

# List of variables from AusDiab 1999-2000



DATABASE	VARIABLE NAME	VARIABLE DESCRIPTION
Data Record	id	BARCODE
Data Record	drsex	SEX
Data Record	drdate	TODAY'S DATE
Data Record	drage	AGE
Data Record	drdob	DATE OF BIRTH
Data Record	drhrs	HOURS SINCE LAST FOOD OR DRINK
Data Record	drdiab	HAVE YOU EVER BEEN TOLD BY A DOCTOR OR NURSE THAT YOU HAVE DIABETES?
Data Record	drtrt	WHAT TREATMENT ARE YOU CURRENTLY RECEIVING?
Data Record	drpreg	ARE YOU PREGNANT?
Data Record	drurine	URINE SAMPLE COLLECTED?
Data Record	drfastgl	FASTING SAMPLE TAKEN?
Data Record	drgluclo	GLUCOSE LOAD GIVEN?
Data Record	drglucti	TIME OF GLUCOSE LOAD
Data Record	dr2hour	2 HOUR SAMPLE TAKEN?
Data Record	dr2hourt	TIME OF 2 HOUR SAMPLE
Data Record	drwhobsi	WASTE/HIP OBSERVER ID
Data Record	drwaist1	WAIST MEASURE 1 (cm)
Data Record	drhip1	HIP MEASURE 1(cm)
Data Record	drwaist2	WAIST MEASURE 2 (cm)
Data Record	drhip2	HIP MEASURE 2 (cm)
Data Record	drwaist3	WAIST MEASURE 3 (cm)
Data Record	drhip3	HIP MEASURE 3 (cm)
Data Record	drheight	HEIGHT (cm)
Data Record	drweight	WEIGHT (kg)
Data Record	drbioobs	BIOIMPEDENCE OBSERVER ID
Data Record	bioweigh	WEIGHT (kg) USING BIOIMPEDANCE MACHINE
Data Record	drimped	IMPEDANCE
Data Record	drfatper	FAT PERCENTAGE (%)
Data Record	drfatmas	FAT MASS (kg)
Data Record	drlbm	LEAN BODY MASS (kg)
Data Record	drtbw	TOTAL BODY WATER
Data Record	drbpobsi	BLOOD PRESSURE OBSERVER ID
Data Record	drpulse	PULSE RATE (60 SECONDS)
Data Record	drsyst1	SYSTOLIC OBSERVATION 1
Data Record	drdiast1	DIASTOLIC OBSERVATION 1
Data Record	drsyst2	SYSTOLIC OBSERVATION 2
Data Record	drdiast2	DIASTOLIC OBSERVATION 3

Data Record	drsyst3	SYSTOLIC OBSERVATION 3
Data Record	drdiast3	DIASTOLIC OBSERVATION 3
Data Record	drecg	ECG PERFORMED?
Data Record	drsf36	SF36 (GENERAL HEALTH AND WELL BEING QUESTIONNAIRE) COMPLETED?
Data Record	drngenq	GENERAL MEDICAL QUESTIONNAIRE COMPLETED?
Data Record	drngenqob	GENERAL MEDICAL QUESTIONNAIRE OBSERVER ID
Data Record	drhka	HKA (HEALTH KNOWLEDGE, ATTITUDES AND PRACTICES QUESTIONNAIRE) COMPLETED?
Data Record	drhkaobs	HKA OBSERVER ID
Data Record	drdietq	DIETARY QUESTIONNAIRE COMPLETED?
Data Record	stratum	STRATUM (DIVIDED BY AGE GROUP, SEX, CD)
Data Record	wtdrclin	AUSTRALIAN POPULATION WEIGHTING VARIABLE FOR DATA RECORD (PHYSICAL EXAMINATION)
Data Record	systolic	SYSTOLIC BLOOD PRESSURE (AVG. OF LAST 2 MEASURES)
Data Record	diastoli	DIASTOLIC BLOOD PRESSURE (AVG. OF LAST 2 MEASURES)
Data Record	bmi	NORMAL, OVERWEIGHT OR OBESE BASED ON BMI
Data Record	agegrp	AGE GROUP (25-34, 35-44, 45-54, 55-64, 65-74, 75+)
Data Record	diabstat	Plasma Diabetes Status
Data Record	exercise	EXERCISE STATUS - 1 'Sedentary' 2 'Insufficient' 3 'Sufficient'
Data Record	state	STATE (1=VIC 2=WA 3=NSW 4=TAS 5=SA 6=NT 7=QLD)
Data Record	systgrp	is your systolic blood pressure over 140 mmHg?
Data Record	diastgrp	is your diastolic blood pressure over 90mmHg?
Data Record	hypprev	TOTAL HYPERTENSION (INCLUDES >140/90 AND THOSE ON TABLETS FOR HYPERTENSION)
Data Record	hyperttr	UNTREATED HYPERTENSIVE AND TREATED FOR HYPERTENSION
Data Record	trigprev	TRIGLYCERIDES >=2.0 mmol/l
Data Record	ldlprev	LDL >=3.5mmol/l
Data Record	hdlprev	HDL <1.0mmol/l
Data Record	cholprev	CHOLESTEROL >= 5.5 mmol/l
Data Record	lipidot	Total lipid abnormalities (INCLUDES ABNORMAL FOR TRIG,CHOL,HDL,LDL OR TABLETS)
Data Record	smokstat	SMOKING STATUS (CURRENT, EX OR NON-SMOKER)
Data Record	waistot	WAIST CIRCUMFERENCE STATUS - NORMAL, OVERWEIGHT OR OBESE (COMBINED MALE AND FEMALE)
Data Record	waistfe	WAIST CIRCUMFERENCE STATUS - NORMAL, OVERWEIGHT OR OBESE (FEMALE CRITERIA ONLY)
Data Record	waistma	WAIST CIRCUMFERENCE STATUS - NORMAL, OVERWEIGHT OR OBESE (MALE CRITERIA ONLY)
Household Data	hh_id	Household ID - With Resp No (Surveycraft)
Household Data	state	State (1=Vic 2=WA 3=NSW 4=Tas 5=SA 6=NT 7=Qld)
Household Data	barcode	ID Bar Code
Household Data	id	Case ID (SurveyCraft) - for matching up to actual paper questionnaire
Household Data	resp_t	Response Testing - Appointment made or not (1=yes 2=no)
Household Data	age	Q2 Age

