

Participant ID

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Nickname

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Outcome Visit

01A	02A	03A	04A	05A	06A	07A	08A	09A	10A	11A
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Diabetes Prevention Program – Outcomes Study
Q03 MODIFIABLE ACTIVITY QUESTIONNAIRE

This form is completed at Annual Follow-up Visits (interview administered).

A. Participant Identification

1. Clinic number

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2. Participant number

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3. Nickname

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4. Date of randomization

month		day		year					

5. Sex Male

1

 Female

2

6. Outcome visit

01A	02A	03A	04A	05A	06A	07A	08A	09A	10A	11A
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 VISIT

7. Date of visit

month		day		year					

 KVSTDT replaced with DAYSRAND

Identification code of person reviewing completed form	<table border="1"><tr><td></td><td></td><td></td></tr></table>				Form entered in computer?	<table border="1"><tr><td></td></tr></table>	
FORMIN							

Participant ID

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Nickname

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Outcome Visit

01A	02A	03A	04A	05A	06A	07A	08A	09A	10A	11A
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PART II / MODIFIABLE ACTIVITY QUESTIONNAIRE (continued)

2. In general, how many HOURS per DAY do you usually spend watching television?

		.	
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KTVHRS
hours

3. Over the past year, have you spent more than one week confined to a bed or chair as a result of injury, illness or surgery?

Yes

1

 No

2

KBEDYN

If **YES**,

a. How many weeks over this past year were you confined to a bed or chair?

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 weeks

KBEDWKS

4. Do you have difficulty doing any of the following activities?

a. getting in or out of a bed or chair?

KDIFBED Yes

1

 No

2

b. walking across a small room without resting?

KDIFSWK

1

2

c. walking for 10 minutes without resting?

KDIFLWK

1

2

5. Did you ever compete in an individual or team sports (not including any time spent in Sports performed during school physical education classes)?

Yes

1

 No

2

KSPORT

If **YES**,

a. How many total years did you participate in competitive sports?

		.	
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 years

KSPRTYR

Participant ID

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Nickname

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Outcome Visit

01A	02A	03A	04A	05A	06A	07A	08A	09A	10A	11A
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Part II / MODIFIABLE ACTIVITY QUESTIONNAIRE (continued)

6. Have you had a job for more than one month over this past year from _____ to this _____?

List all JOBS that the individual held over the past year for more than one month. Account for all 12 months of the past year. If unemployed/disabled/retired/housewife during all or part of the past year, list as such and probe for job activities of a normal 8 hour, 5 day week.

Job Code	Job Name	Walk or bicycle to/from work TOTAL MIN/DAY	JOB MOS/YR Account for all 12 months	AVERAGE JOB SCHEDULE _____ DAYS/WK HRS/DAY		*Hrs spent sitting at work AVERAGE HRS/DAY	*Check the category that best describes job activities when not sitting A B C
a. <input type="text"/> <input type="text"/> _____ KJACODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KJAWALK	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> KJAMOS	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 3 KJAACTV
b. <input type="text"/> <input type="text"/> _____ KJBCODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KJBWALK	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> KJBMOS	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 3 KJBACTV
c. <input type="text"/> <input type="text"/> _____ KJCCODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KJCWALK	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> KJCMOS	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 3 KJCACTV
d. <input type="text"/> <input type="text"/> _____ KJDCODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KJDWALK	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> KJDMOS	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 3 KJDACTV

*Out of the total # of "Hrs/Day" reported working at this "job", how much of this time was usually spent sitting? Enter this # in the "Hrs Sitting" column, then place an "X" in the category which best describes their activities when not sitting.

JOB CODES

<u>Not employed outside of the home</u> 1. Student 2. Home Maker 3. Retired 4. Disabled 5. Unemployed	<u>Employed (or volunteer)</u> 6. Armed Services 7. Office Worker 8. Non-office Worker
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<u>Category A</u> (include all sitting activities) Sitting Standing still w/o heavy lifting Light cleaning, ironing, cooking, washing, dusting Driving a tractor, harvester, bus, taxi Jewelry making/weaving General office work Occasional/Short distance walking	<u>Category B</u> (include most indoor activities) Carrying light loads Continuous walking Heavy cleaning-mopping, sweeping, scrubbing, vacuuming Gardening-planting, weeding Painting/plastering Plumbing/Welding Electrical work Sheep herding	<u>Category C</u> (heavy industrial work, outdoor construction, farming) Carrying moderate to heavy loads Heavy construction Farming-hoeing, digging, mowing raking Digging ditches, shoveling Chopping (ax), sawing wood Tree/pole climbing Water/coal/wood hauling
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