

Data Dictionary Codebook

05/24/2023 11:05am

	#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)												
Instrument: Tracking (tracking)																
	1	[record_id]	UID	text												
	2	[r_uid]	Recruitment ID	text Field Annotation: @HIDDEN												
	3	[recruitment_method]	Recruitment method	dropdown <table><tr><td>1</td><td>EHR list</td></tr><tr><td>2</td><td>Clinic-based</td></tr><tr><td>3</td><td>Community-based</td></tr><tr><td>4</td><td>Relative of contact on EHR list</td></tr><tr><td>5</td><td>Provider referral</td></tr><tr><td>10</td><td>Other type</td></tr></table>	1	EHR list	2	Clinic-based	3	Community-based	4	Relative of contact on EHR list	5	Provider referral	10	Other type
1	EHR list															
2	Clinic-based															
3	Community-based															
4	Relative of contact on EHR list															
5	Provider referral															
10	Other type															
	4	[recruitment_method_other] Show the field ONLY if: [recruitment_method]='10'	Other recruitment method	text												
	5	[round]	Round	checkbox <table><tr><td>1</td><td>round__1</td><td>Round 1</td></tr><tr><td>2</td><td>round__2</td><td>Round 2</td></tr></table> Field Annotation: @HIDDEN	1	round__1	Round 1	2	round__2	Round 2						
1	round__1	Round 1														
2	round__2	Round 2														
	6	[round1]	Round 1	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes															
0	No															
	7	[round2]	Round 2	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes															
0	No															
	8	[pt_getscare]	Where does pt get their care?	dropdown <table><tr><td>1</td><td>Grady</td></tr><tr><td>10</td><td>Other place</td></tr></table>	1	Grady	10	Other place								
1	Grady															
10	Other place															
	9	[pt_getscare_other] Show the field ONLY if: [pt_getscare]='10'	Other place of care	text												
	10	[pt_getscare_other_dr] Show the field ONLY if: [pt_getscare]='10'	Doctor seen at [pt_getscare_other]	text												

11	[pt_getscare_other_address] Show the field ONLY if: [pt_getscare]='10'	Address of [pt_getscare_other_dr]	text										
12	[pt_getscare_other_phone] Show the field ONLY if: [pt_getscare]='10'	Phone number of [pt_getscare_other_dr]	text (phone)										
13	[pt_getscare_grady] Show the field ONLY if: [pt_getscare]='1'	Which Grady doctor is seen?	text										
14	[last_name]	Last Name	text, Identifier										
15	[first_name]	First Name	text, Identifier										
16	[dob]	Date of birth	text (date_mdy), Identifier Field Annotation: @HIDEBUTTON										
17	[sex]	Sex	dropdown <table><tr><td>1</td><td>Female</td></tr><tr><td>2</td><td>Male</td></tr><tr><td>99</td><td>Missing</td></tr></table>	1	Female	2	Male	99	Missing				
1	Female												
2	Male												
99	Missing												
18	[age]	Age	text										
19	[language1]	Language - primary	text										
20	[language2]	Language - secondary	text										
21	[country_origin]	Country of Origin	text										
22	[site]	Recruitment site	dropdown <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Other clinical site</td></tr><tr><td>11</td><td>Other community site</td></tr></table>	1	Emory	2	Shifa Clinic	3	Grady	10	Other clinical site	11	Other community site
1	Emory												
2	Shifa Clinic												
3	Grady												
10	Other clinical site												
11	Other community site												
23	[site_other] Show the field ONLY if: [site]='10' or [site]='11'	Recruitment site - other	text										
24	[chw]	CHW Assigned	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen		
1	Hasan												
2	Sakila												
3	Zohra												
4	Nazneen												
25	[relative_uid]	UID of relative	text										
26	[ehr_date]	EHR pull date	text (date_mdy)										
27	[height_inches]	Height in inches from EHR <i>DO NOT CHANGE</i>	text (number)										
28	[weight_pounds]	Weight in pounds from EHR	text										
29	[weight_date]	Date of weight measurement	text (date_mdy)										

	30	[bmi]	BMI from EHR	calc Calculation: round((((weight_pounds))/([height_inches]* [height_inches])*703),1) Field Annotation: @hidden						
	31	[hba1c]	HbA1c from EHR	text (number_1dp)						
	32	[hba1c_other]	HbA1c from other source	text (number_1dp)						
	33	[hba1c_date]	HbA1c date	text (date_mdy)						
	34	[hba1c_source]	Source of HbA1c measurement	dropdown <table><tr><td>1</td><td>From EHR</td></tr><tr><td>2</td><td>Point of care</td></tr><tr><td>3</td><td>Reported from provider</td></tr></table>	1	From EHR	2	Point of care	3	Reported from provider
1	From EHR									
2	Point of care									
3	Reported from provider									
	35	[sbp]	Systolic blood pressure	text (number)						
	36	[dbp]	Diastolic blood pressure	text (number)						
	37	[date_bp]	Date of blood pressure measurement	text (date_mdy)						
	38	[address_street]	Section Header: <i>Contact Info</i> Street address	text, Identifier						
	39	[address_city]	City	text						
	40	[address_state]	State	text						
	41	[address_zip]	Zip code	text (zipcode), Identifier						
	42	[address_county]	County	text						
	43	[received_mailing]	Participant received mailing	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No		
1	Yes									
0	No									
	44	[mailing_whynot] Show the field ONLY if: [received_mailing] = '0'	If no:	dropdown <table><tr><td>1</td><td>Mailing returned to clinic as undeliverable</td></tr><tr><td>2</td><td>Participant reported not receiving the mailing</td></tr></table>	1	Mailing returned to clinic as undeliverable	2	Participant reported not receiving the mailing		
1	Mailing returned to clinic as undeliverable									
2	Participant reported not receiving the mailing									
	45	[phone_home]	Phone (home)	text (phone), Identifier						
	46	[phone_cell]	Phone (cell)	text (phone), Identifier						
	47	[email]	Email	text (email), Identifier						
	48	[backup_name]	Section Header: <i>Back-Up Contact</i> Name	text						
	49	[backup_phone]	Phone:	text (phone)						
	50	[backup_relationship]	Relationship	text						
	51	[success]	Section Header: <i>Final Outcomes</i> Successful/Unsuccessful <i>Successful refers to making contact with the participant or a relative on behalf of the participant</i>	dropdown <table><tr><td>1</td><td>Successful</td></tr><tr><td>2</td><td>Unsuccessful</td></tr></table>	1	Successful	2	Unsuccessful		
1	Successful									
2	Unsuccessful									
	52	[unsuccessful_responses] Show the field ONLY if: [success] = '2'	If unsuccessful, choose response:	dropdown <table><tr><td>1</td><td>No answer/Unable to leave a message</td></tr><tr><td>2</td><td>Left message on voicemail/answering machine</td></tr></table>	1	No answer/Unable to leave a message	2	Left message on voicemail/answering machine		
1	No answer/Unable to leave a message									
2	Left message on voicemail/answering machine									

				<table><tr><td>3</td><td>Left message with person who answered the phone</td></tr><tr><td>4</td><td>Busy signal</td></tr><tr><td>5</td><td>Wrong number</td></tr><tr><td>6</td><td>Disconnected phone/number not in service</td></tr><tr><td>7</td><td>Pt has not been contacted yet</td></tr><tr><td>8</td><td>Do not call - call limit reached</td></tr><tr><td>9</td><td>Pt visits PCP - other office location</td></tr></table>	3	Left message with person who answered the phone	4	Busy signal	5	Wrong number	6	Disconnected phone/number not in service	7	Pt has not been contacted yet	8	Do not call - call limit reached	9	Pt visits PCP - other office location								
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53	<div>[successful_responses]</div> <div>Show the field ONLY if: [success] = '1'</div>	If successful, choose response:		<div>dropdown</div> <table><tr><td>1</td><td>Not eligible</td></tr><tr><td>2</td><td>Declined to participate</td></tr><tr><td>3</td><td>Enrolled</td></tr><tr><td>4</td><td>Lost to follow-up</td></tr><tr><td>5</td><td>Ineligible post-consent</td></tr><tr><td>6</td><td>Eligible, pending enrollment</td></tr><tr><td>7</td><td>Reached, screening pending</td></tr><tr><td>8</td><td>Randomization pending</td></tr><tr><td>9</td><td>Randomized into study</td></tr></table>	1	Not eligible	2	Declined to participate	3	Enrolled	4	Lost to follow-up	5	Ineligible post-consent	6	Eligible, pending enrollment	7	Reached, screening pending	8	Randomization pending	9	Randomized into study				
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9	Randomized into study																									
54	<div>[declined_reason]</div> <div>Show the field ONLY if: [successful_responses] = '2'</div>	Declined reason		<div>dropdown</div> <table><tr><td>1</td><td>Extended travel out of country/state during intervention period</td></tr><tr><td>2</td><td>No time</td></tr><tr><td>3</td><td>Spouse/Adult child declined</td></tr><tr><td>4</td><td>Too sick</td></tr><tr><td>5</td><td>No one to bring</td></tr><tr><td>6</td><td>Personal problems</td></tr><tr><td>7</td><td>Too far</td></tr><tr><td>8</td><td>Not interested</td></tr><tr><td>9</td><td>Unable to participate in scheduled session</td></tr><tr><td>10</td><td>Unknown</td></tr><tr><td>20</td><td>Other</td></tr></table>	1	Extended travel out of country/state during intervention period	2	No time	3	Spouse/Adult child declined	4	Too sick	5	No one to bring	6	Personal problems	7	Too far	8	Not interested	9	Unable to participate in scheduled session	10	Unknown	20	Other
1	Extended travel out of country/state during intervention period																									
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7	Too far																									
8	Not interested																									
9	Unable to participate in scheduled session																									
10	Unknown																									
20	Other																									
55	<div>[declined_reason_other]</div> <div>Show the field ONLY if: [declined_reason] = '20'</div>	Declined reason: Other text		<div>text</div>																						
56	<div>[ineligible_reason]</div> <div>Show the field ONLY if: [successful_responses] = '1' or [successful_responses] = '5'</div>	Ineligible reason		<div>dropdown</div> <table><tr><td>1</td><td>Not South Asian</td></tr><tr><td>2</td><td>Does not have diabetes (confirm with PCP)</td></tr><tr><td>3</td><td>Does not speak English or Bengali/Bangla</td></tr></table>	1	Not South Asian	2	Does not have diabetes (confirm with PCP)	3	Does not speak English or Bengali/Bangla																
1	Not South Asian																									
2	Does not have diabetes (confirm with PCP)																									
3	Does not speak English or Bengali/Bangla																									

				<table><tr><td>4</td><td>Pregnant</td></tr><tr><td>5</td><td>Not a resident of Atlanta</td></tr><tr><td>6</td><td>Out of country at the time of recruitment</td></tr><tr><td>7</td><td>Person passed away/deceased</td></tr><tr><td>8</td><td>Changed PCP/No longer patient at participating PCP</td></tr><tr><td>9</td><td>Unable to perform unsupervised physical activity</td></tr><tr><td>10</td><td>Does not have high BP reading</td></tr><tr><td>20</td><td>Other</td></tr></table>	4	Pregnant	5	Not a resident of Atlanta	6	Out of country at the time of recruitment	7	Person passed away/deceased	8	Changed PCP/No longer patient at participating PCP	9	Unable to perform unsupervised physical activity	10	Does not have high BP reading	20	Other
4	Pregnant																			
5	Not a resident of Atlanta																			
6	Out of country at the time of recruitment																			
7	Person passed away/deceased																			
8	Changed PCP/No longer patient at participating PCP																			
9	Unable to perform unsupervised physical activity																			
10	Does not have high BP reading																			
20	Other																			
57	[ineligible_reason_other] Show the field ONLY if: [ineligible_reason] = '20'	Ineligible reason: Other text	text																	
58	[lost_to_fu] Show the field ONLY if: [successful_responses] = '4'	Lost to follow-up reason	text																	
59	[screened_yn]	Screening Form completed	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No													
1	Yes																			
0	No																			
60	[consent_date]	Consent date:	text (date_mdy)																	
61	[consented_by]	Consented by:	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table> Field Annotation: @HIDDEN	1	Hasan	2	Sakila	3	Zohra	4	Nazneen									
1	Hasan																			
2	Sakila																			
3	Zohra																			
4	Nazneen																			
62	[scanned]	Scanned <i>To be completed by program staff only</i>	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @HIDDEN	1	Yes	0	No													
1	Yes																			
0	No																			
63	[consent_check]	Consent check completed by:	dropdown <table><tr><td>1</td><td>Sadia</td></tr><tr><td>2</td><td>Shinu</td></tr><tr><td>3</td><td>Jen</td></tr><tr><td>4</td><td>Christina</td></tr><tr><td>5</td><td>Rehnuma</td></tr></table> Field Annotation: @HIDECHOICE="1,2,3"	1	Sadia	2	Shinu	3	Jen	4	Christina	5	Rehnuma							
1	Sadia																			
2	Shinu																			
3	Jen																			
4	Christina																			
5	Rehnuma																			