Household Data	sixmonth	Q3 At address for more that 6 months
Household Data	eligibil	Q4 Eligibility
Household Data	gender	Q5 Gender
Household Data	d_o_b	Q6 Date of Birth
Household Data	maritals	Q7 Marital Status
Household Data	educatio	Q8 Education
Household Data	abor_tsi	Q9 Aboriginal/TSI Origin
Household Data	countryb	Q10 Country of Birth
Household Data	yeararri	Q11 Year of arrival
Household Data	language	Q12 - Language spoken (combined for q12)
Household Data	english	Q12 Language - English
Household Data	italian	Q12 Language - Italian
Household Data	greek	Q12 Language - Greek
Household Data	cantones	Q12 Language - Cantonese
Household Data	mandarin	Q12 Language - Mandarin
Household Data	lanother	Q12 Language - Other
Household Data	q13_slog	Q13 Aware of Slogan "defuse diabetes"?
Household Data	q14_diab	Q14 Ever told have Diabetes
Household Data	q15_aget	Q15 Age Told
Household Data	q16_dbty	Q16 Type of Diabetes
Household Data	q17_suga	Q17 Ever told have high sugar levels
Household Data	q18_aget	Q18 Age Told had high sugar levels
Household Data	q19_have	Q19 Currently have diabetes/high sugar levels?
Household Data	q20_trea	Q20 Treatment Currently having
Household Data	q21_inja	Q21 Age started having injections
Household Data	q22_hvdb	Q22 Suspect currently have - Diabetes
Household Data	q22_hvsu	Q22 Suspect currently have - High sugar level in blood/urine
Household Data	q22_hvno	Q22 Suspect currently have - Neither
Household Data	q22_diab	Q22 Do you suspect you currently have Diabetes, high sugar or neither - combined
Household Data	q23_dbte	Q23 Ever tested for Diabetes/High sugar levels
Household Data	q24_last	Q24 Time since last test
Household Data	respinte	Response to interview
Household Data	app_date	Appointment Date
Household Data	app_time	Appointment Time
Household Data	respchek	Response to Health Check
Household Data	reasonna	Reason for non attendance
Household Data	agegrp	AGE GROUP (25-34, 35-44, 45-54, 55-64, 65-74, 75+)
Household Data	countryg	Country Group
Household Data	stratum	STRATUM (DIVIDED BY AGE GROUP, SEX, CD)
Household Data	wthhint	AUSTRALIAN POPULATION WEIGHTING VARIABLE FOR HOUSEHOLD INTERVIEW
Biochemical Results		BARCODE
Biochemical Results	sex	gender

Biochemical Results	dob	DATE OF BIRTH
Biochemical Results	sdte	DATE OF TESTING
Biochemical Results	fbg	FASTING PLASMA BLOOD GLUCOSE (mmol/L)
Biochemical Results	plg	POST LOAD PLASMA GLUCOSE (mmol/L)
Biochemical Results	creat	CREATININE
Biochemical Results	fibr	FIBRINOGEN
Biochemical Results	chol	TOTAL CHOLESTEROL
Biochemical Results	hdl	HIGH DENSITY LIPIDS
Biochemical Results	ldl	LOW DENSITY LIPIDS
Biochemical Results	ldl_hdl	LDL to HDL Ratio
Biochemical Results	trig	TRIGLYCERIDES
Biochemical Results	malb	MICROALBUMIN
Biochemical Results	ucr	Urine CREATININE
Biochemical Results	macr	MICROALBUMIN/CREATININE RATIO
Biochemical Results	ua	Uric Acid
Biochemical Results	uprotein	Urine Protein
HBA1c	barcode	BARCODE
HBA1c	hba1c	HBA1C
Diabetes Complications Survey	id	BARCODE
Diabetes Complications Survey	dcobsid	DIAB COMP OBSERVER ID
Diabetes Complications Survey	dc1	HAVE YOU EVER HAD A FOOT ULCER?
Diabetes Complications Survey	dc3	HOW LONG AGO WAS THE ULCER?
Diabetes Complications Survey	dc4	DO YOU GET PAIN IN LEGS OR FEET?
Diabetes Complications Survey	dc5a	BURNING/NUMB/TINGLING
Diabetes Complications Survey	dc5b	ACHING/CRAMP-LIKE/TIRED
Diabetes Complications Survey	dc5c	OTHER
Diabetes Complications Survey	dc6	WHEN IS THE PAIN THE WORST?
Diabetes Complications Survey	dc7	DOES THE PAIN EVER WAKE YOU AT NIGHT?
Diabetes Complications Survey	dc8a	WALKING
Diabetes Complications Survey	dc8b	STANDING
Diabetes Complications Survey	dc8c	SITTING DOWN OR LYING DOWN
Diabetes Complications Survey	dc8d	OTHER (INCLUDING MEDICATION)

Diabetes Complications Survey	dc9	WHERE DO YOU GET PAIN OR DISCOMFORT?
Diabetes Complications Survey	dc10	DO YOU EVER GET PAIN IN YOUR LEGS WHEN YOU WALK?
Diabetes Complications Survey	dc11	DOES THE PAIN EVER BEGIN WITH STANDING STILL OR SITTING?
Diabetes Complications Survey	dc12	DO YOU GET PAIN WALKING UPHILL OR HURRYING?
Diabetes Complications Survey	dc13	WHAT HAPPENS TO THE PAIN IF YOU STAND STILL?
Diabetes Complications Survey	dc14	IS THERE A CROSS IN EITHER OF THE SHADED AREAS?
Diabetes Complications Survey	dc15	IS THERE A FOOT ULCER PRESENT?
Diabetes Complications Survey	dc17left	ANKLE REFLEXES (LEFT)
Diabetes Complications Survey	dc17right	ANKLE REFLEXES (RIGHT)
Diabetes Complications Survey	dcviblef	VIBRATION (LEFT)
Diabetes Complications Survey	dcvibrig	VIBRATION (RIGHT)
Diabetes Complications Survey	dcppleft	PIN PRICK (LEFT)
Diabetes Complications Survey	dcppright	PIN PRICK (RIGHT)
Diabetes Complications Survey	dctemple	TEMPERATURE (LEFT)
Diabetes Complications Survey	dctempri	TEMPERATURE (RIGHT)
Diabetes Complications Survey	dc17tota	TOTAL SCORE (DC17)
Diabetes Complications Survey	dcgtlef	GREAT TOE (LEFT)
Diabetes Complications Survey	dcgrigh	GREAT TOE (RIGHT)
Diabetes Complications Survey	dc1left	1ST MET HEAD (LEFT)
Diabetes Complications Survey	dc1right	1ST MET HEAD (RIGHT)
Diabetes Complications Survey	dc5left	5TH MET HEAD (LEFT)
Diabetes Complications Survey	dc5right	5TH MET HEAD (RIGHT)
Diabetes Complications Survey	dc18tota	TOTAL SCORE PRESSURE PERCEPTION (DC18TOT)
Diabetes Complications Survey	dc19arm1	ARM PRESSURE 1
Diabetes Complications Survey	dc19arm2	ARM PRESSURE 2
Diabetes Complications Survey	dc19ank1	ANKLE PRESSURE 1

