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Note : Masters Theses

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Telephone OR face-to-face interview questionnaire

(ID _____)

1. At your practice / service.

- a Do you have access to a private room when consulting diabetes patients? 1 Yes 2 No
- b Do you have personal access, to any of the following? (**Read out all below**)
- 1 Telephone 2 Computer 3 Printer (*accept communal*) 4 Email within clinic (computer to computer)
- 5 Email to outside of clinic 6 Internet (Broadband – fast) 7 Internet (Dial up – slow)
- 8 Other (please specify) _____
- c Where do you usually carry out the administrative work for your patients?
- 1 A separate (or your own) room 2 A shared room 3 The receptionist/ office area
- 4 Other _____
- d What activities & assessments do you routinely carry out during a diabetes consultation? (excluding “Get Checked”) (**not prompted**)
- 1 Weight 2 Blood pressure 3 Physical activity 4 Diet 5 Feet
- 6 Advise / foot protection 7 Medication 8 Vision 9 Urine testing
- 10 Self BGL's 11 Other _____
- e Do you routinely check diabetes patient's latest laboratory results? 1 Yes 2 No
- **If yes**, which results would you normally discuss with patients? (**not prompted**)
- 1 HbA1c 2 Total cholesterol 3 LDL cholesterol 4 HDL cholesterol
- 5 Triglycerides (TAG's) 6 Serum Creatinine 7 Microalbuminuria 8 Other _____
- f Do you ever give out the “Green Prescription”? 1 Yes 2 No
- if **yes**, what activity do you most often prescribe? _____
- If **no**, is there a reason for this? _____

2. Regarding your diabetes management.

- a How would you rate your knowledge of best practice in the management of diabetes?
- 1 Excellent 2 Very good 3 Good 4 Fair 5 Poor
- b Are you aware of the New Zealand Guidelines, written for the “Management of Type 2 diabetes” (2003)?
- 1 Yes 2 No
- if **yes**, do you use these guidelines in your practice?
- 1 Always 2 Often 3 Sometimes 4 Rarely 5 Never

3. Regarding the detection of diabetes and its complications.

- a What are the most important risk factors for getting type 2 diabetes? (**not prompted** but prompt “characteristics about patients that alert you to suspect diabetes”)
- 1 Overweight 2 Hypertension
- 3 Dyslipidaemia (**and specify**) a) High TAG's b) High LDL-C or Total Chol. c) Low HDL-C
- 4 Lack of exercise 5 Age 6 Family History/ Genetic 7 Maori Ethnicity
- 8 Pacific Island Ethnicity 9 Southern Asian Ethnicity 10 Other _____

- b Can you name the appropriate tests, to diagnose type 2 diabetes? **(not prompted)**
- 1 Fasting venous plasma $\geq 7\text{mmol/L}$ (x 2) 2 OGTT/GTT 3 Random venous $> 11\text{mmol/L}$ (x 2)
 4 Other _____
- c What is the underlying pathology, or cause of: **(not prompted)**
- a. **Type 1:** 1 Autoimmune (“and how does that lead to type 1”) 2 Destruction of β Cells
 3 No insulin produced 4 Don’t know
- b. **Type 2:** 1 Insulin Resistance (“and how does that lead to type 2”) 2 Lack of glucose into *cells*
 3 Lack of insulin produced 4 Don’t know

4. Regarding the management of diabetes.

- a What are the main complications or diseases that occur in people with diabetes? **(not prompted)**
- 1 Heart Disease 2 Stroke 3 PVD 4 Retinopathy 5 Renal Disease 6 Neuropathy
 7 Ulcers / Wounds 8 Other _____
- b What are the main (modifiable) risk factors for diabetes complications? **(not prompted)**
- 1 High BGL’s 2 Hypertension 3 Smoking 4 High Cholesterol or LDL-C
 5 Low HDL-C 6 High TAG’s 7 Lack of exercise 8 Other _____

5. In your practice / service, how true are the following statements?

- a You feel valued, as a skilled practitioner, in the management of diabetes.
- 1 Always 2 Often 3 Sometimes 4 Rarely 5 Never
- b Your suggestions, regarding the management of patients with diabetes, would be taken seriously.
- 1 Always 2 Often 3 Sometimes 4 Rarely 5 Never
- c You feel supported in your management of diabetes patients?
- 1 Always 2 Often 3 Sometimes 4 Rarely 5 Never

- 6. Regarding education:** Would you like further diabetes education? 1 Yes 2 No
If yes, what areas would like further diabetes education in.

	Volunteered	Prompted
Interpretation of laboratory tests / results		
Medication		
Cultural understanding		
How to give lifestyle advice		

7. Relating to your work and diabetes consultations?

- a What days have you worked over the past week (last 7 days including yesterday)?
- 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 5 Friday 6 Saturday 7 Sunday

Computer program → random day selected is _____

- a On _____ how many hours did you work? _____ hrs
- b How many diabetes consultations did you carry out? _____ (number)
- c How many of these were “Get checked” consultations? _____ (number) or *Other special consult* _____

Please refer to the notes, of the diabetes patient/s you consulted on _____ **(selected day)**