	64	[consent_form]	Consent form upload	file																
	65	[randomization]	Randomization	dropdown <table><tr><td>1</td><td>Treatment</td></tr><tr><td>2</td><td>Control</td></tr></table>	1	Treatment	2	Control												
1	Treatment																			
2	Control																			
	66	[randomization_date]	Randomization date	text (date_mdy)																
	67	[session1]	Session 1 Completed	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No												
1	Yes																			
0	No																			
	68	[session1_date] Show the field ONLY if: [session1] = '1'	a. Date of session 1	text (date_mdy)																
	69	[session1_time] Show the field ONLY if: [session1] = '1'	b. Time of session 1	text																
	70	[session1_language] Show the field ONLY if: [session1] = '1'	c. Language of session 1	dropdown <table><tr><td>1</td><td>Bengali</td></tr><tr><td>2</td><td>Punjabi</td></tr><tr><td>3</td><td>Urdu</td></tr><tr><td>4</td><td>English</td></tr></table>	1	Bengali	2	Punjabi	3	Urdu	4	English								
1	Bengali																			
2	Punjabi																			
3	Urdu																			
4	English																			
	71	[session1_location] Show the field ONLY if: [session1] = '1'	d. Location of session 1	dropdown <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Audio call</td></tr><tr><td>11</td><td>Video call</td></tr><tr><td>20</td><td>Participant's home</td></tr><tr><td>21</td><td>Restaurant</td></tr><tr><td>22</td><td>Other location</td></tr></table>	1	Emory	2	Shifa Clinic	3	Grady	10	Audio call	11	Video call	20	Participant's home	21	Restaurant	22	Other location
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	72	[session1_location_text] Show the field ONLY if: [session1_location] = '22' or [session1_location]='21'	Other location for session 1:	text																
	73	[session1_format] Show the field ONLY if: [session1]='1'	e. Format of session 1	dropdown <table><tr><td>1</td><td>Individual session</td></tr><tr><td>2</td><td>Group session</td></tr></table>	1	Individual session	2	Group session												
1	Individual session																			
2	Group session																			
	74	[session1_chw] Show the field ONLY if: [session1] = '1'	f. CHWs leading session 1	checkbox <table><tr><td>1</td><td>session1_chw__1</td><td>Hasan</td></tr><tr><td>2</td><td>session1_chw__2</td><td>Sakila</td></tr><tr><td>3</td><td>session1_chw__3</td><td>Zohra</td></tr></table>	1	session1_chw__1	Hasan	2	session1_chw__2	Sakila	3	session1_chw__3	Zohra							
1	session1_chw__1	Hasan																		
2	session1_chw__2	Sakila																		
3	session1_chw__3	Zohra																		

				4	session1_chw__4	Nazneen
	75	[session1_t2dm] Show the field ONLY if: [session1]='1'	i. CHW explained type 2 Diabetes and the role of glucose and insulin on blood sugar.	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	76	[session1_checkglucose] Show the field ONLY if: [session1]='1'	ii. CHW explained how to check blood glucose	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	77	[session1_diabetes_problems] Show the field ONLY if: [session1]='1'	iii. CHW explained diabetes symptoms and health problems associated with diabetes diagnosis	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	78	[session1_diab_bp] Show the field ONLY if: [session1]='1'	iv. CHW explained the correlation between diabetes and high blood pressure	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	79	[session1_highbp_danger] Show the field ONLY if: [session1]='1'	v. CHW explained the dangers of high blood pressure	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	80	[session1_read_bp] Show the field ONLY if: [session1]='1'	vi. CHW demonstrated how to measure and read blood pressure	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	81	[session1_control_bp] Show the field ONLY if: [session1]='1'	vii. CHW explained controlling blood pressure	dropdown	1	None
				2	Some	
				3	Most	
				4	All	
	82	[session1_minutes] Show the field ONLY if: [session1]='1'	Session 1 - total minutes	text (number)		
	83	[session2]	Session 2 Completed	dropdown	1	Yes

				<table><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	0	No														
0	No																			
84	[session2_date] Show the field ONLY if: [session2] = '1'	a. Date of session 2	text (date_mdy)																	
85	[session2_time] Show the field ONLY if: [session2] = '1'	b. Time of session 2	text																	
86	[session2_language] Show the field ONLY if: [session2] = '1'	c. Language of session 2	dropdown <table><tr><td>1</td><td>Bengali</td></tr><tr><td>2</td><td>Punjabi</td></tr><tr><td>3</td><td>Urdu</td></tr><tr><td>4</td><td>English</td></tr></table>		1	Bengali	2	Punjabi	3	Urdu	4	English								
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2	Punjabi																			
3	Urdu																			
4	English																			
87	[session2_location] Show the field ONLY if: [session2] = '1'	d. Location of session 2	dropdown <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Audio call</td></tr><tr><td>11</td><td>Video call</td></tr><tr><td>20</td><td>Participant's home</td></tr><tr><td>21</td><td>Restaurant</td></tr><tr><td>22</td><td>Other location</td></tr></table>		1	Emory	2	Shifa Clinic	3	Grady	10	Audio call	11	Video call	20	Participant's home	21	Restaurant	22	Other location
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88	[session2_location_text] Show the field ONLY if: [session2_location] = '22' or [session2_location]='21'	Other location for session 2:	text																	
89	[session2_format] Show the field ONLY if: [session2]='1'	e. Format of session 2	dropdown <table><tr><td>1</td><td>Individual session</td></tr><tr><td>2</td><td>Group session</td></tr></table>		1	Individual session	2	Group session												
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90	[session2_chw] Show the field ONLY if: [session2] = '1'	f. CHWs leading session 2	checkbox <table><tr><td>1</td><td>session2_chw__1</td><td>Hasan</td></tr><tr><td>2</td><td>session2_chw__2</td><td>Sakila</td></tr><tr><td>3</td><td>session2_chw__3</td><td>Zohra</td></tr><tr><td>4</td><td>session2_chw__4</td><td>Nazneen</td></tr></table> Field Annotation: @HIDECHOICE='1'		1	session2_chw__1	Hasan	2	session2_chw__2	Sakila	3	session2_chw__3	Zohra	4	session2_chw__4	Nazneen				
1	session2_chw__1	Hasan																		
2	session2_chw__2	Sakila																		
3	session2_chw__3	Zohra																		
4	session2_chw__4	Nazneen																		
91	[session2_myplate] Show the field ONLY if: [session2]='1'	i. CHW explained how to build a healthy plate using the My Plate Method	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr></table>		1	None	2	Some	3	Most										
1	None																			
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				<table><tr><td>4</td><td>All</td></tr></table>	4	All										
4	All															
	92	<div>[session2_fats]</div> <div>Show the field ONLY if: [session2]='1'</div>	ii. CHW explained what is fats, oils, and cholesterol	<div>dropdown</div> <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	93	<div>[session2_foodlabels]</div> <div>Show the field ONLY if: [session2]='1'</div>	iii. CHW explained how to read and understand food and drink labels	<div>dropdown</div> <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	94	<div>[session2_healthycooking]</div> <div>Show the field ONLY if: [session2]='1'</div>	iv. CHW explained tips for healthy cooking and ordering out	<div>dropdown</div> <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	95	<div>[session2_minutes]</div> <div>Show the field ONLY if: [session2]='1'</div>	Session 2 - total minutes	text (number)												
	96	<div>[session3]</div>	Session 3 Completed	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Field Annotation: @DEFAULT='0'</div>	1	Yes	0	No								
1	Yes															
0	No															
	97	<div>[session3_date]</div> <div>Show the field ONLY if: [session3] = '1'</div>	a. Date of session 3	text (date_mdy)												
	98	<div>[session3_time]</div> <div>Show the field ONLY if: [session3] = '1'</div>	b. Time of session 3	text												
	99	<div>[session3_language]</div> <div>Show the field ONLY if: [session3] = '1'</div>	c. Language of session 3	<div>dropdown</div> <table><tr><td>1</td><td>Bengali</td></tr><tr><td>2</td><td>Punjabi</td></tr><tr><td>3</td><td>Urdu</td></tr><tr><td>4</td><td>English</td></tr></table>	1	Bengali	2	Punjabi	3	Urdu	4	English				
1	Bengali															
2	Punjabi															
3	Urdu															
4	English															
	100	<div>[session3_location]</div> <div>Show the field ONLY if: [session3] = '1'</div>	d. Location of session 3	<div>dropdown</div> <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Audio call</td></tr><tr><td>11</td><td>Video call</td></tr><tr><td>20</td><td>Participant's home</td></tr></table>	1	Emory	2	Shifa Clinic	3	Grady	10	Audio call	11	Video call	20	Participant's home
1	Emory															
2	Shifa Clinic															
3	Grady															
10	Audio call															
11	Video call															
20	Participant's home															

				<table><tr><td>21</td><td>Restaurant</td></tr><tr><td>22</td><td>Other location</td></tr></table>	21	Restaurant	22	Other location								
21	Restaurant															
22	Other location															
	101	<div>[session3_location_text]</div> <div>Show the field ONLY if: [session3_location] = '22' or [session3_location]='21'</div>	Other location for session 3:	text												
	102	<div>[session3_format]</div> <div>Show the field ONLY if: [session3]='1'</div>	e. Format of session 3	dropdown <table><tr><td>1</td><td>Individual session</td></tr><tr><td>2</td><td>Group session</td></tr></table>	1	Individual session	2	Group session								
1	Individual session															
2	Group session															
	103	<div>[session3_chw]</div> <div>Show the field ONLY if: [session3] = '1'</div>	f. CHWs leading session 3	checkbox <table><tr><td>1</td><td>session3_chw__1</td><td>Hasan</td></tr><tr><td>2</td><td>session3_chw__2</td><td>Sakila</td></tr><tr><td>3</td><td>session3_chw__3</td><td>Zohra</td></tr><tr><td>4</td><td>session3_chw__4</td><td>Nazneen</td></tr></table> <div>Field Annotation: @HIDECHOICE='1'</div>	1	session3_chw__1	Hasan	2	session3_chw__2	Sakila	3	session3_chw__3	Zohra	4	session3_chw__4	Nazneen
1	session3_chw__1	Hasan														
2	session3_chw__2	Sakila														
3	session3_chw__3	Zohra														
4	session3_chw__4	Nazneen														
	104	<div>[session3_stress]</div> <div>Show the field ONLY if: [session3]='1'</div>	i. CHW explained stress: bad stress and eustress (good)	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	105	<div>[session3_stresseffects]</div> <div>Show the field ONLY if: [session3]='1'</div>	ii. CHW explained effects of stress on body, mood, and behavior choices	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	106	<div>[session3_stresscoping]</div> <div>Show the field ONLY if: [session3]='1'</div>	iii. CHW explained healthy ways to cope with stress	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	107	<div>[session3_mindfulness]</div> <div>Show the field ONLY if: [session3]='1'</div>	iv. CHW discussed 3 steps of mindfulness	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	108	<div>[session3_minutes]</div> <div>Show the field ONLY if: [session3]='1'</div>	Session 3 - total minutes	text (number)												
	109	<div>[session4]</div>	Session 4 Completed	dropdown <table><tr><td>1</td><td>Yes</td></tr></table>	1	Yes										
1	Yes															

				<table><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	0	No														
0	No																			
	110	[session4_date] Show the field ONLY if: [session4] = '1'	a. Date of session 4	text (date_mdy)																
	111	[session4_time] Show the field ONLY if: [session4] = '1'	b. Time of session 4	text																
	112	[session4_language] Show the field ONLY if: [session4] = '1'	c. Language of session 4	dropdown <table><tr><td>1</td><td>Bengali</td></tr><tr><td>2</td><td>Punjabi</td></tr><tr><td>3</td><td>Urdu</td></tr><tr><td>4</td><td>English</td></tr></table>	1	Bengali	2	Punjabi	3	Urdu	4	English								
1	Bengali																			
2	Punjabi																			
3	Urdu																			
4	English																			
	113	[session4_location] Show the field ONLY if: [session4] = '1'	d. Location of session 4	dropdown <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Audio call</td></tr><tr><td>11</td><td>Video call</td></tr><tr><td>20</td><td>Participant's home</td></tr><tr><td>21</td><td>Restaurant</td></tr><tr><td>22</td><td>Other location</td></tr></table>	1	Emory	2	Shifa Clinic	3	Grady	10	Audio call	11	Video call	20	Participant's home	21	Restaurant	22	Other location
1	Emory																			
2	Shifa Clinic																			
3	Grady																			
10	Audio call																			
11	Video call																			
20	Participant's home																			
21	Restaurant																			
22	Other location																			
	114	[session4_location_text] Show the field ONLY if: [session4_location] = '22' or [session4_location]='21'	Other location for session 4:	text																
	115	[session4_format] Show the field ONLY if: [session4]='1'	e. Format of session 4	dropdown <table><tr><td>1</td><td>Individual session</td></tr><tr><td>2</td><td>Group session</td></tr></table>	1	Individual session	2	Group session												
1	Individual session																			
2	Group session																			
	116	[session4_chw] Show the field ONLY if: [session4] = '1'	f. CHWs leading session 4	checkbox <table><tr><td>1</td><td>session4_chw__1</td><td>Hasan</td></tr><tr><td>2</td><td>session4_chw__2</td><td>Sakila</td></tr><tr><td>3</td><td>session4_chw__3</td><td>Zohra</td></tr><tr><td>4</td><td>session4_chw__4</td><td>Nazneen</td></tr></table> Field Annotation: @HIDECHOICE='1'	1	session4_chw__1	Hasan	2	session4_chw__2	Sakila	3	session4_chw__3	Zohra	4	session4_chw__4	Nazneen				
1	session4_chw__1	Hasan																		
2	session4_chw__2	Sakila																		
3	session4_chw__3	Zohra																		
4	session4_chw__4	Nazneen																		
	117	[session4_calories] Show the field ONLY if: [session4]='1'	i. CHW explained calories	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr></table>	1	None	2	Some	3	Most										
1	None																			
2	Some																			
3	Most																			

				<table><tr><td>4</td><td>All</td></tr></table>	4	All										
4	All															
118	<div>[session4_healthyweight]</div> <div>Show the field ONLY if: [session4]='1'</div>	ii. CHW explained BMI and healthy weight	dropdown	<table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
119	<div>[session4_recexercise]</div> <div>Show the field ONLY if: [session4]='1'</div>	iii. CHW explained recommended exercise and tips to build activity into your day	dropdown	<table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
120	<div>[session4_typespa]</div> <div>Show the field ONLY if: [session4]='1'</div>	iv. CHW explained types of physical activity	dropdown	<table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
121	<div>[session4_minutes]</div> <div>Show the field ONLY if: [session4]='1'</div>	Session 4 - total minutes	text (number)													
122	<div>[session5]</div>	Session 5 Completed	dropdown	<table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Field Annotation: @DEFAULT='0'</div>	1	Yes	0	No								
1	Yes															
0	No															
123	<div>[session5_date]</div> <div>Show the field ONLY if: [session5] = '1'</div>	a. Date of session 5	text (date_mdy)													
124	<div>[session5_time]</div> <div>Show the field ONLY if: [session5] = '1'</div>	b. Time of session 5	text													
125	<div>[session5_language]</div> <div>Show the field ONLY if: [session5] = '1'</div>	c. Language of session 5	dropdown	<table><tr><td>1</td><td>Bengali</td></tr><tr><td>2</td><td>Punjabi</td></tr><tr><td>3</td><td>Urdu</td></tr><tr><td>4</td><td>English</td></tr></table>	1	Bengali	2	Punjabi	3	Urdu	4	English				
1	Bengali															
2	Punjabi															
3	Urdu															
4	English															
126	<div>[session5_location]</div> <div>Show the field ONLY if: [session5] = '1'</div>	d. Location of session 5	dropdown	<table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr><tr><td>10</td><td>Audio call</td></tr><tr><td>11</td><td>Video call</td></tr><tr><td>20</td><td>Participant's home</td></tr></table>	1	Emory	2	Shifa Clinic	3	Grady	10	Audio call	11	Video call	20	Participant's home
1	Emory															
2	Shifa Clinic															
3	Grady															
10	Audio call															
11	Video call															
20	Participant's home															

