**Participant ID:** \_\_ \_\_ \_\_

**Period** (check one)

Intake  4 months  8 month  12 month

**CLINICAL RECORDS**

|  |
| --- |
| **Height:** \_ \_ \_.\_ cm/in **Weight:** \_ \_ \_.\_\_ kg/lb  Height not measured  Weight not measured  **BMI:** \_ \_ \_.\_ Kg/m2  **Waist circumference(wc):** \_\_\_\_\_\_\_cm/in  wc not measured  **Systolic blood pressure:** \_ \_ \_ mmHg  **Diastolic blood pressure:** \_ \_ \_mmHg  BP not measured |

**LABORATORY TEST RESULTS**

|  |
| --- |
| **FBG:** \_ \_ \_ \_ mmol/L  FBG not measured  **RBG:** \_ \_ \_ \_ mmol/L  RBG not measured  **HbA1c:** \_ \_ \_ \_ mmol/mol  HbA1c not measured  **LDL:** \_ \_ \_ \_ mmol/L  LDL not measured  **HDL:** \_ \_ \_ \_ mmol/L  HDL not measured  **TG:** \_ \_ \_ \_ mmol/L  TG not measured  **Urine ACR:** \_ \_ \_ \_ mg/mmol  ACR not measured |

**2. Any reported emergency complication(s) such as hypoglycemia, DKA during this period?**

Yes  No

If yes, please list:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Does this complication(s) require hospital admission?**

Yes  No (go to question 4)

**3. How many days of admission?** ……………days

**4. List of prescribed medications to patient during this period:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Yes** | **No** |
| Anti-diabetes |  |  |
| Anti-hypertensive |  |  |
| Anti-depressants |  |  |
| Heart medications |  |  |
| Dyslipidemia medications |  |  |
| Kidney disease medications |  |  |
| Sleep disorder |  |  |
|  |  |  |
|  |  |  |

**5. Diabetes Medications**

|  |  |  |
| --- | --- | --- |
| **Name** | **Frequency** |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Additional Notes:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Date Record Accessed:** \_\_/\_\_/\_\_

dd mm yy