Supplementary Material

Endocrinologists/Diabetologists

Table S1: Additional Endocrinologist/Diabetologist-Reported SMBG Schedules for Lifestyle-Managed GDM

Other (please specify)	Count
2 readings (pre and post) per day	1
Alternate day, 4 points one Fasting and 3 post meal	1
Daily minimum 2 reading	1
FBG & 1 Post meal alternate days	1
Fbs and 1 hr post each meal	1
One blood sugar each day out of FPG and three PP	1
Twice a week FBG & PPG	1
Two times per day, paired pre-meal and post-meal testing, at different times of the day	1
Total	8

Table S2: Additional Endocrinologist/Diabetologist-Reported SMBG Schedules for GDM Patients on Insulin or Oral Antidiabetic Drugs

Other (please specify)	Count
4 times 1-4 days/week depending on glycemic status	1
6 time a day	1
As high as 6 times a day in patients on MDI therapy	1
Depends on patient profile	1
Every month fasting and pp	1
Fasting and Paired testing	1
Fasting and three post prandial, two days a week	1
FBG & 3 PP Values every 3 days	1
Fbs and 1 hr post each meal	1
Four times (Daily or alternate depending on the patient type)	1
Mostly paired testing, more frequently in patients with poor control	1
One fasting blood glucose (FBG) and three postprandial values at least once a week	1
Total	12

Table S3: Additional Endocrinologist/Diabetologist-Reported Challenges in SMBG for GDM Management

Other (please specify)	**Count**
Cost associated with blood glucose monitoring devices and strips	27
Did not specify anything	5
Total	32

Table S4: Endocrinologist/Diabetologist-Reported Postpartum Glucose Monitoring Practices After GDM

Recommendation	**Count**
Incomplete/inconclusive/no response	69
individualized follow-up	65
6 weeks postpartum	34
need to check patient	10
Once a week	11
Yearly monitoring	3
Three monthly	7
1 month	6
Lifestyle modifications, rest, medicines	13
6-12 weeks postpartum	4
6–12 weeks after delivery, then every 1–3 years if normal.	2
1 fasting 3 post meal / week	1
1month follow by6months once	1
2 times out of 5	1
2 weekly visit	1
4 times	1
4 times a week	1
6 months interval or frequently if family history of diabetes and overweight	1
6–12 weeks postpartum If normal, every 3 years if impaired fasting glucose or elevated 2-hour glucose, annually	10
7 times a day atleast one week..2 times compulsory daily	1
75 g OGTT or HBA1C after 6 weeks	1
OGTT 4 to 6 weeks after their delivery date	8
Alternate fasting and Post for some time	1
At 6 -7 week OGTT or FBG & PPG	1
At 6 week OGTT Or every 6 to 12 month FPG & HBA1c	1
At least 4 tests in every week.	1
Atleast once in two week (FBG & PPG)	1
Blood Serum along with 1 Fasting & 1 PP in a month	1

Check up on Blood glucose after one week and follow up till six months	1
checks Patient blood sugar after delivery and again in 6 to 12 weeks	8
Depend upon different patient types .Generally 2 test per week.	1
Do one fasting and PP if normal no further testing for next 6 weeks	1
Fasting and PPBS once in first month then after 3 months accompanied by an hba1c	1
Fasting and post prandial 2 hrs	1
First at 6weeks and 12 weeks , if normal then annual ly	1
First monitoring at 6 weeks followed by twice a year	1
For patients with a history of gestational diabetes mellitus (GDM), postpartum blood glucose monitoring is typically recommended at 4-12 weeks after delivery.	1
GDM patient to be checked fasting and PP after 6 to 8 weeks postpartum and then every three months with HBA1c	1
OGTT at 6-12 weeks postpartum. If the results are normal, further monitoring is recommended every 1-3 years	1
If HbA1c is normal postpartum then , follow every 3 months ,with some smbg reading	1
If postpartum 6 weeks OGTT is in prediabetes is higher then every week otherwise once in 3 month	1
If postpartum BG is normal then OGTT after 4 weeks and if hyperglycemia persists then SMBG frequency depends on the level of hyperglycemia	1
If the initial OGTT is normal, the ADA and ACOG recommend ongoing glucose monitoring every 1 to 3 years to monitor for the development of type 2 diabetes.	1
After 6 weeks, and every 6 months if normal. If sugars are high at any point, then treat as Type2 diabetes.	1
Immediate postpartum, followed by quarterly monitoring	1
monitoring is a one-time screening at 4 to 12 weeks postpartum	1
OGTT at 6 and 12 weeks and then yearly FBS, PPBS HbA1C	1
Once in 2 months	1
Once in 6months	1
once in a 2months.	1
One-time screening should be performed at 24 weeks of gestation or after.	4
OGTT at 4 to 12 weeks post partum, (2) discussion of lifestyle and pharmacologic interventions to prevent diabetes development	9
Periodically every 15 days	1
Pre meal values, for initial two days of hospitalization, if that is normal, FBS, PPBS & HbA1c at 6 weeks to 12 weeks..	1
Repeat at least 6 months postpartum to confirm the diagnosis of diabetes regardless of the type of initial test	1
Screen at least every 3 years for a minimum of 10 years after pregnancy	1
Should atleast do HbA1c every 3 months for a year and then yearly.	1
SMBG for a week followed by lab results after 3 weeks	1
Smbg once daily	1
Three months postpartum and yearly thereafter, if normal at three months	1
within 6 months	1

Twice in month	1
Weekly once FBS,PPBS for 3 months	1
You should have a blood test to check for diabetes 6 to 13 weeks after giving birth	1
Total	311

Gynecologists

Table S5: Additional SMBG Frequency Schedules Suggested by Gynecologists for Lifestyle-Only GDM