				<table><tr><td>21</td><td>Restaurant</td></tr><tr><td>22</td><td>Other location</td></tr></table>	21	Restaurant	22	Other location								
21	Restaurant															
22	Other location															
	127	<p>[session5_location_text]</p> <p>Show the field ONLY if: [session5_location] = '22' or [session5_location]='21'</p>	Other location for session 5:	text												
	128	<p>[session5_format]</p> <p>Show the field ONLY if: [session5]='1'</p>	e. Format of session 5	dropdown <table><tr><td>1</td><td>Individual session</td></tr><tr><td>2</td><td>Group session</td></tr></table>	1	Individual session	2	Group session								
1	Individual session															
2	Group session															
	129	<p>[session5_chw]</p> <p>Show the field ONLY if: [session5] = '1'</p>	f. CHWs leading session 5	checkbox <table><tr><td>1</td><td>session5_chw__1</td><td>Hasan</td></tr><tr><td>2</td><td>session5_chw__2</td><td>Sakila</td></tr><tr><td>3</td><td>session5_chw__3</td><td>Zohra</td></tr><tr><td>4</td><td>session5_chw__4</td><td>Nazneen</td></tr></table> <p>Field Annotation: @HIDECHOICE='1'</p>	1	session5_chw__1	Hasan	2	session5_chw__2	Sakila	3	session5_chw__3	Zohra	4	session5_chw__4	Nazneen
1	session5_chw__1	Hasan														
2	session5_chw__2	Sakila														
3	session5_chw__3	Zohra														
4	session5_chw__4	Nazneen														
	130	<p>[session5_diabetescomp]</p> <p>Show the field ONLY if: [session5]='1'</p>	i. CHW explained diabetes-related complications	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	131	<p>[session5_bloodsugar]</p> <p>Show the field ONLY if: [session5]='1'</p>	ii. CHW explained high and low blood sugar symptoms	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	132	<p>[session5_managemeds]</p> <p>Show the field ONLY if: [session5]='1'</p>	iii. CHW explained how to manage medications	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	133	<p>[session5_risk_heartdisease]</p> <p>Show the field ONLY if: [session5]='1'</p>	iv. CHW explained lower risk for heart disease	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr><tr><td>4</td><td>All</td></tr></table>	1	None	2	Some	3	Most	4	All				
1	None															
2	Some															
3	Most															
4	All															
	134	<p>[session5_heartattack]</p> <p>Show the field ONLY if: [session5]='1'</p>	v. CHW explained heart attack vs. heart burn	dropdown <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Some</td></tr><tr><td>3</td><td>Most</td></tr></table>	1	None	2	Some	3	Most						
1	None															
2	Some															
3	Most															

				<table><tr><td>4</td><td>All</td></tr></table>	4	All																
4	All																					
	135	[session5_minutes] Show the field ONLY if: [session5]='1'	Session 5 - total minutes	text (number)																		
	136	[tracking_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																					
1	Unverified																					
2	Complete																					
Instrument: Screening Form (screening_form)																						
	137	[s_completed_by]	Completed by	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen										
1	Hasan																					
2	Sakila																					
3	Zohra																					
4	Nazneen																					
	138	[s_date]	Date	text (date_mdy)																		
	139	[s_referral]	Referral?	radio <table><tr><td>1</td><td>Yes</td></tr></table>	1	Yes																
1	Yes																					
	140	[s_referral_by] Show the field ONLY if: [s_referral]='1'	Referred by:	text																		
	141	[s_bp_measured] Show the field ONLY if: [s_referral]='1'	BP measured at screening?	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																					
0	No																					
	142	[s_sbp] Show the field ONLY if: [s_bp_measured]='1'	Systolic BP:	text (number)																		
	143	[s_dpb] Show the field ONLY if: [s_bp_measured]='1'	Diastolic BP	text (number)																		
	144	[s_sa_descent_ethnicity] Show the field ONLY if: [s_sa_descent] = '1'	If yes:	dropdown <table><tr><td>1</td><td>Bangladeshi</td></tr><tr><td>2</td><td>Indian</td></tr><tr><td>3</td><td>Pakistani</td></tr><tr><td>4</td><td>Nepali</td></tr><tr><td>5</td><td>Sri Lankan</td></tr><tr><td>6</td><td>Indo-Caribbean</td></tr><tr><td>7</td><td>Maldivian</td></tr><tr><td>8</td><td>Bhutanese</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Bangladeshi	2	Indian	3	Pakistani	4	Nepali	5	Sri Lankan	6	Indo-Caribbean	7	Maldivian	8	Bhutanese	99	Skipped
1	Bangladeshi																					
2	Indian																					
3	Pakistani																					
4	Nepali																					
5	Sri Lankan																					
6	Indo-Caribbean																					
7	Maldivian																					
8	Bhutanese																					
99	Skipped																					
	145	[s_eligibility] Show the field ONLY if: [s_referral]='1'	Eligibility confirmed by: <i>Initials</i>	text																		

	146	[s_first_name]	First name:	text Field Annotation: @DEFAULT='[first_name]'																								
	147	[s_last_name]	Last name:	text Field Annotation: @DEFAULT='[last_name]'																								
	148	[s_address_street]	Address - street	text Field Annotation: @DEFAULT='[address_street]'																								
	149	[s_address_city]	Address - city	text Field Annotation: @DEFAULT='[address_city]'																								
	150	[s_address_zip]	Address - zip	text (zipcode) Field Annotation: @DEFAULT='[address_zip]'																								
	151	[s_address_county]	Address - county	text Field Annotation: @DEFAULT='[address_county]'																								
	152	[s_phone_cell]	Cell phone	text (phone) Field Annotation: @DEFAULT='[phone_cell]'																								
	153	[s_phone_home]	Home phone	text (phone) Field Annotation: @DEFAULT='[phone_home]'																								
	154	[s_preferred_times]	Preferred days/times to call	notes																								
	155	[s_pcp]	Primary Care Doctor's Office:	text																								
	156	[s_physician]	Physician's Name:	text																								
	157	[s_sa_descent]	1. Are you of South Asian descent?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No (not eligible)</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No (not eligible)	99	Skipped																		
1	Yes																											
0	No (not eligible)																											
99	Skipped																											
	158	[s_languages]	2. Which languages are you comfortable speaking and reading in?	descriptive																								
	159	[s_language_speaking]	Speaking:	checkbox <table><tr><td>1</td><td>s_language_speaking__1</td><td>English</td></tr><tr><td>2</td><td>s_language_speaking__2</td><td>Bangla/Benga</td></tr><tr><td>3</td><td>s_language_speaking__3</td><td>Urdu</td></tr><tr><td>4</td><td>s_language_speaking__4</td><td>Punjabi</td></tr><tr><td>5</td><td>s_language_speaking__5</td><td>Hindi</td></tr><tr><td>6</td><td>s_language_speaking__6</td><td>Nepali</td></tr><tr><td>7</td><td>s_language_speaking__7</td><td>Other</td></tr><tr><td>99</td><td>s_language_speaking__99</td><td>Skipped</td></tr></table>	1	s_language_speaking__1	English	2	s_language_speaking__2	Bangla/Benga	3	s_language_speaking__3	Urdu	4	s_language_speaking__4	Punjabi	5	s_language_speaking__5	Hindi	6	s_language_speaking__6	Nepali	7	s_language_speaking__7	Other	99	s_language_speaking__99	Skipped
1	s_language_speaking__1	English																										
2	s_language_speaking__2	Bangla/Benga																										
3	s_language_speaking__3	Urdu																										
4	s_language_speaking__4	Punjabi																										
5	s_language_speaking__5	Hindi																										
6	s_language_speaking__6	Nepali																										
7	s_language_speaking__7	Other																										
99	s_language_speaking__99	Skipped																										
	160	[s_language_speaking_other] Show the field ONLY if: [s_language_speaking(7)] = '1'	Other speaking language:	text																								
	161	[s_language_reading]	Reading:	checkbox <table><tr><td>1</td><td>s_language_reading__1</td><td>English</td></tr><tr><td>2</td><td>s_language_reading__2</td><td>Bangla/Bengali</td></tr><tr><td>3</td><td>s_language_reading__3</td><td>Urdu</td></tr></table>	1	s_language_reading__1	English	2	s_language_reading__2	Bangla/Bengali	3	s_language_reading__3	Urdu															
1	s_language_reading__1	English																										
2	s_language_reading__2	Bangla/Bengali																										
3	s_language_reading__3	Urdu																										

				<table><tr><td>4</td><td>s_language_reading__4</td><td>Punjabi</td></tr><tr><td>5</td><td>s_language_reading__5</td><td>Hindi</td></tr><tr><td>6</td><td>s_language_reading__6</td><td>Nepali</td></tr><tr><td>7</td><td>s_language_reading__7</td><td>Other</td></tr><tr><td>99</td><td>s_language_reading__99</td><td>Skipped</td></tr></table>	4	s_language_reading__4	Punjabi	5	s_language_reading__5	Hindi	6	s_language_reading__6	Nepali	7	s_language_reading__7	Other	99	s_language_reading__99	Skipped
4	s_language_reading__4	Punjabi																	
5	s_language_reading__5	Hindi																	
6	s_language_reading__6	Nepali																	
7	s_language_reading__7	Other																	
99	s_language_reading__99	Skipped																	
	162	[s_language_reading_other] Show the field ONLY if: [s_language_reading(7)] = '1'	Other reading language:	text															
	163	[s_dob] Show the field ONLY if: [s_language_reading(7)] = '1'	3. What is your date of birth? <i>[If the person was born before 1945 or born after 1999 then they are not eligible.]</i>	text (date_mdy) Field Annotation: @HIDEBUTTON @DEFAULT='[dob]'															
	164	[s_gender] Show the field ONLY if: [s_language_reading(7)] = '1'	4. What is your gender?	dropdown <table><tr><td>1</td><td>Female</td></tr><tr><td>2</td><td>Male</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Female	2	Male	99	Skipped									
1	Female																		
2	Male																		
99	Skipped																		
	165	[s_pregnant] Show the field ONLY if: [s_gender] = '1'	5. [Females only, if male, SKIP] Are you currently pregnant?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	99	Skipped									
1	Yes																		
0	No																		
99	Skipped																		
	166	[s_diabetes_dx] Show the field ONLY if: [s_language_reading(7)] = '1'	6. Have you received a diagnosis of diabetes?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	99	Skipped									
1	Yes																		
2	No																		
99	Skipped																		
	167	[s_bp_dx] Show the field ONLY if: [s_language_reading(7)] = '1'	7. Have you received a diagnosis of hypertension or been told you have high blood pressure?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	99	Skipped									
1	Yes																		
0	No																		
99	Skipped																		
	168	[s_bp_last] Show the field ONLY if: [s_language_reading(7)] = '1'	a. What was your last blood pressure reading?	descriptive															
	169	[s_bp_sbp_last] Show the field ONLY if: [s_language_reading(7)] = '1'	Systolic:	text (number)															
	170	[s_bp_dbp_last] Show the field ONLY if: [s_language_reading(7)] = '1'	Diastolic	text															
	171	[s_bp_last_date] Show the field ONLY if: [s_language_reading(7)] = '1'	Date of last BP reading	text (date_mdy)															
	172	[s_bp_last_source] Show the field ONLY if: [s_language_reading(7)] = '1'	Source of last BP reading	dropdown <table><tr><td>1</td><td>EHR/patient portal</td></tr><tr><td>2</td><td>Personal BP cuff</td></tr><tr><td>3</td><td>Study-provided BP cuff</td></tr><tr><td>4</td><td>Pharmacy/community BP cuff</td></tr></table>	1	EHR/patient portal	2	Personal BP cuff	3	Study-provided BP cuff	4	Pharmacy/community BP cuff							
1	EHR/patient portal																		
2	Personal BP cuff																		
3	Study-provided BP cuff																		
4	Pharmacy/community BP cuff																		
	173	[s_bp_scheduled] Show the field ONLY if: [s_language_reading(7)] = '1'	b. (If they do not know, or do not have the documentation readily available, please plan a time to take a measurement). Measurement scheduled for:	text															