Survey		
Diabetes Complications Survey	dc19ank2	ANKLE PRESSURE 2
Diabetes Complications Survey	dc20sysl	SYSTOLIC BP LYING DOWN
Diabetes Complications Survey	dc20dial	DIASTOLIC BP LYING DOWN
Diabetes Complications Survey	dc20syss	SYSTOLIC BP STANDING
Diabetes Complications Survey	dc20dias	DIASTOLIC BP STANDING
Diabetes Complications Survey	dcfing	FINGER PRICK GLUCOSE COMPLETED?
Diabetes Complications Survey	dcfootqu	FOOT QUESTIONS
Diabetes Complications Survey	dcfootex	FOOT EXAMINATION
Diabetes Complications Survey	dcretina	RETINAL PHOTOGRAPHY
Diabetes Complications Survey	dcbpstan	STANDING BP
Diabetes Complications Survey	comments	COMMENTS REGARDING MISSING RESULTS
Diabetes Complications Survey	site	SITE OF FOOT ULCER
Diabetes Complications Survey	cause	CAUSE OF FOOT ULCER
Diabetes Knowledge Questionnaire	id	BARCODE
Diabetes Knowledge Questionnaire	dr_diabq	DIABQUEST OBSERVER ID
Diabetes Knowledge Questionnaire	dq1a	NONE
Diabetes Knowledge Questionnaire	dq1b	INSULIN
Diabetes Knowledge Questionnaire	dq1c	TABLETS
Diabetes Knowledge Questionnaire	dq1d	CHANGE DIET
Diabetes Knowledge Questionnaire	dq1e	EXERCISE
Diabetes Knowledge Questionnaire	dq1f	LOSE WEIGHT
Diabetes Knowledge Questionnaire	dq1g	OTHER
Diabetes Knowledge Questionnaire	dq2	HOW WELL IS YOUR DB CONTROLLED (LAST YEAR)?
Diabetes Knowledge Questionnaire	dq3	HOW WELL IS YOUR DB CONTROLLED (LAST WEEK)
Diabetes Knowledge Questionnaire	dq4a	TOOTH DECAY

Questionnaire		
Diabetes Knowledge Questionnaire	dq4b	BREATHING PROBLEMS
Diabetes Knowledge Questionnaire	dq4c	EARLY DEATH
Diabetes Knowledge Questionnaire	dq4d	CANCER
Diabetes Knowledge Questionnaire	dq4e	HEART DISEASE
Diabetes Knowledge Questionnaire	dq4f	PAINFUL JOINTS
Diabetes Knowledge Questionnaire	dq4g	EYE TROUBLE/BLINDNESS
Diabetes Knowledge Questionnaire	dq4h	LIVER PROBLEMS
Diabetes Knowledge Questionnaire	dq4i	KIDNEY PROBLEMS
Diabetes Knowledge Questionnaire	dq4j	HEARTBURN/INDIGESTION
Diabetes Knowledge Questionnaire	dq4k	NERVE DAMAGE
Diabetes Knowledge Questionnaire	dq4l	COLDS AND FLU
Diabetes Knowledge Questionnaire	dq4m	GANGRENE/AMPUTATION
Diabetes Knowledge Questionnaire	dq4n	BACK PROBLEMS
Diabetes Knowledge Questionnaire	dq4o	IMPOTENCE (MEN)
Diabetes Knowledge Questionnaire	dq4p	PROBLEMS DURING PREGNANCY (WOMEN)
Diabetes Knowledge Questionnaire	dq4q	SKIN CANCER
Diabetes Knowledge Questionnaire	dq4r	DIFFICULTY HEARING
Diabetes Knowledge Questionnaire	dq5	EVER BEEN SHOWN HOW TO TEST BLOOD SUGAR?
Diabetes Knowledge Questionnaire	dq6	EVER BEEN SHOWN HOW TO TEST URINE SUGAR?
Diabetes Knowledge Questionnaire	dq7	METHOD MAINLY USED FOR TESTING?
Diabetes Knowledge Questionnaire	dq8	EVER TESTED FOR SUGAR IN BLOOD OR URINE?
Diabetes Knowledge Questionnaire	dq9	HOW OFTEN HAVE YOU TESTED SUGAR LEVELS IN PAST MONTH?
Diabetes Knowledge Questionnaire	dq10	DO YOU WRITE DOWN TEST RESULTS?
Diabetes Knowledge Questionnaire	dq11	WITH WHICH TEST DO YOU MOST OFTEN MONITOR DB?
Diabetes Knowledge Questionnaire	dq12	OVER THE PAST MONTH, URINE TESTS WERE MOSTLY?

Diabetes Knowledge Questionnaire	dq13	OVER PAST MONTH, BLOOD TESTS WERE MOSTLY?
Diabetes Knowledge Questionnaire	dq14	EVER HEARD OF HAEMOGLOBIN A ONE C
Diabetes Knowledge Questionnaire	dq15	NO. TIMES IN LAST YEAR THAT A ONE C WAS CHECKED?
Diabetes Knowledge Questionnaire	dq16a	RETINOPATHY/TROUBLE WITH BACK OF EYES
Diabetes Knowledge Questionnaire	dq16b	KIDNEY DISEASE
Diabetes Knowledge Questionnaire	dq16c	NERVE DAMAGE
Diabetes Knowledge Questionnaire	dq16d	GANGRENE
Diabetes Knowledge Questionnaire	dq16e	HEART DISEASE
Diabetes Knowledge Questionnaire	dq16f	STROKE
Diabetes Knowledge Questionnaire	dq16g	IMPOTENCE (MEN)
Diabetes Knowledge Questionnaire	dq16h	POOR CIRCULATION
Diabetes Knowledge Questionnaire	dq17	TIMES ADMITTED TO HOSPITAL B/C OF ABOVE CONDITIONS
Diabetes Knowledge Questionnaire	dq18	WITH UNTREATED DB, BLOOD SUGAR IS?
Diabetes Knowledge Questionnaire	dq19	THE NORMAL RANGE FOR BLOOD GLUCOSE IS?
Diabetes Knowledge Questionnaire	dq20	BUTTER IS MAINLY
Diabetes Knowledge Questionnaire	dq21	RICE IS MAINLY
Diabetes Knowledge Questionnaire	dq22	YOU CAN EAT AS MUCH AS YOU LIKE OF?
Diabetes Knowledge Questionnaire	dq23	WHAT TYPE OF DOCTOR LOOKS AFTER YOUR DB?
Diabetes Knowledge Questionnaire	dq24	HOW OFTEN DO YOU VISIT A DOCTOR FOR DB?
Diabetes Knowledge Questionnaire	dq25	HAS A DOCTOR EXAMINED YOUR FEET IN THE PAST YEAR?
Diabetes Knowledge Questionnaire	dq26	HOW OFTEN HAVE YOU EXAMINED YOUR FEET IN LAST WEEK?
Diabetes Knowledge Questionnaire	dq27a	VISITED DIABETES EDUCATOR
Diabetes Knowledge Questionnaire	dq27b	VISITED DIETITIAN
Diabetes Knowledge Questionnaire	dq27c	VISITED PODIATRIST
Diabetes Knowledge Questionnaire	dq28	EVER HAD BACK OF EYES EXAMINED?
Diabetes Knowledge Questionnaire	dq29	WHO CONDUCTED THE EXAMINATION?



