**Glycemic Index Test Protocol Checklist**

**Instruction**

Please complete all items below and attach document with submission form

**Protocol Title**……………..

**Principal investigator**……

**1. Participants**

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| 1.1 Number of healthy volunteer  [ ] Group of 5 for identical macronutrient composition but different flavors e.g. concentration of active ingredient  [ ] 10  If not as above, please state reason why……. |
| 1.2 Exclusion criteria cover *ALL* of the followings:   * known food allergy or intolerance * medications known to affect glucose tolerance * a known history of diabetes mellitus or the use of antihyperglycaemic drugs or insulin to treat diabetes and related conditions * a major medical or surgical event requiring hospitalization within the preceding 3 months; * the presence of disease or drug(s) which influence digestion and absorption of nutrients; * the use of steroids, protease inhibitors or antipsychotics (all of which have major effects on glucose metabolism and body fat distribution).   [ ] Cover all criteria  [ ] Not all. (Please state the reason……) |
| 1.3 Test conditions requirement for participants   1. NOT take food or drink other than water for *10 h or more* prior to the test; 2. NOT taking alcohol on the previous evening; 3. NOT having  vigorous exercise on the morning of the test.   [ ] ALL requirements are stated in protocol and participant information sheet  [ ] Not all (Please explain……) |

**2. Tested products**

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| **2.1 Reference food in the protocol**  [ ] Glucose solution prepared from anhydrous glucose powder (50 g/250 ml water)  [ ] Prepare fresh  [ ] Stored in a refrigerator and used within 72 hours  [ ] Dextrose (glucose monohydrate, 55 g);  [ ] Commercial solution used for the oral glucose tolerance test containing glucose (50 g); (Please specify commercial source……………….)  [ ] White bread or other specific carbohydrate food of consistent composition and GI.  Please specify commercial source of reference food (…………..…..) |
| **2.2 The reference food is tested in each subject at least two or three times on separate days within the immediate 3 month-period**  [ ] Yes  [ ] Two times [ ] Three times  [ ] No (Please explain…….) |
| **2.3 Product to be tested for GI**  2.3.1 Brief description………  Type of product  [ ] Commercial product in the market (Specify….)  [ ] Product under development |
| 2.3.2 Detail of product and preparation for testing provided in separate document  [ ] Provided  [ ] Not provided (State the reason…..) |
| 2.3.3 Carbohydrate portion of the test food  [ ] 50 g of glycaemic carbohydrate and consumable within the time frame of 12 min to 15 min  [ ] 25 g of glycaemic carbohydrate because the bulk of food providing 50 g is unreasonably large  [ ] Less than 10 g glycaemic carbohydrate per regular serving ( This should not be tested for GI. If tested, state the reason why…….) |
| 2.3.4 Test product prepared with milk  [ ] Yes (as milk may influences the final GI of some products, please state the reason why………)  [ ] No |

**3. Experimental procedure**

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| 3.1 Blood samples for  3.1.1 measuring fasting glucose  [ ] Finger prick (prefer) [ ] Venous blood  [ ] Two samples taken within 5 min.  If not, please explain……….  3.1.2 GI Determination  [ ] 6 samples shall be taken at 15 min, 30 min, 45 min, 60 min, 90 min, and 120 min  [ ] More or less (Please explain………) |
| 3.2 Taking food  [ ] Within 12-15 min  [ ] Other………. |
| 3.3 Food preparation  [ ] in 250-500 ml water  [ ] in 250-500 ml coffee or tea (adding 30 ml milk and non-nutritive sweetener is acceptable) |

**4. Blood glucose analysis**

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| 4.1 Analytical method  [ ] Spectrophotometry  [ ] Electrochemical detection-coupled enzyme systems  *Note: small glucometer devices used for self-blood glucose monitoring have published analytical CVs above 3,6 % and are therefore not suitable for GI testing* |
| 4.2 Reference laboratory  ……………………. |

This checklist is prepared by Office of Research Ethics, Research Institute for Health Science, CMU, using ISO 26642:2010(E) as the reference.