174	[s_participate_classes]	8. Are you interested in participating in 5 monthly classes on diabetes management and healthy living? The classes will be provided in your language and at no cost.	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Maybe</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	1	Yes	2	No	3	Maybe	99	Skipped							
1	Yes																	
2	No																	
3	Maybe																	
99	Skipped																	
175	[s_virtual]	9. Would you be willing to participate in a virtual session?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>7</td><td>Don't know</td></tr> </table>	1	Yes	0	No	7	Don't know									
1	Yes																	
0	No																	
7	Don't know																	
176	[s_virtual_device] Show the field ONLY if: [s_virtual]='1'	9b. If yes, do you have access to a device to participate in a virtual session?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>77</td><td>Don't know</td></tr> </table>	1	Yes	0	No	77	Don't know									
1	Yes																	
0	No																	
77	Don't know																	
177	[s_device_types] Show the field ONLY if: [s_virtual_device]='1'	9c. If yes, which device(s)? Check all that apply:	checkbox <table border="1"> <tr><td>1</td><td>s_device_types__1</td><td>Tablet</td></tr> <tr><td>2</td><td>s_device_types__2</td><td>Smart phone</td></tr> <tr><td>3</td><td>s_device_types__3</td><td>Desk top</td></tr> <tr><td>4</td><td>s_device_types__4</td><td>Laptop</td></tr> <tr><td>77</td><td>s_device_types__77</td><td>Don't know</td></tr> </table>	1	s_device_types__1	Tablet	2	s_device_types__2	Smart phone	3	s_device_types__3	Desk top	4	s_device_types__4	Laptop	77	s_device_types__77	Don't know
1	s_device_types__1	Tablet																
2	s_device_types__2	Smart phone																
3	s_device_types__3	Desk top																
4	s_device_types__4	Laptop																
77	s_device_types__77	Don't know																
178	[s_device_internet]	10. Are you able to access a device with strong internet connections for virtual sessions?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No (If "No", may not be eligible. Please check with Study Coordinator.)</td></tr> <tr><td>77</td><td>Don't know</td></tr> </table>	1	Yes	0	No (If "No", may not be eligible. Please check with Study Coordinator.)	77	Don't know									
1	Yes																	
0	No (If "No", may not be eligible. Please check with Study Coordinator.)																	
77	Don't know																	
179	[s_weight_scale]	11. Do you have a weight scale at home that you can use to take weight measurements?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> </table>	1	Yes	2	No											
1	Yes																	
2	No																	
180	[s_participate_pa]	12. Are you able to participate in moderate physical activity such as brisk walking without having symptoms such as chest pain or dizziness?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No - may not be eligible. Please check with Study Coordinator</td></tr> <tr><td>77</td><td>Don't know</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	1	Yes	0	No - may not be eligible. Please check with Study Coordinator	77	Don't know	99	Skipped							
1	Yes																	
0	No - may not be eligible. Please check with Study Coordinator																	
77	Don't know																	
99	Skipped																	
181	[s_participate_pa_notes]	12. Notes	text															
182	[s_days]	13. What days and times are you available to attend classes? Please check the days/write in the times below.	descriptive															
183	[s_monday]	Monday	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> </table>	1	Yes													
1	Yes																	
184	[s_monday_time] Show the field ONLY if:	Monday times:	text															

		[s_monday] = '1'		
	185	[s_tuesday]	Tuesday	radio 1 Yes
	186	[s_tuesday_time] Show the field ONLY if: [s_tuesday] = '1'	Tuesday times:	text
	187	[s_wednesday]	Wednesday	radio 1 Yes
	188	[s_wednesday_time] Show the field ONLY if: [s_wednesday] = '1'	Wednesday times:	text
	189	[s_thursday]	Thursday	radio 1 Yes
	190	[s_thursday_time] Show the field ONLY if: [s_thursday] = '1'	Thursday times:	text
	191	[s_friday]	Friday	radio 1 Yes
	192	[s_friday_time] Show the field ONLY if: [s_friday] = '1'	Friday times:	text
	193	[s_saturday]	Saturday	radio 1 Yes
	194	[s_saturday_time] Show the field ONLY if: [s_saturday] = '1'	Saturday times:	text
	195	[s_sunday]	Sunday	radio 1 Yes
	196	[s_sunday_time] Show the field ONLY if: [s_sunday] = '1'	Sunday times:	text
	197	[s_alldays]	Available all days and times	radio 1 Yes
	198	[s_days_notes]	Notes:	notes
	199	[s_vacation]	14. Are you planning to go on a vacation or visit family members outside of Atlanta for longer than one month during the next 6-7 months?	dropdown 1 Yes 0 No 99 Skipped
	200	[s_vacation_howlong] Show the field ONLY if: [s_vacation] = '1'	If yes, for how long?	text
	201	[s_notes]	Notes:	notes

	202	[screening_form_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete		
0	Incomplete											
1	Unverified											
2	Complete											
Instrument: Intake Form (intake_form)												
	203	[i_chw]	CHW name	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen
1	Hasan											
2	Sakila											
3	Zohra											
4	Nazneen											
	204	[i_date]	Intake Date	text (date_mdy)								
	205	[i_weight]	Section Header: <i>CLINICAL MEASURES</i> Weight (pounds) - self-reported	text (number)								
	206	[i_weight_method]	Method of weight estimation	dropdown <table><tr><td>1</td><td>Measured in-person by the CHW</td></tr><tr><td>2</td><td>Self-reported by participant</td></tr><tr><td>3</td><td>Documentation from patient portal or provider EHR</td></tr><tr><td>4</td><td>No weight measurement available at the time of survey completion</td></tr></table>	1	Measured in-person by the CHW	2	Self-reported by participant	3	Documentation from patient portal or provider EHR	4	No weight measurement available at the time of survey completion
1	Measured in-person by the CHW											
2	Self-reported by participant											
3	Documentation from patient portal or provider EHR											
4	No weight measurement available at the time of survey completion											
	207	[i_weight_method_self] Show the field ONLY if: [i_weight_method] = '2'	Self-reported by participant method:	dropdown <table><tr><td>1</td><td>Measured by personal scale</td></tr><tr><td>2</td><td>Last time weighted at the doctor's office</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	Measured by personal scale	2	Last time weighted at the doctor's office	3	Other		
1	Measured by personal scale											
2	Last time weighted at the doctor's office											
3	Other											
	208	[i_weight_method_other] Show the field ONLY if: [i_weight_method_self] = '3'	Other weight estimation method	text								
	209	[i_height]	Height (total inches) - Self-reported	text (number, Min: 48, Max: 84)								
	210	[i_bmi]	BMI	calc Calculation: round((((i_weight])/([i_height]*[i_height])*703),1)								
	211	[i_bpcuff]	Do you have a blood pressure cuff at home?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No				
1	Yes											
0	No											
	212	[i_sbp1] Show the field ONLY if: [i_bpcuff]='1'	Systolic blood pressure 1	text (number)								
	213	[i_dbp1] Show the field ONLY if: [i_bpcuff]='1'	Diastolic blood pressure 1	text (number)								
	214	[i_countrybirth]	Section Header: <i>DEMOGRAPHICS</i>	dropdown								

			1.1 What country were you born in? 1.1 আপনি কোন দেশে জন্মেছিলেন?	<table><tr><td>1</td><td>Bangladesh</td></tr><tr><td>2</td><td>India</td></tr><tr><td>3</td><td>Nepal</td></tr><tr><td>4</td><td>Pakistan</td></tr><tr><td>7</td><td>United States</td></tr><tr><td>8</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	Bangladesh	2	India	3	Nepal	4	Pakistan	7	United States	8	Other	99	Skipped				
1	Bangladesh																					
2	India																					
3	Nepal																					
4	Pakistan																					
7	United States																					
8	Other																					
99	Skipped																					
	215	[i_countrybirth_other] Show the field ONLY if: [i_countrybirth] = '8'	Other country	text																		
	216	[i_years_us] Show the field ONLY if: [i_countrybirth] = '1' or [i_countrybirth] = '3' or [i_countrybirth] = '2' or [i_countrybirth] = '4' or [i_countrybirth] = '6' or [i_countrybirth] = '5' or [i_countrybirth] = '8'	1.2 If not born in US: What is the total number of years you have lived in the United States? 1.2 যদি ইউএস-এ জন্ম না হয়ে থাকে: মোট কত বছর যাবৎ আপনি ইউএস-এ বসবাস করছেন?	text Custom alignment: RH																		
	217	[i_education]	1.3 What is your highest level of education? 1.3 আপনি সবচেয়ে বেশি কোন গ্রেড বা স্কুল বর্ষ পর্যন্ত পড়াশোনা করেছেন?	<table><tr><td colspan="2">dropdown</td></tr><tr><td>1</td><td>Never attended school</td></tr><tr><td>2</td><td>Grades 1 through 11 (some school)</td></tr><tr><td>3</td><td>Grade 12 or GED (high school graduate)</td></tr><tr><td>4</td><td>College 1 year to 3 years (Some college or technical school)</td></tr><tr><td>6</td><td>College 4 years or more (College graduate)</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	dropdown		1	Never attended school	2	Grades 1 through 11 (some school)	3	Grade 12 or GED (high school graduate)	4	College 1 year to 3 years (Some college or technical school)	6	College 4 years or more (College graduate)	98	Refused	99	Skipped		
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6	College 4 years or more (College graduate)																					
98	Refused																					
99	Skipped																					
	218	[i_marital]	1.4 What is your marital status? 1.4 আপনার বৈবাহিক অবস্থা কি?	<table><tr><td colspan="2">dropdown</td></tr><tr><td>1</td><td>Married</td></tr><tr><td>2</td><td>Divorced</td></tr><tr><td>3</td><td>Widowed</td></tr><tr><td>4</td><td>Separated</td></tr><tr><td>5</td><td>Never married</td></tr><tr><td>6</td><td>Member of unmarried couple</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	dropdown		1	Married	2	Divorced	3	Widowed	4	Separated	5	Never married	6	Member of unmarried couple	98	Refused	99	Skipped
dropdown																						
1	Married																					
2	Divorced																					
3	Widowed																					
4	Separated																					
5	Never married																					
6	Member of unmarried couple																					
98	Refused																					
99	Skipped																					

	219	[i_employment]	1.5 Are you currently... (Current employment status) 1.5 আপনি কি বর্তমানে...	<div>dropdown</div> <table><tr><td>1</td><td>Employed for wages</td></tr><tr><td>2</td><td>Self-employed</td></tr><tr><td>3</td><td>A homemaker</td></tr><tr><td>4</td><td>A student</td></tr><tr><td>5</td><td>Retired</td></tr><tr><td>6</td><td>Unemployed</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Employed for wages	2	Self-employed	3	A homemaker	4	A student	5	Retired	6	Unemployed	77	Don't know / Not sure	98	Refused	99	Skipped
1	Employed for wages																					
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6	Unemployed																					
77	Don't know / Not sure																					
98	Refused																					
99	Skipped																					
	220	[i_english_fluency]	Section Header: ENGLISH PROFICIENCY ইংরেজি দক্ষতা 2.1 How well do you speak English? 2.1 আপনি কত ভালো ইংরেজি বলতে পারেন?	<div>dropdown</div> <table><tr><td>1</td><td>Very well</td></tr><tr><td>2</td><td>Well</td></tr><tr><td>3</td><td>Not well</td></tr><tr><td>4</td><td>Not at all</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Very well	2	Well	3	Not well	4	Not at all	77	Don't know / Not sure	98	Refused	99	Skipped				
1	Very well																					
2	Well																					
3	Not well																					
4	Not at all																					
77	Don't know / Not sure																					
98	Refused																					
99	Skipped																					
	221	[i_language_home]	What language do you speak at home?	<div>dropdown</div> <table><tr><td>1</td><td>Mostly English</td></tr><tr><td>2</td><td>Mix of English/Native language (specify)</td></tr><tr><td>3</td><td>Mostly Native (specify)</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Mostly English	2	Mix of English/Native language (specify)	3	Mostly Native (specify)	99	Skipped										
1	Mostly English																					
2	Mix of English/Native language (specify)																					
3	Mostly Native (specify)																					
99	Skipped																					
	222	[i_language_native] Show the field ONLY if: [i_language_home] = '2' or [i_language_home] = '3'	Native language:	text																		
	223	[i_self_health]	Section Header: HEALTH RELATED QUALITY OF LIFE স্বাস্থ্য সম্পর্কিত জীবনের গুণমান 3.1 In general, would you say your overall health is: 3.1 আপনি কি বলবেন সাধারণভাবে আপনার স্বাস্থ্য:	<div>dropdown</div> <table><tr><td>1</td><td>Excellent</td></tr><tr><td>2</td><td>Very good</td></tr><tr><td>3</td><td>Good</td></tr><tr><td>4</td><td>Fair</td></tr><tr><td>5</td><td>Poor</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Excellent	2	Very good	3	Good	4	Fair	5	Poor	77	Don't know / Not sure	99	Skipped				
1	Excellent																					
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3	Good																					
4	Fair																					
5	Poor																					
77	Don't know / Not sure																					
99	Skipped																					

Field Annotation: @HIDECHOICE='99'

224 [i_days_physical]

3.2 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

3.2 এবার আপনার শারীরিক রোগ এবং আঘাত বা ক্ষত সহ শারীরিক স্বাস্থ্যের বিষয়ে চিন্তা করে বললে, গত 30 দিনের মধ্যে কত দিনের জন্য আপনার শারীরিক স্বাস্থ্য ভালো ছিল না?

dropdown

0	0 - None
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30	30
77	Don't know / Not sure
98	Refused
99	Skipped

Field Annotation: @HIDECHOICE='99'

225 [i_days_mental]

3.3 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

dropdown

0	0 - None
1	1

		3.3 এবার মানসিক চাপ ও ডিপ্রেসন/বিষণ্নতা এবং আবেগ-অনুভূতির সমস্যা সহ আপনার মানসিক স্বাস্থ্যের বিষয়ে চিন্তা করে বললে, গত 30 দিনে কত দিনের জন্য আপনার মানসিক স্বাস্থ্য ভালো ছিল না?	<table><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr><tr><td>30</td><td>30</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29	30	30	77	Don't know / Not sure	98	Refused	99	Skipped
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226	<p>[i_days_usualactivities]</p> <p>Show the field ONLY if: [i_days_physical] = '1' or [i_days_physical] = '2' or [i_days_physical] = '3' or [i_days_physical] = '4' or [i_days_physical] = '5' or [i_days_physical] = '6' or [i_days_physical] = '7' or</p>	<p>3.4 During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?</p> <p>3.4 গত 30 দিনে, কত দিনের জন্য ভগ্ন শারীরিক বা মানসিক স্বাস্থ্য আপনার সাধারণ কাজকর্ম যেমন নিজের যত্ন করা, কাজ করা বা বিনোদনে বাধা দিয়েছিল?</p>	<p>dropdown</p> <table><tr><td>0</td><td>0 - None</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr></table>	0	0 - None	1	1	2	2	3	3	4	4	5	5																																																				
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27	27
28	28
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30	30
77	Don't know / Not sure
96	N/A
98	Refused
99	Skipped

Field Annotation: @HIDECHOICE='99'

