hPG in a 75 g OGTT) must be done on another day. It is preferable that the same test be repeated (in a timely fashion) for confirmation, but a random PG in the diabetes range in an asymptomatic individual should be confirmed with an alternate test. If results of two different tests are available and both are above the diagnostic cut points the diagnosis of diabetes is confirmed.

A1C, glycated hemoglobine; FPG, fasting plasma glucose; IFG, impaired fasting glucose