



ANDA-AQSMA 2014 DATA DEFINITIONS

Section 1. Patient Demographics	
Medical Record No.	(Compulsory field). Enter some identifier such as record number or first the 2 letters of the first name and surname and month and year of birth (e.g. FFSSMMYY) to enable you to check your records if there is a question regarding the data.
Centre ID	Site Identifier.
Site Staff Identifier	Site staff ID.
Date of Birth	Record as DD/MM/YYYY . [If unknown other than year: Record as 01/01/YYYY].
Sex	Mark Male or Female indicating phenotypic (physical) sex at birth.
Currently pregnant	If Sex is female, mark Yes or No if the patient is currently pregnant.
Date of Visit	Record the date the patient attended as DD/MM/2014 .
Initial Visit	Mark No or Yes indicating if this is an initial visit assessment.
Indigenous	Mark No or Yes indicating Aboriginal / Torres Strait Islander background (or neither).
Interpreter required	Record No or Yes for the requirement for interpreter services as perceived by the patient.
DVA Patient	Eligible people whose medical care charges are met by the Dept of Veterans' Affairs (DVA).
NDSS Member	Record No or Yes if a member of the NDSS.
Country of Birth	Enter the patient's country of birth.
Section 2. Diabetes Type & Management & Lifestyle Issues	
Year of Diagnosis	Record as YYYY of first diagnostic blood glucose estimation.
Type of Diabetes	Mark Type1 [IDDM] or Type2 [NIDDM] or GDM or Don't Know , or Other to indicate the clinical classification of diabetes.
Management Method	Record as Diet Only or Tablets or Injectables or Insulin or Insulin & Tablets or Nil to indicate the management method. Injectables includes injected anti-hyperglycaemic agents not including insulin (eg GLP-1 analogues).
If on insulin: How long ago was insulin started	<1 year insulin was started within the past year. 1-5 years insulin was started between 1 and 5 years ago. > 5 years insulin was started more than 5 years ago.
Flu vaccination	Has the patient had a flu vaccination in the last 12 months? (No/Yes).
Pneumococcal vaccination	Has the patient had a pneumococcal vaccination in the last 12 months? (No/Yes).
Physical Activity	Physical activity is calculated in 'total minutes per week' by summing the total minutes of walking, moderate and/or vigorous physical activity in a usual 7-day period. Vigorous physical activity is weighted by a factor of two to account for its greater intensity. <i>Intensity of physical activity</i> is defined by The National Physical Activity Guidelines for Australians: <i>Moderate</i> physical activity causes a slight but noticeable increase in breathing and heart rate, the person can comfortably talk but not sing. <i>Vigorous</i> physical activity causes the person to 'huff and puff,' talking in full sentences between breaths is difficult. Sufficient physical activity for health benefit is equal to or more than 150 total minutes per week . Insufficient physical activity is more than 0 minutes, but less than 150 total minutes per week . Sedentary is where there has been no moderate and / or vigorous physical activity per week .
Smoking Status	Mark Current Smoker or Past Smoker or Never Smoked to indicate smoking of <u>any tobacco material</u> . Current Smoker = regular smoking over the past 3mths, Past Smoker = no regular smoking for 1month or more, Never smoked = never smoked any tobacco material.
If Current Smoker	Has tried in ANY WAY to stop smoking (No/Yes).
If Past Smoker	Indicate whether the method (No intervention or Medication or Nicotine replacement or Hypnosis or Acupuncture or Other) was used to stop smoking.
Glycated Hb Result	Record absolute result [%] and mmol/mol of the most recent HbA1c result in the last 6 months.
Section 3. Medication Use	
Medication use practices	Ask patient questions as listed and indicate response (No/Yes).
Complementary therapy	Is the patient using a complementary therapy [herbal/homeopathic/ vitamin or mineral supplement or dietary supplement or 'over the counter' [OTC] Rx]? (No/Yes).
Told doctor / DE	Has the patient told their doctor or diabetes educator about using complementary therapy or OTC? (No/Yes).
Section 4. Health Professional Attendances	
Health professional attendances	Record if the patient attended (last 12 months) (No/Yes) for each health professional.
Section 5. Patient Self Care Practices	
Do you have difficulties following your prescribed diet?	Indicate whether patient has difficulties following prescribed diet (No/Yes). If YES ask the patient whether the following options apply to them. Mark No/Yes to each of the options.
Do you check your blood glucose level as often as recommended?	Mark which one of the options describes the patient's usual practice (No/Yes/Unsure of recommended monitoring).
Rotate injection sites	Does the patient routinely change the site of injection for injectables or insulin? (No/Yes).
Section 6A. Brief Case Find For Depression (BCD) Copyright 1993 Monash University Department of Psychology Medicine	
Been having restless or disturbed nights?	(No/Yes).
Been feeling unhappy or depressed?	(No/Yes).
Been feeling unable to overcome difficulties?	(No/Yes). Problems of life that have been worrying you.
Been dissatisfied with the way of doing things?	(No/Yes). Things that you've had to do at home or at work.
Section 6B. Treatment	
Is the patient taking antidepressants?	Is the patient taking antidepressant medication (not prescribed for peripheral neuropathy)? (No/Yes).
Psych treatment/counselling – now	Is the patient currently having psychiatric treatment/counselling? (No/Yes).
Psych treatment/counselling – past?	Has the patient had psychiatric treatment/counselling in the past? (No/Yes).
Section 7. Quality of Life Assessment	
Own Health State Rating	Record the absolute result of the patient's Own Health State Rating (0-100) from Self Assessment of Health Status
Screening Scale Q1 & Q2	All patients to do on Self Assessment of Health Status. Record the ACTUAL SCORE reported in the Screening Scale Q1 & Q2.
DDS17 Questionnaire Done	Was the DDS 17 Questionnaire done by the patient? (No/Yes). Only if screening scale Q1 or Q2 ≥3 administer DDS17.
Total DDS Score	Record the 'Mean Item SCORE calculated on the DDS17 Scoring Sheet.
Emotional Burden (A)	Record the 'Mean Item SCORE calculated on the DDS17 Scoring Sheet.
Physician-related distress (B)	Record the 'Mean Item SCORE calculated on the DDS17 Scoring Sheet.
Regimen-related distress (C)	Record the 'Mean Item SCORE calculated on the DDS17 Scoring Sheet.
Interpersonal distress (D)	Record the 'Mean Item SCORE calculated on the DDS17 Scoring Sheet.