Questionnaire		
Diabetes Knowledge Questionnaire	dq30	HOW LONG SINCE YOU LAST HAD THE BACK OF YOUR EYES CHECKED?
Diabetes Knowledge Questionnaire	dq31	ARE YOU AWARE OF THE NDSS?
Diabetes Knowledge Questionnaire	dq32	ARE YOU REGISTERED ON THE NDSS?
Diabetes Knowledge Questionnaire	dq33	HAVE YOU USED THE SCHEME IN THE PAST 12 MONTHS?
Diabetes Knowledge Questionnaire	dq34a	YOU CAN GET ITEMS CHEAPER ELSEWHERE
Diabetes Knowledge Questionnaire	dq34b	IT'S DIFFICULT TO ACCESS
Diabetes Knowledge Questionnaire	dq34c	THERE IS A LANGUAGE BARRIER
Diabetes Knowledge Questionnaire	dq34d	OTHER REASON
General Questionnaire	id	ID number
General Questionnaire	dr_genqu	GEN QUEST OBSERVER ID
General Questionnaire	q1_gende	SEX
General Questionnaire	q2_date_	q2_date_of_birth
General Questionnaire	q3_livin	q3_living
General Questionnaire	q4_schoo	q4_schooling
General Questionnaire	q5_schoo	q5_school_level
General Questionnaire	q6_quali	q6_qualifications
General Questionnaire	q7_highe	q7_highest_qualifiactions
General Questionnaire	q8_educa	q8_educational_inst
General Questionnaire	q9_natur	q9_natural_mother_alive
General Questionnaire	q10_moth	q10_mothers_age
General Questionnaire	q10_don_	q10 don't know mother's age
General Questionnaire	q11_moth	q11 age of mothers death
General Questionnaire	q11_don_	q11 don't know mother's age at death
General Questionnaire	q12_moth	q12 has your mother been diagnosed with diabetes
General Questionnaire	q13_diag	at what age was she diagnosed?
General Questionnaire	q14_natu	q14 is your natural father alive?
General Questionnaire	q15_fath	q15 what is your father's age
General Questionnaire	q15_don_	q15 I don't know my father's age
General Questionnaire	q16_fath	q16 how old was your father at death?
General Questionnaire	q16_don_	q16 don't know father's age at death
General Questionnaire	q17_fath	q17 father been diagnosed with diabetes
General Questionnaire	q18_diag	q18 age first diagnosed
General Questionnaire	q19_gout	have you ever suffered from gout?
General Questionnaire	q20_angi	have you been told you have angina?
General Questionnaire	q20_coro	have you been told you have had a heart attack?
General Questionnaire	q20_stro	have you been told you have had a stroke?
General Questionnaire	q21_bloo	when did you last have your blood pressure measured?

General Questionnaire	q22_bloo	have you been told you have hypertension?
General Questionnaire	q23_tabl	are you currently taking tablets for high blood pressure
General Questionnaire	q24_lose	have you been told to lose weight?
General Questionnaire	q25_chol	have you ever had your cholesterol checked?
General Questionnaire	q26_chol	when did you last have your cholesterol checked?
General Questionnaire	q27_doc_	have you been told that your cholesterol is high?
General Questionnaire	q28_tabl	are you taking tablets to lower your cholesterol?
General Questionnaire	q29_alco	what alcohol drinking category are you in?
General Questionnaire	q30_heav	have you ever considered yourself a heavy drinker?
General Questionnaire	q31_alco	how many days a week do you usually drink alcohol?
General Questionnaire	q32_drin	how many drinks do you usually have when drinking?
General Questionnaire	q33_alco	what type of alcohol do you usually drink?
General Questionnaire	q34_numb	in the last 2 weeks, 5 drinks or more?
General Questionnaire	q35_cut_	should you cut down on your drinking?
General Questionnaire	q36_crit	have people criticized your drinking?
General Questionnaire	q37_bad_	have you felt bad about drinking?
General Questionnaire	q38_hang	have you drunk in mornings to get rid of hangover?
General Questionnaire	q39_alco	treated for alcoholism?
General Questionnaire	q40_smok	do you smoke cigarettes etc.?
General Questionnaire	q41_smok	q41 cigarettes?
General Questionnaire	q41smday	q41_smoking_cigs_number
General Questionnaire	q41smwk	q41_smoking_cigs_number_2
General Questionnaire	q42_ciga	q42 Cigars?
General Questionnaire	q42_smok	q42_smoking_cigars_number
General Questionnaire	q42ciday	q42_smoking_cigars_number_2
General Questionnaire	q43_pipe	q43 Pipes?
General Questionnaire	q43_smok	q43_smoking_pipes_number
General Questionnaire	q43pipwk	q43_smoking_pipes_number_2
General Questionnaire	q44_smok	100 + cigarettes over lifetime?
General Questionnaire	q45_smok	have you been a daily smoker in the past?
General Questionnaire	q46_week	stopped daily smoking how many weeks ago?
General Questionnaire	q46_mont	stopped daily smoking months ago
General Questionnaire	q46yroid	stopped daily smoking years old
General Questionnaire	q46yrago	stopped daily smoking years ago
General Questionnaire	q47_age_	age started smoking daily?
General Questionnaire	q47norem	q47 age smoking don't remember
General Questionnaire	q48_yrsm	how many years a daily smoker?
General Questionnaire	q49_trie	have you tried to give up smoking?
General Questionnaire	q50a_age	times you have tried to give up smoking
General Questionnaire	q50b_day	longest period you gave up smoking for, days
General Questionnaire	q50b_mon	longest period gave up smoking months
General Questionnaire	q50b_wee	longest period gave up smoking weeks
General Questionnaire	q50b_yea	longest period gave up smoking years
General Questionnaire	q51_time	times walked for 10 minutes in last week

