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| IDENTIFICATION | |
| Diabetes disease status | 1 T2D T2D |
| 1. TODAY Study participant | 1 Yes    0 No TODAYPPT |

*Instructions: This form is completed through interview with the participant and—especially if the participant is a minor—with the parent, guardian, or other knowledgeable family member.*

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| PART A. PARTICIPANT DEMOGRAPHIC INFORMATION | | | | | |
| 1. Age at baseline | | 1 ≤13 years   years  3 > 15 years  AGE | | | |
| 1. What is the time since diabetes diagnosis? | | | | 1 ≤5 months  2 > 5 months DXTIME | |
| *Note: Patients diagnosed younger than 8 years old should not be enrolled. Participants must be diagnosed between the ages 8 & 17.* | | | | | |
| 1. Sex | | | | | 1 Male    2 Female SEX |
| 1. Race-ethnicity   RACE | | | | | |
| 1  Black, Non-Hispanic  2  Hispanic  3  White, Non-Hispanic  4  Other | | | | | |
| **PART B. PARTICIPANT MEDICAL HISTORY** | | | | | |
| 1. Participant’s birth weight | | |  | | |
|  | 1 Small (<2500g)   2 Normal (2500-4000g)  3 Large (>4000g)  BIRTHWT | | | | |
| 1. Sex maturity at diagnosis? | | | | 1 Yes    2 No SEXMATURITY | |
| *If male: …yes,if any growth of underarm or pubic hair* *If female: ….yes,if breasts had already begun to develop* | | | | | |
| 1. If female: | | | |  | |
| * 1. Has she had her first period? | | | | 1 Yes    2 No FEMPD | |
| *If yes:* How old was she when her  periods began? | | | | years FEMAGEPD | |
| * 1. Has she ever been pregnant? | | | | 1 Yes    2 No FEMPREG | |
| *If yes*: Number of pregnancies | | | | FEMPREGNUM | |
| Number of live births | | | | FEMLIVEBIRTH | |
| 1. Treatment for type 2 diabetes: is participant taking…   TRTMET | | | | | |
| * 1. Metformin? | | | | | 1 Yes    2 No |
| * 1. Insulin? | | | | | 1 Yes    2 No TRTINS |
| * 1. Any other diabetes medication such as   Thiazolidinedione, sulfonylurea, or  glitinide? | | | | | 1 Yes    2 No TRTOTH |
| 1. Has a healthcare provider ever diagnosed the participant with the following*…(ask of adult participant or family member providing consent for minor child)* | | | | | |
| *Note: questions 11 a-b were not asked of the TODAY cohort at screening or baseline.* | | | | | |
| * 1. High cholesterol or an abnormal amount of fat in the blood?   *Probe: Are you now or have you in the past taken a lipid or cholesterol lowering medication called a statin or simvastatin or one of those listed on this card [show card]?* | | | | | 1 Yes    2 No PPTCHOL |
| * 1. High blood pressure?   *Probe: This is also known as hypertension…Have you ever taken one of these medications [show card]?* | | | | | 1 Yes    2 No PPTBP |
| **PART C. FAMILY MEDICAL HISTORY** | | | | | |
| **Biological Mother** | | | | |  |
| While the participant’s mother was pregnant with the participant, did a health care provider ever tell her that she had diabetes? PIGEST | | | | | 1 Yes    2 No MOTHGEST |
| 1. Other than during a pregnancy, has the mother ever been diagnosed with diabetes? *Probe: This is also known as sugar...Do you know if she has ever taken one of the drugs listed [show card]?* | | | | | 1 Yes    2 No MOTHDIAB |
| 1. Has a health care provider ever diagnosed or treated the mother for the following… | | | | |  |
| * 1. High cholesterol or an abnormal amount of fat in the blood?   *Probe: Do you know if she has ever taken a lipid or cholesterol lowering medication called a statin or simvastatin or one of those listed on this card [show card]?* | | | | | 1 Yes    2 No MOTHCHOL |
| * 1. High blood pressure?   *Probe: This is also known as hypertension…Do you know if she has ever taken one of these medications [show card]?* | | | | | 1 Yes    2 No MOTHBP |
| **Biological Father** | | | | |  |
| 1. Has the father ever been diagnosed with diabetes? *Probe: This is also known as sugar...Do you know if he has ever taken one of the drugs listed [show card]?* | | | | | 1 Yes    2 No FATHDIAB |
| 1. Has a health care provider ever diagnosed or treated the father for the following… | | | | |  |
| * 1. High cholesterol or an abnormal amount of fat in the blood?   *Probe: Do you know if he has ever taken a lipid or cholesterol lowering medication called a statin or simvastatin or one of those listed on this card [show card]?* | | | | | 1 Yes    2 No FATHCHOL |
| * 1. High blood pressure?   *Probe: This is also known as hypertension…Do you know if he has ever taken one of these medications [show card]?* | | | | | 1 Yes    2 No FATHBP |
| **Siblings’ History (biologically related)** | | | | |  |
| Has a full sibling with history of diabetes? | | | | | 1 Yes    2 No FSIBDIAB |
| 1. Has a half sibling with history of diabetes? | | | | | 1 Yes    2 No HSIBDIAB |
| **Grandparents’ History (biologically related)** | | | | |  |
| Has any grandparent ever been diagnosed with diabetes? | | | | | 1 Yes    2 No GRANDDIAB |

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| LABORATORY VALUES | |
| Glucose | mg/dL GLU |
| C-peptide | .   ng/mL CPEP |
| 1. Autoantibodies |  |
| *Note: When TODAY started, the CBL was providing values for GAD Index (range 0-14.4) and IA2 Index (range 0-1.399); later the lab switched to providing GAD-DK (range 0-1802) and IA2-DK (range 0-42.5). All TODAY screening AAB are ’Index’ values. The cut-offs for AAB positive are:*   1. *GAD Index ≥ 0.085* 2. *IA2 Index ≥ 0.017* 3. *GAD-DK ≥ 33* 4. *IA2-DK ≥ 5* | |
| * 1. GAD-DK for genetics sample | GADGEN |
| * 1. GAD Index at first screening visit in TODAY cohort | .    GADTOD  GADTOD |
| * 1. IA2-DK for genetics sample | IA2GEN  IA2GEN |
| * 1. IA2 Index at first screening visit in TODAY cohort | .   IA2TOD  IA2TOD |