227	[i_se1]	<p>Section Header: <i>HEALTH SELF-EFFICACY</i></p> <p>4.1 You feel comfortable asking your doctor about questions on health issues you don't understand or know.</p> <p>4.1 স্বাস্থ্য বিষয়ক কোন কিছু আপনি না বুঝলে বা না জানলে ডাক্তারকে তা জিগেস করতে আপনার কোন সমস্যা হয়না।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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228	[i_se2]	<p>4.2 You feel comfortable about going to the doctor alone.</p> <p>4.2 ডাক্তারের কাছে একা যেতে আপনার কোন সমস্যা হয়না।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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229	[i_se3]	<p>4.3 You feel comfortable about picking up the phone and investigating where you can go to get medical care.</p> <p>4.3 ফোন করে কোথায় কোথায় স্বাস্থ্য সেবা পেতে পারবেন তার খোঁজ খবর নিতে আপনার আত্মবিশ্বাস রয়েছে।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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230	[i_se4]	<p>4.4 You know where to go to get medical attention.</p> <p>4.4. স্বাস্থ্য সেবা পেতে কোথায় যেতে হবে, আপনি তা জানেন।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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2	Somewhat disagree														
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231	[i_se5]	<p>4.5 You prefer to have others accompany you to the doctor for support.</p> <p>4.5 ডাক্তারের কাছে যেতে সাহায্য করার জন্য আপনি চান যে অন্য কেউ আপনার সাথে যাক।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	232	[i_se6]	4.6 You can effectively use the public transportation system. 4.6 পাব্লিক পরিবহনের মাধ্যমে সিটিতে সঠিক পথ খুঁজে নিতে আপনার তেমন সমস্যা হয়না।	dropdown <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	233	[i_se7]	4.7 You have the right to use some of your family income to take care of your personal medical needs. 4.7 নিজের চিকিৎসার প্রয়োজনে পরিবারের আয় থেকে কিছু টাকা নেবার অধিকার আপনার রয়েছে।	dropdown <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	234	[i_se8]	4.8 You can make your own decisions regarding health concerns. 4.8 স্বাস্থ্য বিষয়ক সিদ্ধান্ত আপনি নিজেই নিতে পারেন।	dropdown <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	235	[i_pa]	Section Header: <i>PHYSICAL ACTIVITY</i> শারীরিক কাজকর্ম/ব্যায়াম 5.1 During the past week, did you participate in any physical activities such as running, gardening, or walking for exercise? Interviewer note: Include up to three activities. It is not for you to decide whether or not something counts as physical activity. If the participant is unsure, re-read the question and tell them that it is up to them to include an activity."	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Yes	2	No	77	Don't know / Not sure	98	Refused	99	Skipped		
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	236	[i_pa_1_yn] Show the field ONLY if: [i_pa] = '1'	ACTIVITY 1 কাজ 1	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes															
0	No															
	237	[i_pa_1_type] Show the field ONLY if: [i_pa_1_yn] = '1'	5.2a What was the main type of physical activity or exercise during the past week?	text												

		5.2a গত সপ্তাহে আপনি কোন প্রকারের শারীরিক কাজ বা ব্যায়ামে সবচেয়ে বেশি সময় কাটিয়েছেন?																																																	
238	<div>[i_pa_1_days]</div> <div>Show the field ONLY if: [i_pa_1_yn] = '1'</div>	<div>5.2b How many times per week did you take part in this activity during the past week?</div> <div>5.2b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?</div>	<div>dropdown</div> <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped																										
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239	<div>[i_pa_1_time]</div> <div>Show the field ONLY if: [i_pa_1_yn] = '1'</div>	<div>5.2c When you took part in this activity, for how many minutes or hours did you usually keep at it?</div> <div>5.2c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?</div>	<div>dropdown</div> <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr><tr><td>45</td><td>45 minutes</td></tr><tr><td>50</td><td>50 minutes</td></tr><tr><td>55</td><td>55 minutes</td></tr><tr><td>60</td><td>60 minutes</td></tr><tr><td>75</td><td>75 minutes</td></tr><tr><td>90</td><td>90 minutes</td></tr><tr><td>120</td><td>120 minutes</td></tr><tr><td>150</td><td>150 minutes</td></tr><tr><td>180</td><td>180 minutes</td></tr><tr><td>210</td><td>210 minutes</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes	45	45 minutes	50	50 minutes	55	55 minutes	60	60 minutes	75	75 minutes	90	90 minutes	120	120 minutes	150	150 minutes	180	180 minutes	210	210 minutes	77	Don't know	98	Refused	99	Skipped
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	240	[i_pa_2_yn] Show the field ONLY if: [i_pa_1_yn] = '1'	ACTIVITY 2 কাজ 2	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																														
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	241	[i_pa_2_type] Show the field ONLY if: [i_pa_2_yn] = '1'	5.3a What other type of physical activity gave you the second most exercise during the past week? 5.3a গত সপ্তাহে আপনার করা আর কোন শারীরিক কার্যক্রম আপনাকে দ্বিতীয় সর্বাধিক ব্যায়াম দিয়েছিলো?	text																																		
	242	[i_pa_2_days] Show the field ONLY if: [i_pa_2_yn] = '1'	5.3b How many times per week did you take part in this activity during the past week? 5.3b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?	dropdown <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped												
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	243	[i_pa_2_time] Show the field ONLY if: [i_pa_2_yn] = '1'	5.3c When you took part in this activity, for how many minutes or hours did you usually keep at it? 5.3c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?	dropdown <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr><tr><td>45</td><td>45 minutes</td></tr><tr><td>50</td><td>50 minutes</td></tr><tr><td>55</td><td>55 minutes</td></tr><tr><td>60</td><td>60 minutes</td></tr><tr><td>75</td><td>75 minutes</td></tr><tr><td>90</td><td>90 minutes</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes	45	45 minutes	50	50 minutes	55	55 minutes	60	60 minutes	75	75 minutes	90	90 minutes
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	244	<p>[i_pa_3_yn]</p> <p>Show the field ONLY if: [i_pa_2_yn] = '1'</p>	ACTIVITY 3 কাজ 3	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
1	Yes																											
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	245	<p>[i_pa_3_type]</p> <p>Show the field ONLY if: [i_pa_3_yn] = '1'</p>	5.4a What other type of physical activity gave you the third most exercise during the past week? 5.4a গত সপ্তাহে আর কোন শারীরিক কার্যক্রম আপনার তৃতীয় সর্বাধিক ব্যায়াম দিয়েছিলো?	text																								
	246	<p>[i_pa_3_days]</p> <p>Show the field ONLY if: [i_pa_3_yn] = '1'</p>	5.4b How many times per week did you take part in this activity during the past week? 5.4b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?	dropdown <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped		
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	247	<p>[i_pa_4_time]</p> <p>Show the field ONLY if: [i_pa_3_yn] = '1'</p>	5.4c When you took part in this activity, for how many minutes or hours did you usually keep at it? 5.4c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?	dropdown <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr><tr><td>45</td><td>45 minutes</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes	45	45 minutes
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90	90 minutes
120	120 minutes
180	180 minutes
210	210 minutes
77	Don't know
98	Refused
99	Skipped

Field Annotation: @HIDECHOICE='99'

248 [i_salt_cooking]

Section Header: *Nutrition*

6.1 Over the past week, how often was salt used in cooking?

dropdown

1	Never
2	Sometimes
3	Most of the time
4	All the time
77	Don't know/Not sure
98	Refused
99	Skipped

Custom alignment: LV

Field Annotation: @HIDECHOICE='99'

249 [i_salt_add]

6.2 Over the past week, did you add salt to the food you eat AFTER it was served?

dropdown

1	Yes
2	No
77	Don't know/Not sure
98	Refused
99	Skipped

Custom alignment: LV

Field Annotation: @HIDECHOICE='99'

250 [i_salty_snacks]

6.3 Over the past month, how often did you eat salty foods or snacks?

dropdown

1	Never or less than 1 time in the past month
2	1 time in the past month
3	2-3 times in the past month
4	1 time per week
5	2 times per week
6	3-4 times per week
7	5-6 times per week
8	1 time per day
9	2 or more times per day

				<table><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	77	Don't know/Not sure	98	Refused	99	Skipped																																		
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	251	[i_salt_rec]	6.4 How do you think your daily salt intake compares to the amount of salt recommended by health professionals?	<p>dropdown</p> <table><tr><td>1</td><td>I eat less salt than recommended</td></tr><tr><td>2</td><td>I eat about the right amount of salt</td></tr><tr><td>3</td><td>I eat more salt than recommended</td></tr><tr><td>77</td><td>I don't know</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	I eat less salt than recommended	2	I eat about the right amount of salt	3	I eat more salt than recommended	77	I don't know	99	Skipped																														
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77	I don't know																																											
99	Skipped																																											
	252	[i_salt_damage]	6.5 Do you think that eating too much salt could damage your health?	<p>dropdown</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Yes	2	No	77	Don't know	99	Skipped																																
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	253	[i_fruit_amt]	<p>Section Header: <i>NUTRITION</i> পুষ্টি Now think about the foods you ate or drank in the past 30 days, including meals and snacks. এবার গত মাসে, মানে গত 30 দিনে, আপনি প্রধান খাবার ও স্ন্যাক্স সমেত যে খাবার বা পানীয় খেয়েছিলেন সেসব বিষয়ে চিন্তা করে দেখুন। Interviewer instructions: If a respondent indicates that they consume a food item every day then enter the number of times per day. If the respondent indicates that they eat a food less than daily, then enter the times per week or times per month. Do not enter times per day unless the respondent reports that he/she consumed that food each day during the past month. ENTER QUANTITY IN DAYS, WEEKS, OR MONTHS IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK "WAS THAT PER DAY, WEEK, OR MONTH?"</p> <p>6.6 In the past 30 days, not including juices, how often did you eat fruit? You can tell me times per day, times per week, or times per month.</p> <p>6.6 জুস বা ফলের রস যদি বাদ দেওয়া হয় তাহলে আপনি কত ঘন ঘন ফল খেয়েছিলেন? আপনি প্রতি দিনে যত বার, প্রতি সপ্তাহে যত বার বা প্রতি মাসে যত বার খেয়েছেন, তা আমাকে জানাতে পারেন।</p> <p>INTERVIEWER NOTE: INCLUDE FRESH, FROZEN OR CANNED FRUIT. DO NOT INCLUDE DRIED FRUITS.</p>	<p>dropdown</p> <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19
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27	27
28	28
29	29
30	30
555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV
Field Annotation: @HIDECHOICE='999'

254 [i_fruit_freq]
Show the field ONLY if:
[i_fruit_amt] = '1' or [i_fruit_amt] = '2' or [i_fruit_amt] = '3' or [i_fruit_amt] = '4' or [i_fruit_amt] = '5' or [i_fruit_amt] = '6' or [i_fruit_amt] = '7' or [i_fruit_amt] = '8' or [i_fruit_amt] = '9' or [i_fruit_amt] = '11' or [i_fruit_amt] = '10' or [i_fruit_amt] = '12' or [i_fruit_amt] = '13' or [i_fruit_amt] = '14' or [i_fruit_amt] = '15' or [i_fruit_amt] = '16' or [i_fruit_amt] = '17' or [i_fruit_amt] = '18' or [i_fruit_amt] = '19' or [i_fruit_amt] = '20' or [i_fruit_amt] = '21' or [i_fruit_amt] = '22' or [i_fruit_amt] = '23' or [i_fruit_amt] = '24' or [i_fruit_amt] = '25' or [i_fruit_amt] = '26' or [i_fruit_amt] = '27' or [i_fruit_amt] = '28' or [i_fruit_amt] = '29' or [i_fruit_amt] = '30' or [i_fruit_amt] = '555'

Fruit frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV
Field Annotation: @HIDECHOICE='99'

255 [i_fruit_other]
Show the field ONLY if:
[i_fruit_amt] = '555'

Fruit - other amount

text
Custom alignment: LV

256	[i_soda_amt]	<p>6.7 In the past 30 days, how often did you drink regular soda? You can tell me times per day, times per week, or times per month.</p> <p>6.7 ডায়েট সোডা বাদ দিয়ে, কত ঘন ঘন আপনি রেগুলার সোডা পান করেছেন? আপনি আমাকে প্রতি দিনে, প্রতি সপ্তাহে অথবা প্রতি মাসে যতবার পান করেছেন, তার হিসাব দিতে পারেন।</p> <p>INTERVIEWER NOTE: INCLUDE COKE, SPRITE, GINGER ALE, ETC. DO NOT INCLUDE DIET SODAS.</p>	<div>dropdown</div> <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr><tr><td>30</td><td>30</td></tr><tr><td>555</td><td>Other amount</td></tr><tr><td>777</td><td>Don't know</td></tr><tr><td>888</td><td>Refused</td></tr><tr><td>999</td><td>Skipped</td></tr></table> <div>Custom alignment: LV Field Annotation: @HIDECHOICE='999'</div>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29	30	30	555	Other amount	777	Don't know	888	Refused	999	Skipped
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257	[i_soda_freq] Show the field ONLY if:	Soda frequency	<div>dropdown</div> <table><tr><td>1</td><td>Times per day</td></tr><tr><td>2</td><td>Times per week</td></tr></table>	1	Times per day	2	Times per week																																																																		
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258	[i_soda_other] Show the field ONLY if: [i_soda_amt] = '555'	Soda - other amount	text Custom alignment: LV																																				
259	[i_ssb_amt] 6.8 In the past 30 days, how often did you drink sugary drinks other than regular soda? You can tell me times per day, times per week, or times per month. 6.8 রেগুলার সোডা বাদ দিয়ে, কত ঘন ঘন আপনি চিনি বা মিষ্টি যুক্ত পানীয় পান করেছেন? আপনি আমাকে প্রতি দিনে, প্রতি সপ্তাহে অথবা প্রতি মাসে যতবার পান করেছেন, তার হিসাব দিতে পারেন। INTERVIEWER NOTE: INCLUDE SWEET TEA, CHAI, LASSI, ENGERY DRINK (RED BULL), MANGO JUICE (SHEZAN), ETC. DO NOT INCLUDE DIET DRINKS AND 100% FRUIT JUICE.	6.8 In the past 30 days, how often did you drink sugary drinks other than regular soda? You can tell me times per day, times per week, or times per month. 6.8 রেগুলার সোডা বাদ দিয়ে, কত ঘন ঘন আপনি চিনি বা মিষ্টি যুক্ত পানীয় পান করেছেন? আপনি আমাকে প্রতি দিনে, প্রতি সপ্তাহে অথবা প্রতি মাসে যতবার পান করেছেন, তার হিসাব দিতে পারেন। INTERVIEWER NOTE: INCLUDE SWEET TEA, CHAI, LASSI, ENGERY DRINK (RED BULL), MANGO JUICE (SHEZAN), ETC. DO NOT INCLUDE DIET DRINKS AND 100% FRUIT JUICE.	dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17
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30	30
555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