General Questionnaire	q52_walk	total time continuous walking, hours
General Questionnaire	q52wkmin	total time continuous walking minutes
General Questionnaire	q53_time	vigorous household chores in last week
General Questionnaire	q54_hour	total time on vigorous chores, hours?
General Questionnaire	q54_minu	total time on vigorous chores, minutes?
General Questionnaire	q55_time	vigorous gardening in last week?
General Questionnaire	q56_hour	total time gardening, hours?
General Questionnaire	q56_minu	total time gardening, minutes?
General Questionnaire	q57_time	other vigorous activity in last week?
General Questionnaire	q58_hour	time on other vigorous activity, hours?
General Questionnaire	q58_minu	time on other vigorous activity, minutes?
General Questionnaire	q59_time	number of times on other moderate activity
General Questionnaire	q60_hour	more moderate activity, hours
General Questionnaire	q60_minu	time on more moderate activity, minutes
General Questionnaire	q60b_typ	has this been a typical week of physical activity?
General Questionnaire	q61_monf	TV mon-fri, hours
General Questionnaire	q61mfmin	TV mon-fri, minutes
General Questionnaire	q61_sats	TV, sat-sun, hours
General Questionnaire	q61ssmin	TV sat-sun, minutes
General Questionnaire	q62_inco	main source of income?
General Questionnaire	q63_inco	total household income?
General Questionnaire	q64_join	are you the main income earner?
General Questionnaire	q65_job_	do you have a part time job
General Questionnaire	q66_asco	what kind of work do you do?
General Questionnaire	q68_asco	work done before retirement
General Questionnaire	asco1	major group designation for q66(ASCO employed)
General Questionnaire	asco2	major group designation for q68(ASCO retired)
General Questionnaire	q67a	what is your current employment status?
General Questionnaire	q67b	what is your current employment status?
General Questionnaire	q67c	what is your current employment status?
General Questionnaire	q67d	what is your current employment status?
General Questionnaire	q67e	what is your current employment status?
General Questionnaire	q67f	what is your current employment status?
General Questionnaire	q67g	what is your current employment status?
General Questionnaire	q67h	what is your current employment status?
General Questionnaire	q67i	what is your current employment status?
General Questionnaire	q69_oral	q69_oral_contraceptive_pill
General Questionnaire	q70_cont	q70_contraceptive_pill_time
General Questionnaire	q71_taki	are you currently taking the pill
General Questionnaire	q72_hyst	have you had a hysterectomy
General Questionnaire	q73_age_	age at hysterectomy
General Questionnaire	q74_remo	were the ovaries removed as well
General Questionnaire	q75_meno	have you gone through menopause?
General Questionnaire	q76_meno	at what age did symptoms begin

General Questionnaire	q77_estr	estrogen, or HRT prescribed?
General Questionnaire	q78_taki	q78 currently taking estrogen
General Questionnaire	q79_ever	have you ever been pregnant
General Questionnaire	q80_firs	age at first pregnancy
General Questionnaire	q81_how_	q81how many children have you had
General Questionnaire	q82_preg	q82 pregnancies that lasted 6+months
General Questionnaire	q83_age_	age when first child was born?
General Questionnaire	q84_test	q84 tested for db when pregnant
General Questionnaire	q85_gest	q85 ever had gestational diabetes
General Questionnaire	q86_gest	tested for db again after pregnancy?
General Questionnaire	q87_inte	interview obtained
General Questionnaire	q88_inte	interview obtained 2
General Questionnaire	q89_inte	was interview obtained by proxy?
Health Knowledge and Attitudes Questionnaire	id	BARCODE
Health Knowledge and Attitudes Questionnaire	hqobsid	HKA OBSERVER ID
Health Knowledge and Attitudes Questionnaire	hq1a	FAMILY HISTORY OF DB
Health Knowledge and Attitudes Questionnaire	hq1b	AGE OVER 40
Health Knowledge and Attitudes Questionnaire	hq1c	OVERWEIGHT
Health Knowledge and Attitudes Questionnaire	hq1d	EATING TOO MUCH SUGAR
Health Knowledge and Attitudes Questionnaire	hq1e	OVEREATING
Health Knowledge and Attitudes Questionnaire	hq1f	EATING TOO MUCH FAT
Health Knowledge and Attitudes Questionnaire	hq1g	OLD AGE
Health Knowledge and Attitudes Questionnaire	hq1h	STRESS
Health Knowledge and Attitudes Questionnaire	hq1i	LACK OF EXERCISE
Health Knowledge and Attitudes Questionnaire	hq1j	ETHNIC ORIGIN
Health Knowledge and Attitudes Questionnaire	hq1k	SMOKING
Health Knowledge and Attitudes Questionnaire	hq1l	ALCOHOL
Health Knowledge and Attitudes Questionnaire	hq1m	DON'T KNOW
Health Knowledge and Attitudes Questionnaire	hq1n	OTHER
Health Knowledge and Attitudes Questionnaire	hg2a	NO ACTION
Health Knowledge and Attitudes Questionnaire	hq2b	WEIGHT CONTROL

Attitudes Questionnaire		
Health Knowledge and Attitudes Questionnaire	hq2c	WEIGHT LOSS
Health Knowledge and Attitudes Questionnaire	hq2d	EXERCISE
Health Knowledge and Attitudes Questionnaire	hq2e	HEALTHY DIET
Health Knowledge and Attitudes Questionnaire	hq2f	LIMIT SUGAR
Health Knowledge and Attitudes Questionnaire	hq2g	LIMIT FATTY FOODS
Health Knowledge and Attitudes Questionnaire	hq2h	HEALTH CHECKS
Health Knowledge and Attitudes Questionnaire	hq2i	DON'T KNOW
Health Knowledge and Attitudes Questionnaire	hq2j	OTHER
Health Knowledge and Attitudes Questionnaire	hq3a	PASSING LOTS OF URINE
Health Knowledge and Attitudes Questionnaire	hq3b	EXCESS THIRST
Health Knowledge and Attitudes Questionnaire	hq3c	TIREDNESS/LETHARGY
Health Knowledge and Attitudes Questionnaire	hq3d	LOSS OF APPETITE
Health Knowledge and Attitudes Questionnaire	hq3e	WEIGHT LOSS
Health Knowledge and Attitudes Questionnaire	hq3f	VISION PROBLEMS
Health Knowledge and Attitudes Questionnaire	hq3g	SKIN AND GENITAL INFECTIONS
Health Knowledge and Attitudes Questionnaire	hq3h	DON'T KNOW
Health Knowledge and Attitudes Questionnaire	hq3i	OTHER
Health Knowledge and Attitudes Questionnaire	hq4	HOW HEALTHY IS THE FOOD YOU EAT?
Health Knowledge and Attitudes Questionnaire	hq5	ARE YOU VEGETARIAN?
Health Knowledge and Attitudes Questionnaire	hq6	ARE YOU VEGAN?
Health Knowledge and Attitudes Questionnaire	hq7	HOW OFTEN SHOULD ADULTS EAT FRUIT?
Health Knowledge and Attitudes Questionnaire	hq8	HOW OFTEN SHOULD ADULTS EAT DAIRY FOOD?
Health Knowledge and Attitudes Questionnaire	hq9	HOW OFTEN SHOULD ADULTS EAT VEGETABLES?
Health Knowledge and Attitudes Questionnaire	hq10	HOW OFTEN SHOULD ADULTS EAT MEATS?
Health Knowledge and Attitudes Questionnaire	hq11	HOW OFTEN SHOULD ADULTS EAT CEREALS?