Other (Please Specify)	**Count**
6 times daily, 3 pre meal and 3 post meal values	1
Alternate day PP and fasting	1
Alternative day PP and fasting	1
As directed by diabetologist	1
Check HbA1c monthly	1
depends	1
depends on diet, test results and other medicines	1
Depends on patient condition	1
Depends on patient to patient	1
Depends on the patient condition	1
Depends on the patients condition	1
I do not recommend SMBG at home	1
I do not recommend self monitoring in all cases	1
I provide the chart	1
I try not to recommend self monitoring	1
if the sugar is in borderline, then weekly, but if control is poor then HbA1c is done monthly	1
It is not same for all, can’t choose anyone	1
monthly	2
Monthly, it depends on patients condition, other co-morbidities	1
No SMBG is recommended, I call for follow up visit monthly	1
once in a month, varies patient to patient	1
One Fasting Blood Glucose (FBG) and three postprandial readings at least twice a week	1
One Fasting Blood Glucose once a month	1
Postprandial 3 times a week	1
Twice a week at least ,1 fasting and 3 pp readings	1
Twice everyday	1
Varies patient to patient and control	1
we refer to endocrinologist	1
Weekly after 36 weeks before that 2 week once	1
Total	30

Table S6: Additional SMBG Frequency Schedules Suggested by Gynecologists for Insulin- or OAD-Treated GDM

Other (Please Specify)	Count
4 readings every third day in controlled patient	1
7 times a day	1
7 times, 3 pre meal 3 post meal and 1 during bedtime	1
alternate day pattern depending on patient convenience	1
as directed by diabetologist	1
As per diabetologist	1
BD, one before breakfast and one before dinner. If insulin is 3 times, then thrice before meal	1
Daily not feasible once it is controlled, varies patient to patient, depending on dosage	1
Depends	2
Depends on the patient condition	1
FBS and PPBS weekly after 36 weeks before that 2 weeks once	1
Follow what is Recommended by Endocrinologist or Diabetologist	1
I do not recommend SMBG at home	1
I refer to diabetologist	1
i refer to diabetologist and ask the patient to go by his prescription	1
no recommendation	1
once a week	1
Once in 15 day pp1 and pp2	1
Once in 15 Days	1
One FBG & One Postprandial in every 3 days	1
pre and post meal check daily	1
thrice everyday	1
Twice Postpradial per day	1
we refer to endocrinologist	1
Weekly	1
Weekly is enough	1
Weekly SMBG	1
Weekly twice pre and post	1
Total	29

Table S7: Additional Gynecologist-Reported Challenges in Implementing SMBG Among GDM Patients

Other (Please Specify)	Count
All	1
All of above	1
All of the above	1
all of the options mostly	1
All the above	2
All, they are much involved	1
None	7
None, I educate them and tell them the consequences of not doing it	1

Patients maintain SMBG frequency	1
varies from patient to patient	1
varies patient to patient	1
venous and capillary blood glucose levels are not exactly the same.	1
Total	19

Table S8: Postpartum Glycemic Monitoring Practices Recommended by Gynecologists After GDM

Recommendation	**Number of Respondents (n)**
OGTT at 6–12 weeks postpartum	116
HbA1c every 6 months	42
OGTT at 6 weeks	18
HbA1c every 3 months	8
Non-specific testing at 6 weeks postpartum	8
Combination: OGTT at 6–12 weeks + HbA1c every 6 months	7
Inconclusive / unclear response	5
Patient-tailored approach	4
Referral to endocrinologist/diabetologist	3
Yearly testing	3
OGTT at 6 weeks + HbA1c annually	3
Once a week initially	2
Single 12-week test	1
OGTT after 1.5 months postpartum	1
OGTT at 12 weeks	1
OGTT at 16–20 weeks	1
OGTT within 6 months	1
OGTT at 6–12 weeks + annual monitoring	1
OGTT at 6–12 weeks + refer to endocrinologist	1
OGTT at 6–12 weeks + HbA1c every 6 months + annual screening	1
OGTT at 6 weeks + HbA1c as per control	1
OGTT & HbA1c at 6 weeks	1
OGTT at 12 weeks + HbA1c later as per findings	1
HbA1c every 3 months initially, then every 6 months	1
HbA1c every 3 months initially, then yearly	1
HbA1c monthly	1
HbA1c at first visit, then PP weekly if elevated	1
HbA1c at 6 weeks, then individualized	1
Fasting & postprandial glucose within 24 h post-delivery, then weekly if normal	1
Fasting & postprandial glucose every 4 h post-delivery, then 6-month follow-up	1
Fasting & postprandial glucose at 12 weeks	1
Fasting & postprandial glucose at 40–42 days postpartum	1
Fasting blood glucose after 10 days postpartum	1
Fasting & postprandial glucose after 48 hours	1
Fasting & postprandial glucose monthly or fortnightly (based on	1

control)	
Fasting blood glucose and postprandial at 1 week postpartum	1
Fasting blood glucose and postprandial at postpartum day 4	1
FBS & PP before discharge and at 6 weeks	1
FBS, PP, HbA1c at 6 weeks postpartum	1
FBS and PPBS at 6-month intervals	1
FBS and PPBS post 6 weeks + SMBG	1
FBS & OGTT early postpartum, then repeat later	1
SMBG after 15 days	1
SMBG at least 3 times weekly	1
SMBG regularly	1
SMBG depending on patient control	1
SMBG + HbA1c	1
Testing every 3 months	1
Postnatal check at 6 weeks with FBG and HbA1c	1
Regular fasting and PP if poor control + HbA1c at 3 months	1
When patient follows up: fasting & PP, then annually	1
Total	277