Field Annotation: @HIDECHOICE='999'

260 [i_ssb_freq]

Show the field ONLY if:

[i_ssb_amt] = '1' or [i_ssb_amt] = '2' or [i_ssb_amt] = '3' or [i_ssb_amt] = '4' or [i_ssb_amt] = '5' or [i_ssb_amt] = '6' or [i_ssb_amt] = '7' or [i_ssb_amt] = '8' or [i_ssb_amt] = '9' or [i_ssb_amt] = '11' or [i_ssb_amt] = '10' or [i_ssb_amt] = '12' or [i_ssb_amt] = '13' or [i_ssb_amt] = '14' or [i_ssb_amt] = '15' or [i_ssb_amt] = '16' or [i_ssb_amt] = '17' or [i_ssb_amt] = '18' or [i_ssb_amt] = '19' or [i_ssb_amt] = '20' or [i_ssb_amt] = '21' or [i_ssb_amt] = '22' or [i_ssb_amt] = '23' or [i_ssb_amt] = '24' or [i_ssb_amt] = '25' or [i_ssb_amt] = '26' or [i_ssb_amt] = '27' or [i_ssb_amt] = '28' or [i_ssb_amt] = '29' or [i_ssb_amt] = '30' or [i_ssb_amt] = '555'

Sugar sweetened beverage frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV

Field Annotation: @HIDECHOICE='99'

261 [i_ssb_other]

Show the field ONLY if:

Sugar sweetened beverage - other amount

text

Custom alignment: LV

		[i_ssb_amt] = '555'																																																																								
	262	[i_friedpotato_amt]	<div>6.9 In the past 30 days, how often did you eat any kinds of fried potatoes, including those in aloo chop or samosas, or French fries?</div> <div>6.9 আপনি আলুর চপ বা সিঙ্গাড়া, বা ফ্রেঞ্চ ফ্রাইয়ের মত ভাজা আলু কত বার খেয়েছিলেন?</div> <div>INTERVIEWER NOTE: "DO NOT INCLUDE POTATO CHIPS."</div>	<div>dropdown</div> <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr><tr><td>30</td><td>30</td></tr><tr><td>555</td><td>Other amount</td></tr><tr><td>777</td><td>Don't know</td></tr><tr><td>888</td><td>Refused</td></tr><tr><td>999</td><td>Skipped</td></tr></table> <div>Custom alignment: LV Field Annotation: @HIDECHOICE='999'</div>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29	30	30	555	Other amount	777	Don't know	888	Refused	999	Skipped
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	263	[i_friedpotato_freq] Show the field ONLY if:	Fried potato frequency	<div>dropdown</div> <table><tr><td>1</td><td>Times per day</td></tr></table>	1	Times per day																																																																				
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	264	[i_friedpotato_other] Show the field ONLY if: [i_friedpotato_amt] = '555'	Fried potato - other amount	text Custom alignment: LV																								
	265	[i_potato_amt] 6.10 In the past 30 days, how often did you eat any other kind of potatoes, such as aloo bortha, mishti aloo, dry potato curry, or potatoes used in vegetable, meat, or fish curries? 6.10 আপনি অন্য ভাবে কতবার আলু ভর্তা, মিষ্টি আলু, শুকনো আলুর তরকারি, বা শাক সজ্জি, মাংস বা মাছে আলু যুক্ত করে আলু খেয়েছিলেন? INTERVIEWER NOTE: "INCLUDE ALL TYPES OF POTATOES EXCEPT FRIED."		dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11
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555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV
Field Annotation: @HIDECHOICE='999'

266

[i_potato_freq]

Show the field ONLY if:
[i_potato_amt] = '1' or [i_potato_amt] = '2' or [i_potato_amt] = '3' or [i_potato_amt] = '4' or [i_potato_amt] = '5' or [i_potato_amt] = '6' or [i_potato_amt] = '7' or [i_potato_amt] = '8' or [i_potato_amt] = '9' or [i_potato_amt] = '10' or [i_potato_amt] = '11' or [i_potato_amt] = '12' or [i_potato_amt] = '13' or [i_potato_amt] = '14' or [i_potato_amt] = '15' or [i_potato_amt] = '16' or [i_potato_amt] = '17' or [i_potato_amt] = '18' or [i_potato_amt] = '19' or [i_potato_amt] = '20' or [i_potato_amt] = '21' or [i_potato_amt] = '22' or [i_potato_amt] = '23' or [i_potato_amt] = '24' or [i_potato_amt] = '25' or [i_potato_amt] = '26' or [i_potato_amt] = '27' or [i_potato_amt] = '28' or [i_potato_amt] = '29' or [i_potato_amt] = '30' or [i_potato_amt] = '555' or [i_potato_amt] = '777' or [i_potato_amt] = '888' or [i_potato_amt] = '999'

Other potato frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV
Field Annotation: @HIDECHOICE='99'

		2' or [i_potato_amt] = '2 3' or [i_potato_amt] = '2 4' or [i_potato_amt] = '2 5' or [i_potato_amt] = '2 6' or [i_potato_amt] = '2 7' or [i_potato_amt] = '2 8' or [i_potato_amt] = '2 9' or [i_potato_amt] = '3 0' or [i_potato_amt] = '55 5'																																																														
	267	[i_potato_other] Show the field ONLY if: [i_potato_amt] = '555'	Other potato - other amount	text Custom alignment: LV																																																												
	268	[i_vegetable_amt] 6.11 In the past 30 days, not including lettuce and potatoes, how often did you eat other vegetables? 6.11 লেটুস পাতা ও আলু বাদে আপনি কত ঘন ঘন অন্যান্য শাক সব্জি খেয়েছেন? INTERVIEWER NOTE: READ IF RESPONDENT ASKS ABOUT WHAT TO INCLUDE: "INCLUDE TOMATOES, GREEN BEANS, CARROTS, CORN, CABBAGE, BEAN SPROUTS, COLLARD GREENS, AND BROCCOLI. INCLUDE RAW, COOKED, CANNED, OR FROZEN VEGETABLES. DO NOT INCLUDE RICE."	dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr></table>		0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29
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777	Don't know														
888	Refused														
999	Skipped														
269	<p>[i_vegetable_freq]</p> <p>Show the field ONLY if: [i_vegetable_amt] = '1' or [i_vegetable_amt] = '2' or [i_vegetable_amt] = '3' or [i_vegetable_amt] = '4' or [i_vegetable_amt] = '5' or [i_vegetable_amt] = '6' or [i_vegetable_amt] = '7' or [i_vegetable_amt] = '8' or [i_vegetable_amt] = '9' or [i_vegetable_amt] = '10' or [i_vegetable_amt] = '11' or [i_vegetable_amt] = '12' or [i_vegetable_amt] = '13' or [i_vegetable_amt] = '14' or [i_vegetable_amt] = '15' or [i_vegetable_amt] = '16' or [i_vegetable_amt] = '17' or [i_vegetable_amt] = '18' or [i_vegetable_amt] = '19' or [i_vegetable_amt] = '20' or [i_vegetable_amt] = '21' or [i_vegetable_amt] = '22' or [i_vegetable_amt] = '23' or [i_vegetable_amt] = '24' or [i_vegetable_amt] = '25' or [i_vegetable_amt] = '26' or [i_vegetable_amt] = '27' or [i_vegetable_amt] = '28' or [i_vegetable_amt] = '29' or [i_vegetable_amt] = '30' or [i_vegetable_amt] = '555'</p>	Other vegetable frequency	<p>dropdown</p> <table><tr><td>1</td><td>Times per day</td></tr><tr><td>2</td><td>Times per week</td></tr><tr><td>3</td><td>Times per month</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Times per day	2	Times per week	3	Times per month	99	Skipped				
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270	<p>[i_vegetable_other]</p> <p>Show the field ONLY if: [i_vegetable_amt] = '555'</p>	Other vegetable - other amount	<p>text</p> <p>Custom alignment: LV</p>												
271	<p>[i_inst_support_1]</p>	<p>Section Header: <i>Social Support</i> সোশাল বা সামাজিক সহায়তা <i>PROMIS Instrumental Support</i></p> <p>7.1 Someone is around to make meals if I am unable to do it myself</p>	<p>dropdown</p> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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	272	[i_inst_support_2]	7.2 I have someone to take me shopping if I need it	dropdown <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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	273	[i_inst_support_3]	7.3 I have someone to help me if I'm sick in bed	dropdown <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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3	Sometimes															
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	274	[i_inst_support_4]	7.4 I have someone to pick up medicine for me if I need it	dropdown <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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	275	[i_inst_support_5]	7.5 I have someone to take me to the doctor if I need it	dropdown <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always		
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3	Sometimes															
4	Usually															
5	Always															
	276	[i_inst_support_6]	7.6 There is someone around to help me if I need it	dropdown <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr></table>	1	Never	2	Rarely	3	Sometimes						
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	277	[i_inst_support_7]	7.7 I can find someone to drive me places if I need it	<p>dropdown</p> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped															
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	278	[i_inst_support_8]	7.8 I can get help cleaning up around my home if I need it	<p>dropdown</p> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped															
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	279	[i_diab_management]	DIABETES MANAGEMENT ONLY শুধু ডায়াবেটিস নিয়ন্ত্রণ INTERVIEWER NOTE: In the following section, I will ask about how you manage your diabetes as well as how you interact with your doctors to control your diabetes.	descriptive																											
	280	[i_diab_manage]	8.1 How do you manage your diabetes? (Select all that apply) 8.1 আপনি কিভাবে নিজের ডায়াবেটিস নিয়ন্ত্রণে রাখেন? (যে কটা প্রযোজ্য সেসব বেছে নিন)	<p>checkbox</p> <table><tr><td>1</td><td>i_diab_manage__1</td><td>Medication</td></tr><tr><td>2</td><td>i_diab_manage__2</td><td>Insulin</td></tr><tr><td>3</td><td>i_diab_manage__3</td><td>Physical activity / exercise</td></tr><tr><td>4</td><td>i_diab_manage__4</td><td>Diet control</td></tr><tr><td>5</td><td>i_diab_manage__5</td><td>Traditional medicine</td></tr><tr><td>6</td><td>i_diab_manage__6</td><td>Other</td></tr><tr><td>98</td><td>i_diab_manage__98</td><td>Refused</td></tr><tr><td>77</td><td>i_diab_manage__77</td><td>Don't know / Not sure</td></tr><tr><td>99</td><td>i_diab_manage__99</td><td>Skipped</td></tr></table>	1	i_diab_manage__1	Medication	2	i_diab_manage__2	Insulin	3	i_diab_manage__3	Physical activity / exercise	4	i_diab_manage__4	Diet control	5	i_diab_manage__5	Traditional medicine	6	i_diab_manage__6	Other	98	i_diab_manage__98	Refused	77	i_diab_manage__77	Don't know / Not sure	99	i_diab_manage__99	Skipped
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	281	[i_diab_manage_med] Show the field ONLY if: [i_diab_manage(1)] = '1'	Medication name:	text																																																				
	282	[i_diab_manage_other] Show the field ONLY if: [i_diab_manage(6)] = '1'	Other:	text																																																				
	283	[i_chk_feet_amt] 8.2 About how often do you check your feet for sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional. 8.2 আপনি প্রায় কতবার আপনার পায়ের পাতায় ঘা বা অস্বস্তি পরীক্ষা করে দেখেন? পরিবারের সদস্য বা বন্ধু যত বার পরীক্ষা করেন সেসবের হিসাব জানাবেন তবে পেশাগত স্বাস্থ্য কর্মী যত বার পরীক্ষা করেন তার হিসাব জানাবেন না। [CHOOSE NUMBER OF TIMES] <i>Choose number of times</i>	<div>dropdown</div> <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>96</td><td>No feet</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>		0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	95	Other	96	No feet	77	Don't know / Not sure	98	Refused	99	Skipped
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	284	[i_chk_feet_other] Show the field ONLY if: [i_chk_feet_amt] = '95'	8.2 Other amount	text																																																				
	285	[i_chk_feet_freq] Show the field ONLY if:	8.2 Feet check frequency [CHOOSE ONE]	<div>dropdown</div> <table><tr><td>1</td><td>Times per day</td></tr></table>	1	Times per day																																																		
1	Times per day																																																							