Health Knowledge and Attitudes Questionnaire	hq12	HAS A DOCTOR ASKED YOU ABOUT DIET?
Health Knowledge and Attitudes Questionnaire	hq13	HAS A DOCTOR TALKED TO YOU ABOUT EXERCISE?
Health Knowledge and Attitudes Questionnaire	hq14	HAS A DOCTOR TALKED WITH YOU ABOUT ALCOHOL?
Health Knowledge and Attitudes Questionnaire	hq15	HAS A DOCTOR TALKED WITH YOU ABOUT SMOKING?
Health Knowledge and Attitudes Questionnaire	hq16	REGARDING YOUR WEIGHT, ARE YOU?
Health Knowledge and Attitudes Questionnaire	hq17	HAVE YOU BEEN OVERWEIGHT IN THE PAST?
Health Knowledge and Attitudes Questionnaire	hq18	DO YOU FIND IT HARD TO KEEP YOUR WEIGHT STEADY?
Health Knowledge and Attitudes Questionnaire	hq19	DO YOU NEVER PUT ON WEIGHT?
Health Knowledge and Attitudes Questionnaire	hq20	IS YOUR CURRENT WEIGHT HARMFUL TO YOUR HEALTH?
Health Knowledge and Attitudes Questionnaire	hq21	WHICH OF THE FOLLOWING BEST DESCRIBES YOU?
Health Knowledge and Attitudes Questionnaire	hq22	HAVE YOU TRIED TO LOSE WEIGHT IN THE PAST?
Health Knowledge and Attitudes Questionnaire	hq23a	MARRIAGE BREAKUP
Health Knowledge and Attitudes Questionnaire	hq23b	DEATH OF HUSBAND / WIFE
Health Knowledge and Attitudes Questionnaire	hq23c	DEATH OF CLOSE FAMILY/FRIEND
Health Knowledge and Attitudes Questionnaire	hq23d	DISTURBING TIME WITH HUSBAND/WIFE
Health Knowledge and Attitudes Questionnaire	hq23e	DISTURBING TIME WITH CHILDREN
Health Knowledge and Attitudes Questionnaire	hq23f	DISTURBING TIME WITH PARENTS
Health Knowledge and Attitudes Questionnaire	hq23g	FIRED/PROBLEM FINDING A JOB
Health Knowledge and Attitudes Questionnaire	hq23h	TROUBLE WITH BOSS OR TEACHER
Health Knowledge and Attitudes Questionnaire	hq23i	TROUBLE AT WORK WITH CO-WORKER
Health Knowledge and Attitudes Questionnaire	hq23j	FELT LIKE NERVOUS BREAKDOWN
Health Knowledge and Attitudes Questionnaire	hq23k	SEVERE PROBLEMS WITH MONEY
Health Knowledge and Attitudes Questionnaire	hq23l	SEXUAL DIFFICULTIES/PROBLEMS
Health Knowledge and Attitudes Questionnaire	hq23m	OTHER TROUBLES NOT LISTED
Health Knowledge and Attitudes Questionnaire	hq241	YOU FEEL RESTED
Health Knowledge and Attitudes Questionnaire	hq242	TOO MANY DEMANDS MADE ON YOU

Attitudes Questionnaire		
Health Knowledge and Attitudes Questionnaire	hq243	IRRITABLE OR GROUCHY
Health Knowledge and Attitudes Questionnaire	hq244	TOO MANY THINGS TO DO
Health Knowledge and Attitudes Questionnaire	hq245	FEEL LONELY OR ISOLATED
Health Knowledge and Attitudes Questionnaire	hq246	IN SITUATIONS OF CONFLICT
Health Knowledge and Attitudes Questionnaire	hq247	DOING THINGS YOU REALLY LIKE
Health Knowledge and Attitudes Questionnaire	hq248	FEEL TIRED
Health Knowledge and Attitudes Questionnaire	hq249	FEAR YOU MAY NOT ATTAIN YOUR GOALS
Health Knowledge and Attitudes Questionnaire	hq2410	FEEL CALM
Health Knowledge and Attitudes Questionnaire	hq2411	TOO MANY DECISIONS TO MAKE
Health Knowledge and Attitudes Questionnaire	hq2412	FEEL FRUSTRATED
Health Knowledge and Attitudes Questionnaire	hq2413	FULL OF ENERGY
Health Knowledge and Attitudes Questionnaire	hq2414	FEEL TENSE
Health Knowledge and Attitudes Questionnaire	hq2415	PROBLEMS PILING UP
Health Knowledge and Attitudes Questionnaire	hq2416	FEEL YOU'RE IN A HURRY
Health Knowledge and Attitudes Questionnaire	hq2417	FEEL SAFE AND PROTECTED
Health Knowledge and Attitudes Questionnaire	hq2418	HAVE MANY WORRIES
Health Knowledge and Attitudes Questionnaire	hq2419	UNDER PRESSURE FROM OTHERS
Health Knowledge and Attitudes Questionnaire	hq2420	FEEL DISCOURAGED
Health Knowledge and Attitudes Questionnaire	hq2421	YOU ENJOY YOURSELF
Health Knowledge and Attitudes Questionnaire	hq2422	AFRAID FOR THE FUTURE
Health Knowledge and Attitudes Questionnaire	hq2423	DOING THINGS B/C YOU HAVE TO
Health Knowledge and Attitudes Questionnaire	hq2424	FEEL CRITICIZED OR JUDGED
Health Knowledge and Attitudes Questionnaire	hq2425	LIGHTHEARTED
Health Knowledge and Attitudes Questionnaire	hq2426	FEEL MENTALLY EXHAUSTED
Health Knowledge and Attitudes Questionnaire	hq2427	HAVE TROUBLE RELAXING

