



Return Kit to Either Location:	
68 E 86th Street New York, NY 10028	32 Court Street, Suite 1407 Brooklyn, NY 11201
Phone: 212-996-6633	

AT-HOME HYDROGEN BREATH TESTING INSTRUCTIONS

Your doctor has requested that you do a hydrogen breath test for you to perform at home. This test will help your doctor diagnose small intestinal bacterial overgrowth (SIBO) and/or other conditions. Review these instructions NOW, and pick a day to do the test well in advance, so that you can follow all the instructions, including the diet and medication instructions on the following page, correctly.

If you have diabetes, please discuss this with the office staff in advance.

The test will last three hours. The test should be done first thing in the morning on an empty stomach, and before smoking or exercising. The test must be done all in one sitting.

You will drink a sugar solution and then collect breath samples every twenty minutes for three hours using the enclosed equipment. To perform the test, you must follow the enclosed instructions TO THE LETTER or the test results will be invalid.

You will use the kit you received from your doctor's office. The test kit contains breath collection equipment, a sugar solution (usually lactulose) and ten glass vials. After following the diet instructions (on the next page), you will fast from midnight for at least eight hours and perform the test in the morning before you have eaten or drank anything. You may take your regular medicines with a little water, except for medicines listed on the next page.

1. First, unpack the kit, and label each tube using the enclosed labels with your name, the date, and sample number. You should complete the labels before attaching them to any of the glass vials, including the times of each sample, to help organize yourself.
2. Collect the first breath sample before drinking the sugar solution, then drink the sugar solution. You may mix the sugar into eight ounces of water if desired.
3. Collect the next breath sample twenty minutes after drinking the sugar solution, and again every twenty minutes after that for three hours.
4. You should use a twenty-minute timer to remind you of when to take the next sample.

The manufacturer has supplied instructions on how to collect the breath samples, and you can follow those instructions. The staff will also use a demonstration kit when you receive your kit and instructions, and a video is available on-line for additional advice: www.youtube.com/watch?v=bs5LgJ6_A8w

Essentially, you will blow into the tube/bag apparatus, and WHEN THE BAG IS FULLY INFLATED, you will insert the collection tube all the way into the device to collect the sample WHILE YOU ARE STILL EXHALING. It helps to put the glass tube partially into the collection device before starting to exhale.

After you have collected your test samples, put them in the bubble-wrap and return them to the box. Write your name, date of birth, and NYGA doctor's name on the outside. Return the box to New York Gastroenterology Associates at either; 68 East 86th Street or 32 Court Street, Suite 1407 (NOT your doctor's office) Monday through Friday, from 9am to 3pm. The kit must be returned within fourteen days of collecting the sample or the test will be invalid.

You must complete and return the breath test kit within thirty days, or you will be charged a fee of \$50. **Unused tests cannot be returned for any reason.** NYGA will not assume the cost of postage or courier services. If you have any questions, please call our office at 212-996-6633.



Return Kit to Either Location:	
68 E 86th Street New York, NY 10028	32 Court Street, Suite 1407 Brooklyn, NY 11201
Phone: 212-996-6633	

To prepare for the test:

- No antibiotics for three weeks before the test.
- No colonoscopy or other bowel purge (e.g.: high colonic) for three weeks before the test
- No probiotics for at least one week before the test.
- No milk, ice cream, yogurt or other dairy products the day before the test, except small amounts of butter and hard cheese, such as cheddar or parmesan, until lunchtime. (See sample breakfast meal below.)
 - No “gassy” vegetables the entire day before the test. Examples of foods to avoid include:
 - Beans, lentils, split pea soups, edamame, hummus
 - Cabbage, cauliflower, broccoli, kale, Brussels sprouts
 - Bran (wheat) cereals
 - Fiber-enhanced bars, cereals, snacks (e.g., Fiber One, Halo Top)
- Have a high-protein, low fiber dinner the night before, which means minimal vegetable intake. A small amount of cooked carrots or spinach are OK. Examples include:
 - Hamburger or turkey burger with potatoes/fries, no bun
 - Chicken and white rice with small amount of spinach/carrots
 - Eggs or fish
- Other sample meal plans are on the next page.
- **Nothing to eat or drink after midnight.**

The day of the test:

- **Nothing to eat or drink.**
- Brush your teeth within 15 minutes of stating the test
- You may take your regular medications with a small amount of water, with the following exceptions:
 - Do not take anti-diarrhea or anti-spasmodic medicines like Imodium, Lomotil, Levsin, or Donnatal, or medications for constipation (eg Miralax, Linzess, Amitiza, senna, magnesium)
 - Do not take oral diabetes medicines (other than metformin)
 - Do not take “motility” medicines like Reglan, Motegrity, domperidone (Motilium), Amitiza, Linzess, Trulance, or magnesium supplements.
- Do not take pain medicines other than Tylenol, Motrin/Advil/ibuprofen, or Aleve/naproxen.
- Do not smoke or exercise before the test. Smoking and exercise can interfere with the results



Return Kit to Either Location:	
68 E 86th Street New York, NY 10028	32 Court Street, Suite 1407 Brooklyn, NY 11201
Phone: 212-996-6633	

Sample Meals for Day Before Test (Omnivore):

- Breakfast: Omelet with spinach/tomato, small amount parmesan or cheddar cheese, and sourdough toast with butter or nut butter
- Lunch: Turkey or tuna sandwich on white bread and a banana, or sushi rolls with miso soup
- Dinner should be high protein, low fiber which means minimal vegetable intake. Example: Chicken or fish with potatoes/fries, **small amount** of cooked carrots/zucchini/green beans

Sample Meals for Day Before Test (Vegan):

- Breakfast: Oatmeal with banana, nut butter, maple syrup
- Lunch: Sunshine plant-based burger with mustard or mayo, white potato wedges
- Snacks: Coconut yogurt, rice cakes with nut butter
- Dinner should be high in protein and low fiber, which means minimal vegetable intake. Example: Tofu, white rice, **small amount** of cooked green beans/carrots/spinach



Return Kit to Either Location:	
68 E 86th Street New York, NY 10028	32 Court Street, Suite 1407 Brooklyn, NY 11201
Phone: 212-996-6633	

PATIENT ATTESTATION, AT-HOME BREATH TESTING

1. I acknowledge that I been given written instructions for how to perform the breath test and been given a demonstration of how to use the equipment.
2. I acknowledge that I have thirty days to return the completed breath test kit to the NYGA Office at 68 East 86th Street New York, NY 10028, or 32 Court Street, Suite 1407, Brooklyn, NY 11201, otherwise I will be charged \$50 for the kit.

Printed Name: _____

Signature: _____

Date: _____