		<div>[i_chk_feet_amt] = '1' or [i_chk_feet_amt] = '2' or [i_chk_feet_amt] = '3' or [i_chk_feet_amt] = '4' or [i_chk_feet_amt] = '5' or [i_chk_feet_amt] = '6' or [i_chk_feet_amt] = '7' or [i_chk_feet_amt] = '8' or [i_chk_feet_amt] = '9' or [i_chk_feet_amt] = '10' or [i_chk_feet_amt] = '11' or [i_chk_feet_amt] = '12' or [i_chk_feet_amt] = '13' or [i_chk_feet_amt] = '14' or [i_chk_feet_amt] = '15' or [i_chk_feet_amt] = '16' or [i_chk_feet_amt] = '17' or [i_chk_feet_amt] = '18' or [i_chk_feet_amt] = '19' or [i_chk_feet_amt] = '20' or [i_chk_feet_amt] = '95'</div>		<table><tr><td>2</td><td>Times per week</td></tr><tr><td>3</td><td>Times per month</td></tr><tr><td>4</td><td>Times per year</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	2	Times per week	3	Times per month	4	Times per year	98	Refused	99	Skipped																			
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4	Times per year																																
98	Refused																																
99	Skipped																																
286	<div>[i_diab_doc]</div>	<div>8.3 About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?</div> <div>8.3 গত 12 মাসে প্রায় কত বার আপনি আপনার ডায়বেটিসের জন্য ডাক্তার, নার্স বা অন্য পেশাদার স্বাস্থ্য সেবা প্রদানকারীর সঙ্গে দেখা করেছেন?</div> <div>Choose number of times</div>	<div>dropdown</div> <table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr><tr><td>6</td><td>6 times</td></tr><tr><td>7</td><td>7 times</td></tr><tr><td>8</td><td>8 times</td></tr><tr><td>9</td><td>9 times</td></tr><tr><td>10</td><td>10 times</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times	6	6 times	7	7 times	8	8 times	9	9 times	10	10 times	77	Don't know / Not sure	95	Other	98	Refused	99	Skipped
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287	<div>[i_diab_doc_other]</div> <div>Show the field ONLY if: [i_diab_doc] = '95'</div>	8.3 Other amount	text																														
288	<div>[i_chk_a1c]</div>	<div>8.4 A test for "A1c" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A1c"?</div> <div>8.4 "A1c" পরীক্ষা মানে গত তিন মাসে রক্তে সুগারের গড় হিসাব বোঝায়। গত 12 মাসে প্রায় কত বার ডাক্তার, নার্স বা অন্য পেশাদার স্বাস্থ্য সেবা প্রদানকারী আপনার "A1c" পরীক্ষা করে দেখেছেন?</div>	<div>dropdown</div> <table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr></table>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times																		
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289	[i_chk_a1c_other] Show the field ONLY if: [i_chk_a1c] = '95'	8.4 Other amount		text																													
290	[i_doc_feet] 8.5 About how many times in the past 12 months has a health professional checked your feet for any sores or irritations? 8.5 গত 12 মাসে প্রায় কত বার পেশাদার স্বাস্থ্য সেবা প্রদানকারী আপনার পায়ে কোনরকম ঘা বা অস্বস্তি পরীক্ষা করে দেখেছেন? <i>Choose number of times</i>		<table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr><tr><td>6</td><td>6 times</td></tr><tr><td>7</td><td>7 times</td></tr><tr><td>8</td><td>8 times</td></tr><tr><td>9</td><td>9 times</td></tr><tr><td>10</td><td>10 times</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times	6	6 times	7	7 times	8	8 times	9	9 times	10	10 times	77	Don't know / Not sure	95	Other	98	Refused	99	Skipped
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291	[i_doc_feet_other] Show the field ONLY if: [i_doc_feet] = '95'	8.5 Other amount		text																													
292	[i_fluvaccine] 8.6 In the past 12 months, did you get a flu vaccine sprayed into your nose or a flu shot injected into your arm?		<table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped																				
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	293	[i_pneumvaccine]	8.7 Have you ever had the pneumonia shot also known as pneumococcal vaccine?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped						
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	294	[i_eye_dilated]	8.8 When was the last time you had an eye exam in which the pupils were dilated? ৪.৪ শেষ কবে আপনার চোখ পরীক্ষা করিয়েছিলেন যাতে আপনার চোখের তারা ডাইলেট বা প্রসারিত করে দেখা হয়েছিল? NOTES: "PUPIL DILATION INVOLVES GETTING EYE DROPS TO MAKE YOUR PUPILS LARGER."	<div>dropdown</div> <table><tr><td>1</td><td>Within the past month</td></tr><tr><td>2</td><td>Within the past year</td></tr><tr><td>3</td><td>Within the past 2 years</td></tr><tr><td>4</td><td>2 or more years ago</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>0</td><td>Never</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Within the past month	2	Within the past year	3	Within the past 2 years	4	2 or more years ago	77	Don't know / Not sure	0	Never	98	Refused	99	Skipped
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	295	[i_retinopathy]	8.9 Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy? ৪.৯ আপনার ডাক্তার কি আপনাকে কখনো জানিয়েছেন যে ডায়াবেটিসে আপনার চোখ আক্রান্ত হয়েছে বা আপনার রেটিনোপ্যাথি হয়েছে? NOTES: "RETINOPATHY CAUSES SMALL BLOOD VESSELS IN THE BACK OF THEY EYE TO GET WEAK AND POSSIBLY LEAK BLOOD."	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	Yes	2	No	77	Don't know / Not sure	98	Refused	99	Skipped						
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	296	[i_arms]	MEDICATION ADHERENCE Adherence to refills and medications scale (ARMS) অ্যাডহেরেন্স টু রিফিলস অ্যান্ড মেডিকেশন স্কেল (ARMS)	descriptive																
	297	[i_arms1]	9.1 How often do you forget to take your medicine? ৯.১ আপনি কতবার আপনার ওষুধ নিতে ভুলে যান?	<div>dropdown</div> <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Field Annotation: @HIDECHOICE='99'</div>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped				
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298	[i_arms2]	9.2 How often do you decide not to take your medicine? 9.2 আপনি কত বার ওষুধ না নেওয়ার সিদ্ধান্ত নেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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299	[i_arms3]	9.3 How often do you forget to get prescriptions filled? 9.3 আপনি কতবার আপনার প্রেসক্রিপশন পূরণ করতে ভুলে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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300	[i_arms4]	9.4 How often do you run out of medicine? 9.4 আপনার কত বার ওষুধ ফুরিয়ে যায়?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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301	[i_arms5]	9.5 How often do you skip a dose of your medicine before you go to the doctor? 9.5 ডাক্তারের কাছে যাওয়ার আগে আপনি কত ঘন ঘন আপনার ওষুধের ডোজ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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302	[i_arms6]	9.6 How often do you miss taking your medicine when you feel better? 9.6 যখন আপনি আগের থেকে সুস্থ বোধ করেন তখন কত ঘন ঘন ওষুধ বাদ দিয়ে দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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303	[i_arms7]	9.7 How often do you miss taking your medicine when you feel sick? 9.7 যখন আপনি অসুস্থ বোধ করেন তখন কত ঘন ঘন আপনার ওষুধ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped	Field Annotation: @HIDECHOICE='99'
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304	[i_arms8]	9.8 How often do you miss taking your medicine when you are careless? 9.8 অবহেলার কারণে আপনি কত ঘন ঘন আপনার ওষুধ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped	Field Annotation: @HIDECHOICE='99'
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305	[i_arms9]	9.9 How often do you change the dose of your medicine to suit your needs (like when you take more or less than you're supposed to)? 9.9 নিজের দরকারমত আপনি কত ঘন ঘন নিজের ওষুধের ডোজ বদলে নেন (যেমন আপনার যতগুলি বড়ি সেবন করা দরকার তার চেয়ে বেশি বা কম খান)?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped	Field Annotation: @HIDECHOICE='99'
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306	[i_arms10]	9.10 How often do you forget to take your medicine when you are supposed to take it more than once a day? 9.10 যখন আপনার দিনে একবারের বেশি ওষুধ নেওয়ার কথা তখন কত ঘন ঘন আপনি সেটা নিতে ভুলে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped	Field Annotation: @HIDECHOICE='99'
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307	[i_arms11]	9.11 How often do you put off refilling your medicines because they cost too much money? 9.11 আপনার ওষুধের দাম অতিরিক্ত হওয়ার কারণে আপনি কত ঘন ঘন সেসব রিফিল করা এড়িয়ে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused			
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308	[i_arms12]	9.12 How often do you plan ahead and refill your medicine before they run out? 9.12 আপনি কত ঘন ঘন আগে থেকে পরিকল্পনা করে আপনার ওষুধ ফুরিয়ে যাওয়ার আগেই সেসব রিফিল করে রাখেন?	<div>dropdown</div> <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Field Annotation: @HIDECHOICE='99'	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped																
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309	[i_insurance]	Section Header: <i>Health Access/Health Utilization</i> 10.1 Are you covered by health insurance or some other kind of health care plan?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	Yes	2	No	77	Don't know/Not sure	99	Skipped																				
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77	Don't know/Not sure																														
99	Skipped																														
310	[insurance_type] Show the field ONLY if: [i_insurance] = "1"	10.1a. Which type?	<div>checkbox</div> <table><tr><td>1</td><td>insurance_type__1</td><td>Medicaid ("White card")</td></tr><tr><td>2</td><td>insurance_type__2</td><td>Private insurance</td></tr><tr><td>3</td><td>insurance_type__3</td><td>Other type of public/government insurance (Family Health Plus)</td></tr><tr><td>4</td><td>insurance_type__4</td><td>Medicare ("Blue and Red Card")</td></tr><tr><td>5</td><td>insurance_type__5</td><td>Work or company insurance</td></tr><tr><td>6</td><td>insurance_type__6</td><td>Hospital card</td></tr><tr><td>7</td><td>insurance_type__7</td><td>Other health insurance</td></tr><tr><td>98</td><td>insurance_type__98</td><td>Refused</td></tr><tr><td>99</td><td>insurance_type__99</td><td>Skipped</td></tr></table> Custom alignment: LV Field Annotation: @HIDECHOICE='99'	1	insurance_type__1	Medicaid ("White card")	2	insurance_type__2	Private insurance	3	insurance_type__3	Other type of public/government insurance (Family Health Plus)	4	insurance_type__4	Medicare ("Blue and Red Card")	5	insurance_type__5	Work or company insurance	6	insurance_type__6	Hospital card	7	insurance_type__7	Other health insurance	98	insurance_type__98	Refused	99	insurance_type__99	Skipped	
1	insurance_type__1	Medicaid ("White card")																													
2	insurance_type__2	Private insurance																													
3	insurance_type__3	Other type of public/government insurance (Family Health Plus)																													
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6	insurance_type__6	Hospital card																													
7	insurance_type__7	Other health insurance																													
98	insurance_type__98	Refused																													
99	insurance_type__99	Skipped																													
311	[insurance_other_type] Show the field ONLY if: [insurance_type(7)] = '1'	Other type:	<div>text</div> Custom alignment: LV																												
312	[i_doctor]	10.2 Do you have a regular doctor or other health professional, such as a nurse or midwife, you usually go to when you are sick or need health care?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure																						
1	Yes																														
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77	Don't know/Not sure																														

				<table><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	98	Refused	99	Skipped												
98	Refused																			
99	Skipped																			
	313	[i_unable_treatments]	10.3 In the past 12 months, were there obstacles to obtain medical care, tests, or treatments that you or a doctor believed necessary?	<p>dropdown</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Yes	2	No	77	Don't know	98	Refused	99	Skipped						
1	Yes																			
2	No																			
77	Don't know																			
98	Refused																			
99	Skipped																			
	314	[i_reason_unable1] Show the field ONLY if: [i_unable_treatments] = '1'	10.3a Which of these are reasons you were unable to obtain medical care, tests or treatments that you or a doctor believed necessary? First reason	<p>dropdown</p> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped
1	Couldn't afford care																			
2	Transportation problems																			
3	Different language																			
4	Didn't know where to go to get care																			
5	Couldn't get child care																			
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	315	[i_reason_unable2] Show the field ONLY if: [i_unable_treatments] = '1'	10.3a Which of these are reasons you were unable to get medical care, tests or treatments that you or a doctor believed necessary? Second reason	<p>dropdown</p> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped
1	Couldn't afford care																			
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4	Didn't know where to go to get care																			
5	Couldn't get child care																			
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	316	[i_reason_unable3] Show the field ONLY if: [i_unable_treatments] = '1'	10.3a Which of these are reasons you were unable to get medical care, tests or treatments that you or a doctor believed necessary? Third reason	<p>dropdown</p> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr></table>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care						
1	Couldn't afford care																			
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4	Didn't know where to go to get care																			
5	Couldn't get child care																			

				<table><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	6	Didn't have time or took too long	10	Other	99	Skipped										
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	317	<p>[i_reason_unable4]</p> <p>Show the field ONLY if: [i_unable_treatments] = '1'</p>	10.3a Which of these are reasons you were unable to get medical care, tests or treatments that you or a doctor believed necessary? Fourth reason	<p>dropdown</p> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <p>Custom alignment: LV Field Annotation: @HIDECHOICE='99'</p>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped
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5	Couldn't get child care																			
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	318	<p>[i_reason_unable_other]</p> <p>Show the field ONLY if: [i_reason_unable1] = '10' or [i_reason_unable2] = '10' or [i_reason_unable3] = '10' or [i_reason_unable4] = '10'</p>	Other reason:	<p>text</p> <p>Custom alignment: LV</p>																
	319	<p>[i_info_doctor]</p>	<p>Section Header: <i>In general, where do you get your health information? (Mark all that apply)</i></p> <p>Doctor or health professional</p>	<p>radio (Matrix)</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused								
1	Yes																			
2	No																			
77	Don't know																			
99	Refused																			
	320	<p>[i_info_family]</p>	Family members	<p>radio (Matrix)</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused								
1	Yes																			
2	No																			
77	Don't know																			
99	Refused																			
	321	<p>[i_info_friends]</p>	Friends	<p>radio (Matrix)</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused								
1	Yes																			
2	No																			
77	Don't know																			
99	Refused																			
	322	<p>[i_info_newspaper]</p>	Newspaper	<p>radio (Matrix)</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr></table>	1	Yes	2	No	77	Don't know										
1	Yes																			
2	No																			
77	Don't know																			

				99	Refused
323	[i_info_radio]	Radio	radio (Matrix)	1	Yes
				2	No
				77	Don't know
				99	Refused
324	[i_info_internet]	Internet	radio (Matrix)	1	Yes
				2	No
				77	Don't know
				99	Refused
325	[i_info_other]	Other (specify)	radio (Matrix)	1	Yes
				2	No
				77	Don't know
				99	Refused
326	[i_info_other_text] Show the field ONLY if: [i_info_other] = '1'	Other source of health information:	text		
327	[i_phq1]	Section Header: <i>Depression screening I am going to ask you a couple of questions about the frequency of depressed mood you may have experienced over the last two weeks. Over the last two weeks, how often have you been bothered by the following problems?</i> Little interest or pleasure in doing things	dropdown 0 Not at all 1 Several days 2 More than half the days 3 Nearly every day 99 Skipped Field Annotation: @HIDECHOICE='99'		
328	[i_phq2]	Feeling down, depressed, or hopeless	dropdown 0 Not at all 1 Several days 2 More than half the days 3 Nearly every day 99 Skipped Field Annotation: @HIDECHOICE='99'		
329	[intake_form_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete		
Instrument: Action Plan Development Form (action_plan_development_form)					
330	[ap_chw_pd]	CHW Name:	dropdown 1 Hasan		