Health Knowledge and Attitudes Questionnaire	hq2428	LOADED DOWN WITH RESPONSIBILITY
Health Knowledge and Attitudes Questionnaire	hq2429	HAVE ENOUGH TIME FOR YOURSELF
Health Knowledge and Attitudes Questionnaire	hq2430	UNDER PRESSURE FROM DEADLINES
Health Knowledge and Attitudes Questionnaire	hq25	IS 3X10MIN DAILY EXERCISE SESSIONS ENOUGH?
Health Knowledge and Attitudes Questionnaire	hq26	DOES EXERCISE HAVE TO BE HIGH INTENSITY
Health Knowledge and Attitudes Questionnaire	hq27	DOES BRISK WALKING GIVE YOU A HEALTH BENEFIT?
Health Knowledge and Attitudes Questionnaire	hq28	DO YOU NEED TO BE MORE PHYSICALLY ACTIVE?
Health Knowledge and Attitudes Questionnaire	hq29	CAN YOU BE MORE PHYSICALLY ACTIVE?
Health Knowledge and Attitudes Questionnaire	hq30	WHICH OF THE FOLLOWING APPLIES TO YOU?
Health Knowledge and Attitudes Questionnaire	hq31a	OTHER PRIORITIES
Health Knowledge and Attitudes Questionnaire	hq31b	A DISABILITY OR INJURY
Health Knowledge and Attitudes Questionnaire	hq31c	YOUNG CHILDREN/FAMILY NEEDS
Health Knowledge and Attitudes Questionnaire	hq31d	WORK
Health Knowledge and Attitudes Questionnaire	hq31e	THE WEATHER
Health Knowledge and Attitudes Questionnaire	hq31f	POLLUTION/NOISE
Health Knowledge and Attitudes Questionnaire	hq31g	LACK OF TIME
Health Knowledge and Attitudes Questionnaire	hq31h	COST
Health Knowledge and Attitudes Questionnaire	hq31i	SAFETY
Health Knowledge and Attitudes Questionnaire	hq31j	ACCESSABILITY OF FACILITIES
Health Knowledge and Attitudes Questionnaire	hq31k	AGE
Health Knowledge and Attitudes Questionnaire	hq31l	LACK OF FOOTPATHS, BIKE LANES, PARKS
Health Knowledge and Attitudes Questionnaire	hq31m	FEELING TIRED
Health Knowledge and Attitudes Questionnaire	hq31n	OTHER
Health Knowledge and Attitudes Questionnaire	hq32	DO YOU HAVE ANY MEDICAL CONDITIONS WHICH PREVENT EXERCISE?
Health Knowledge and Attitudes Questionnaire	hq33	DO YOU HAVE A GP YOU USUALLY SEE?
Health Knowledge and Attitudes Questionnaire	hq34	HOW OFTEN DO YOU SEE THIS GP?



Attitudes Questionnaire		
Health Knowledge and Attitudes Questionnaire	hq35	HOW OFTEN HAVE YOU VISITED A DOCTOR IN LAST 12 MTHS?
Health Knowledge and Attitudes Questionnaire	hq36	HAVE YOU CONSULTED A GP IN LAST 2 WEEKS?
Health Knowledge and Attitudes Questionnaire	hq37a	ALTERNATIVE HEALTH PRACTITIONER
Health Knowledge and Attitudes Questionnaire	hq37b	CHEMIST/PHARMACIST
Health Knowledge and Attitudes Questionnaire	hq37c	DIETITIAN/NUTRITIONIST
Health Knowledge and Attitudes Questionnaire	hq37d	MEDICAL SPECIALIST
Health Knowledge and Attitudes Questionnaire	hq37e	NURSE
Health Knowledge and Attitudes Questionnaire	hq37f	ALLIED HEALTH PROFESSIONAL
Health Knowledge and Attitudes Questionnaire	hq37g	PSYCHOLOGIST/PSYCHIATRIST
Health Knowledge and Attitudes Questionnaire	hq38	IN LAST 12 MTHS., HAVE YOU BEEN ADMITTED TO HOSPITAL?
Health Knowledge and Attitudes Questionnaire	hq39	ARE YOU COVERED BY PRIVATE HEALTH INSURANCE?
Health Knowledge and Attitudes Questionnaire	hq40	LOCUS OF CONTROL q1
Health Knowledge and Attitudes Questionnaire	hq41	LOCUS OF CONTROL q2
Health Knowledge and Attitudes Questionnaire	hq42	LOCUS OF CONTROL q3
Health Knowledge and Attitudes Questionnaire	hq43	LOCUS OF CONTROL q4
Health Knowledge and Attitudes Questionnaire	hq44	LOCUS OF CONTROL q5
Health Knowledge and Attitudes Questionnaire	hq45	LOCUS OF CONTROL q6
Health Knowledge and Attitudes Questionnaire	hq46	LOCUS OF CONTROL q7
Health Knowledge and Attitudes Questionnaire	hq47	LOCUS OF CONTROL q8
Health Knowledge and Attitudes Questionnaire	hq48	LOCUS OF CONTROL q9
Health Knowledge and Attitudes Questionnaire	hq49	LOCUS OF CONTROL q10
Health Knowledge and Attitudes Questionnaire	hq50	LOCUS OF CONTROL q11
Health Knowledge and Attitudes Questionnaire	hq51	LOCUS OF CONTROL q12
Health Knowledge and Attitudes Questionnaire	hq52	LOCUS OF CONTROL q13
Health Knowledge and Attitudes Questionnaire	hq53	LOCUS OF CONTROL q14

Health Knowledge and Attitudes Questionnaire	hq54	LOCUS OF CONTROL q15
Health Knowledge and Attitudes Questionnaire	hq55	LOCUS OF CONTROL q16
Health Knowledge and Attitudes Questionnaire	hq56	LOCUS OF CONTROL q17
Health Knowledge and Attitudes Questionnaire	hq57	LOCUS OF CONTROL q18
Health Knowledge and Attitudes Questionnaire	hq58	LOCUS OF CONTROL q19
Health Knowledge and Attitudes Questionnaire	hq59	LOCUS OF CONTROL q20
SF-36 General Health & Wellbeing Questionnaire	id	BARCODE
SF-36 General Health & Wellbeing Questionnaire	sf36q1	GENERAL HEALTH?
SF-36 General Health & Wellbeing Questionnaire	sf26q2	HEALTH COMPARED TO ONE YEAR AGO?
SF-36 General Health & Wellbeing Questionnaire	sf36q3a	DOES YOUR HEALTH LIMIT VIGOROUS ACTIVITIES?
SF-36 General Health & Wellbeing Questionnaire	sf36q3b	DOES YOUR HEALTH LIMIT MODERATE ACTIVITIES?
SF-36 General Health & Wellbeing Questionnaire	sf36q3c	DOES YOUR HEALTH LIMIT LIFTING GROCERIES?
SF-36 General Health & Wellbeing Questionnaire	sf36q3d	DOES YOUR HEALTH LIMIT CLIMBING SEVERAL FLIGHTS OF STAIRS?
SF-36 General Health & Wellbeing Questionnaire	sf36q3e	DOES YOUR HEALTH LIMIT CLIMBING ONE FLIGHT OF STAIRS?
SF-36 General Health & Wellbeing Questionnaire	sf36q3f	DOES YOUR HEALTH LIMIT BENDING?
SF-36 General Health & Wellbeing Questionnaire	sf36q3g	DOES YOUR HEALTH LIMIT WALKING 1KM+?
SF-36 General Health & Wellbeing Questionnaire	sf36q3h	DOES YOUR HEALTH LIMIT WALKING 0.5KM?
SF-36 General Health & Wellbeing Questionnaire	sf36q3i	DOES YOUR HEALTH LIMIT WALKING 100 METRES?
SF-36 General Health & Wellbeing Questionnaire	sf36q3j	DOES YOUR HEALTH LIMIT BATHING OR DRESSING YOURSELF?
SF-36 General Health & Wellbeing Questionnaire	sf36q4a	HAS YOUR HEALTH CUT DOWN WORK TIME?
SF-36 General Health & Wellbeing Questionnaire	sf36q4b	HAVE YOU ACCOMPLISHED LESS B/C OF YOUR HEALTH?
SF-36 General Health & Wellbeing Questionnaire	sf36q4c	HAS YOUR HEALTH LIMITED THE KIND OF WORK?
SF-36 General Health & Wellbeing Questionnaire	sf36q4d	HAVE YOU HAD DIFFICULTY IN PERFORMING WORK?
SF-36 General Health & Wellbeing Questionnaire	sf36q5a	HAVE EMOTIONAL PROBLEMS CUT DOWN WORK TIME?
SF-36 General Health & Wellbeing Questionnaire	sf36q5b	HAVE YOU ACCOMPLISHED LESS B/C OF EMOTIONAL PROBLEMS?

SF-36 General Health & Wellbeing Questionnaire	sf36q5c	DO YOU DO THINGS AS CAREFULLY AS USUAL B/C OF EMOTIONAL PROBLEMS?
SF-36 General Health & Wellbeing Questionnaire	sf36q6	HAS HEALTH INTERFERED WITH NORMAL ACTIVITIES?
SF-36 General Health & Wellbeing Questionnaire	sf36q7	BODILY PAIN IN LAST 4 WEEKS?
SF-36 General Health & Wellbeing Questionnaire	sf36q8	PAIN INTERFERE WITH NORMAL WORK?
SF-36 General Health & Wellbeing Questionnaire	sf36q9a	DID YOU FEEL FULL OF LIFE?
SF-36 General Health & Wellbeing Questionnaire	sf36q9b	HAVE YOU BEEN A VERY NERVOUS PERSON?
SF-36 General Health & Wellbeing Questionnaire	sf36q9c	DOWN IN THE DUMPS?
SF-36 General Health & Wellbeing Questionnaire	sf36q9d	HAVE YOU FELT CALM AND PEACEFUL?
SF-36 General Health & Wellbeing Questionnaire	sf36q9e	DID YOU HAVE A LOT OF ENERGY?
SF-36 General Health & Wellbeing Questionnaire	sf36q9f	HAVE YOU FELT DOWN?
SF-36 General Health & Wellbeing Questionnaire	sf36q9g	DID YOU FEEL WORN OUT?
SF-36 General Health & Wellbeing Questionnaire	sf36q9h	HAVE YOU BEEN A HAPPY PERSON?
SF-36 General Health & Wellbeing Questionnaire	sf36q9i	DID YOU FEEL TIRED?
SF-36 General Health & Wellbeing Questionnaire	sf36q10	PHYSICAL/EMOTIONAL PROBLEMS INTERFERE?
SF-36 General Health & Wellbeing Questionnaire	sf36q11a	I GET SICK MORE EASILY
SF-36 General Health & Wellbeing Questionnaire	sf36q11b	I AM AS HEALTHY AS ANYBODY
SF-36 General Health & Wellbeing Questionnaire	sf36q11c	I EXPECT MY HEALTH TO GET WORSE
SF-36 General Health & Wellbeing Questionnaire	sf36q11d	MY HEALTH IS EXCELLENT
Neuropathy and Peripheral Vascular Disease Scores	id	BARCODE
Neuropathy and Peripheral Vascular Disease Scores	dc5tot	Neuropathy symptoms score for q5
Neuropathy and Peripheral Vascular Disease Scores	dc8tot	DO ANY OF THE FOLLOWING REDUCE THE PAIN for dc8tot
Neuropathy and Peripheral Vascular Disease Scores	nsstot	NEUROPATHY SYMPTOM SCORE TOTAL
Neuropathy and Peripheral Vascular Disease Scores	nss	NEUROPATHY SYMPTOM SCORE
Neuropathy and Peripheral Vascular Disease Scores	dc17to	TOTAL NDS
Neuropathy and Peripheral Vascular Disease Scores	nds	NEUROPATHY DISABILITY SCORE

Neuropathy and Peripheral Vascular Disease Scores	dc18to	TOTAL SCORE PRESSURE PERCEPTION
Neuropathy and Peripheral Vascular Disease Scores	ppt	PRESSURE PERCEPTION THRESHOLD
Neuropathy and Peripheral Vascular Disease Scores	systot	SYSTOLIC LYING MINUS SYSTOLIC STANDING
Neuropathy and Peripheral Vascular Disease Scores	sys	BLOOD PRESSURE COMPARISON, LYING TO STANDING
Neuropathy and Peripheral Vascular Disease Scores	total	FINAL NEUROPATHY CLASSIFICATION
Neuropathy and Peripheral Vascular Disease Scores	dc19armt	TOTAL ARM PRESSURE
Neuropathy and Peripheral Vascular Disease Scores	dc19ankt	TOTAL ANKLE PRESSURE
Neuropathy and Peripheral Vascular Disease Scores	abpi	ANKLE BRACHIAL PRESSURE INDEX
Neuropathy and Peripheral Vascular Disease Scores	abpit	SCORE ANKLE BRACHIAL PRESSURE INDEX
Neuropathy and Peripheral Vascular Disease Scores	ecqt	EDINBURGH CLAUDICATION QUESTIONNAIRE TOTAL
Neuropathy and Peripheral Vascular Disease Scores	ecq	SCORE ECQ