				<table><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	2	Sakila	3	Zohra	4	Nazneen		
2	Sakila											
3	Zohra											
4	Nazneen											
	331	[ap_date_pd]	Action plan date:	text (date_mdy)								
	332	[ap_encounter_type]	Encounter Type	dropdown <table><tr><td>1</td><td>By Phone</td></tr><tr><td>2</td><td>In-Person</td></tr></table>	1	By Phone	2	In-Person				
1	By Phone											
2	In-Person											
	333	[ap_bmi_current]	Current BMI	text Field Annotation: @DEFAULT='[i_bmi]'								
	334	[ap_plan_focus]	Section Header: 5-MONTH ACTION PLAN Over the next 5 months, I will support you in developing and reaching a health goal, related to managing your diabetes and high blood pressure. 1. 5-Month Action Plan: Focus on 1 of the following goals:	radio <table><tr><td>1</td><td>Blood Pressure: Lower BP to below 130/80 or target goal set by PCP</td></tr><tr><td>2</td><td>Diabetes Goal: Lower A1c to below 6.4% or target goal set by PCP</td></tr><tr><td>3</td><td>Weight Goal: Lower weight (Suggested weight loss of 5% if BMI is greater than 23)</td></tr><tr><td>4</td><td>Weight Goal: Maintain a healthy weight with a healthy diet and physical activity (if BMI is in a healthy range = 18.5-22.9)</td></tr></table> Custom alignment: LV	1	Blood Pressure: Lower BP to below 130/80 or target goal set by PCP	2	Diabetes Goal: Lower A1c to below 6.4% or target goal set by PCP	3	Weight Goal: Lower weight (Suggested weight loss of 5% if BMI is greater than 23)	4	Weight Goal: Maintain a healthy weight with a healthy diet and physical activity (if BMI is in a healthy range = 18.5-22.9)
1	Blood Pressure: Lower BP to below 130/80 or target goal set by PCP											
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4	Weight Goal: Maintain a healthy weight with a healthy diet and physical activity (if BMI is in a healthy range = 18.5-22.9)											
	335	[ap_weight_current]	Current weight	text Field Annotation: @DEFAULT='[i_weight]'								
	336	[weight_suggested]	Suggested weight loss to:	calc Calculation: round(((i_weight)*0.95),1)								
	337	[ap_plan_weight_lower] Show the field ONLY if: [ap_plan_focus] = '3'	Lower weight to:	text								
	338	[ap_bp_goal] Show the field ONLY if: [ap_plan_focus] = '1'	Blood pressure goal:	text								
	339	[ap_a1c_goal] Show the field ONLY if: [ap_plan_focus] = '2'	HbA1c goal:	text								
	340	[ap_pcp_guidance]	Section Header: 2. COMMUNICATION/GUIDANCE FROM PCP At your last doctor's visit, did your primary care provider give you any guidance or counseling regarding managing your diet, weight, or physical activity or referral to a specialist?	dropdown <table><tr><td>77</td><td>Don't Remember</td></tr><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	77	Don't Remember	0	No	1	Yes		
77	Don't Remember											
0	No											
1	Yes											
	341	[ap_pcp_guidance_what] Show the field ONLY if: [ap_pcp_guidance] = '1'	If yes, what guidance did you receive?	checkbox <table><tr><td>1</td><td>ap_pcp_guidance_what__1</td><td>Nutritional guidance</td></tr><tr><td>2</td><td>ap_pcp_guidance_what__2</td><td>Physical activity guidance</td></tr></table>	1	ap_pcp_guidance_what__1	Nutritional guidance	2	ap_pcp_guidance_what__2	Physical activity guidance		
1	ap_pcp_guidance_what__1	Nutritional guidance										
2	ap_pcp_guidance_what__2	Physical activity guidance										

				3	ap_pcp_guidance_what__3	Medication adherence																								
	342	[ap_st_plan]	Section Header: <i>SHORT-TERM ACTION PLAN</i> Over the next 5 months, I will support you in developing short-term plans to help you reach your 6-month goal. I'll check in with you every 2 weeks to see how you are doing with your plan, and to see if you need any help. 3. Short-term Action Plan: Over the next 2 weeks, the participant selected to focus on:	radio <table><tr><td>1</td><td>Eat a healthy diet</td></tr><tr><td>2</td><td>Be physically active</td></tr><tr><td>3</td><td>Quit or reduce smoking, tobacco, or alcohol: {ap_st_plan_reduce_pd}</td></tr><tr><td>4</td><td>Manage stress</td></tr><tr><td>10</td><td>Other goal: {ap_st_plan_other}</td></tr></table> Custom alignment: LV			1	Eat a healthy diet	2	Be physically active	3	Quit or reduce smoking, tobacco, or alcohol: {ap_st_plan_reduce_pd}	4	Manage stress	10	Other goal: {ap_st_plan_other}														
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2	Be physically active																													
3	Quit or reduce smoking, tobacco, or alcohol: {ap_st_plan_reduce_pd}																													
4	Manage stress																													
10	Other goal: {ap_st_plan_other}																													
	343	[ap_st_plan_reduce_pd] Show the field ONLY if: [ap_st_plan] = '3'	Quit or reduce to: (record number and frequency of cigarettes, drinks, days, etc.)	text																										
	344	[ap_st_plan_other] Show the field ONLY if: [ap_st_plan] = '10'	Other goal:	text																										
	345	[ap_st_confidence]	4. Participant's confidence level in reaching goal: [Note: Use Brief Action Planning Guide to revise Participant Plan until confidence is greater than 7]	dropdown <table><tr><td>0</td><td>0 Not at all</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10 Totally confident</td></tr><tr><td>99</td><td>Skipped</td></tr></table>			0	0 Not at all	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10 Totally confident	99	Skipped
0	0 Not at all																													
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6	6																													
7	7																													
8	8																													
9	9																													
10	10 Totally confident																													
99	Skipped																													
	346	[ap_st_confidence_why_note]	[Conversation with participants] 4.a What makes your score [ap_st_confidence] instead of (lower by 2)?	notes																										
	347	[ap_st_confidence_what_do]	4.b What could we do to increase your score by 1?	notes																										
	348	[ap_st_what]	Section Header: <i>5. Record of participant plan</i> What I will do (e.g. go for a 15 minute walk)	text																										
	349	[ap_st_when]	When I will do it (e.g. in the morning after breakfast):	text																										
	350	[ap_st_where]	Where I will do it (e.g. around the block):	text																										
	351	[ap_st_howoften]	How often I will do it (e.g. M, W, F):	text																										
	352	[ap_st_getinway]	What might get in the way of my plan (e.g. too cold outside):	text																										

	353	[ap_st_whatcando]	What I can do about it (e.g. use the treadmill in the community center):	text																		
	354	[ap_specialist]	6. COMMUNICATION/GUIDANCE FROM PCP At your last doctor's visit, did your primary care provider give you a referral to a specialist?	dropdown <table border="1"> <tr><td>77</td><td>Don't Remember</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes</td></tr> </table>	77	Don't Remember	0	No	1	Yes												
77	Don't Remember																					
0	No																					
1	Yes																					
	355	[ap_specialist_type] Show the field ONLY if: [ap_specialist] = '1'	What specialist? Check all that apply	checkbox <table border="1"> <tr><td>1</td><td>ap_specialist_type__1</td><td>Eye</td></tr> <tr><td>2</td><td>ap_specialist_type__2</td><td>Foot</td></tr> <tr><td>3</td><td>ap_specialist_type__3</td><td>Kidney</td></tr> <tr><td>4</td><td>ap_specialist_type__4</td><td>Dentist</td></tr> <tr><td>10</td><td>ap_specialist_type__10</td><td>Other: {ap_specialist_otl</td></tr> <tr><td>99</td><td>ap_specialist_type__99</td><td>Skipped</td></tr> </table>	1	ap_specialist_type__1	Eye	2	ap_specialist_type__2	Foot	3	ap_specialist_type__3	Kidney	4	ap_specialist_type__4	Dentist	10	ap_specialist_type__10	Other: {ap_specialist_otl	99	ap_specialist_type__99	Skipped
1	ap_specialist_type__1	Eye																				
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4	ap_specialist_type__4	Dentist																				
10	ap_specialist_type__10	Other: {ap_specialist_otl																				
99	ap_specialist_type__99	Skipped																				
	356	[ap_specialist_other] Show the field ONLY if: [ap_specialist_type(10)] = '1'	Other specialist	text																		
	357	[ap_services]	Section Header: 7. ADDITIONAL SERVICES/ASSISTANCE REQUESTED Is there anything else you would like to discuss, or additional services or assistance that you need? Do you need any additional services not related to your health?	dropdown <table border="1"> <tr><td>0</td><td>No, participant did not request services</td></tr> <tr><td>1</td><td>Yes, participant requested services</td></tr> </table>	0	No, participant did not request services	1	Yes, participant requested services														
0	No, participant did not request services																					
1	Yes, participant requested services																					
	358	[ap_services_notes] Show the field ONLY if: [ap_services] = '1'	If yes, describe request and assistance provided by the CHW, as well as any necessary next steps or follow-up:	notes																		
	359	[ap_discuss]	7b. Is there anything else you would like to discuss?	notes																		
	360	[ap_fu_date]	Section Header: FOLLOW-UP PLAN Next meeting scheduled for (date):	text (date_mdy)																		
	361	[ap_fu_time]	Next meeting scheduled for (time):	text																		
	362	[ap_fu_type]	Next meeting (encounter type)	radio <table border="1"> <tr><td>1</td><td>In-person</td></tr> <tr><td>2</td><td>By phone</td></tr> </table>	1	In-person	2	By phone														
1	In-person																					
2	By phone																					
	363	[ap_fu_location_pd]	Next meeting (location)	text																		
	364	[ap_minutes]	Total minutes of call	text																		
	365	[action_plan_development_form_complete]	Section Header: Form Status Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																					
1	Unverified																					
2	Complete																					
Instrument: 1on1 In Person Visit 1 (on1_in_person_visit_1)																						
	366	[ono_chw]	CHW Name:	dropdown <table border="1"> <tr><td>1</td><td>Hasan</td></tr> </table>	1	Hasan																
1	Hasan																					

				<table><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	2	Sakila	3	Zohra	4	Nazneen									
2	Sakila																		
3	Zohra																		
4	Nazneen																		
	367	[<i>ono_date</i>]	One-on-one #1 date	text (date_mdy)															
	368	[<i>ono_encounter_type</i>]	Encounter type	dropdown <table><tr><td>2</td><td>By phone</td></tr><tr><td>1</td><td>In-person</td></tr></table>	2	By phone	1	In-person											
2	By phone																		
1	In-person																		
	369	[<i>ono_plan_success</i>]	Section Header: <i>FOLLOW-UP ON CURRENT SHORT-TERM ACTION PLAN Review current plan with participant -> Review the current plan (from most recent follow-up):</i> 1. How did it go with your plan? [Recognize success/partial success; troubleshoot barriers below.]	radio <table><tr><td>1</td><td>Success - Participant completed or exceeded the plan</td></tr><tr><td>2</td><td>Partial success - Participant completed the plan in part</td></tr><tr><td>3</td><td>No success/Did not try - Participant did not complete any part of the plan</td></tr></table>	1	Success - Participant completed or exceeded the plan	2	Partial success - Participant completed the plan in part	3	No success/Did not try - Participant did not complete any part of the plan									
1	Success - Participant completed or exceeded the plan																		
2	Partial success - Participant completed the plan in part																		
3	No success/Did not try - Participant did not complete any part of the plan																		
	370	[<i>ono_plan_challenges</i>] Show the field ONLY if: [ono_plan_success] = '2' or [ono_plan_success] = '3'	2.A. [If last plan was "Partial success" or "No success/Did not try"]: What challenge/s are you facing? (check all that apply)	checkbox <table><tr><td>1</td><td>ono_plan_challenges__1</td><td>Plan was too hard</td></tr><tr><td>2</td><td>ono_plan_challenges__2</td><td>Weather related</td></tr><tr><td>3</td><td>ono_plan_challenges__3</td><td>Lack of time/ Conflicted with schedule</td></tr><tr><td>4</td><td>ono_plan_challenges__4</td><td>Own illness/ Injury /Pain</td></tr><tr><td>10</td><td>ono_plan_challenges__10</td><td>Other</td></tr></table>	1	ono_plan_challenges__1	Plan was too hard	2	ono_plan_challenges__2	Weather related	3	ono_plan_challenges__3	Lack of time/ Conflicted with schedule	4	ono_plan_challenges__4	Own illness/ Injury /Pain	10	ono_plan_challenges__10	Other
1	ono_plan_challenges__1	Plan was too hard																	
2	ono_plan_challenges__2	Weather related																	
3	ono_plan_challenges__3	Lack of time/ Conflicted with schedule																	
4	ono_plan_challenges__4	Own illness/ Injury /Pain																	
10	ono_plan_challenges__10	Other																	
	371	[<i>ono_plan_challenge_other</i>] Show the field ONLY if: [ono_plan_challenges(10)] = '1'	Other challenge:	text															
	372	[<i>ono_plan_solutions</i>] Show the field ONLY if: [ono_plan_challenges(1)] = '1' or [ono_plan_challenges(2)] = '1' or [ono_plan_challenges(3)] = '1' or [ono_plan_challenges(4)] = '1' or [ono_plan_challenges(10)] = '1'	2.B. Describe the solutions discussed with the participant to address each challenge faced.	notes															
	373	[<i>ono_sbp1</i>]	Section Header: <i>3. How has your weight and blood pressure been? Let's take some measurements:</i> Systolic 1:	text (number)															
	374	[<i>ono_dbp1</i>]	Diastolic 1:	text (number)															
	375	[<i>ono_sbp2</i>]	Systolic 2:	text (number)															

	376	[ono_dbp2]	Diastolic 2:	text (number)										
	377	[ono_spb3]	Systolic 3:	text (number)										
	378	[ono_dbp3]	Diastolic 3:	text (number)										
	379	[ono_weight]	Weight (lbs)	text (number)										
	380	[ono_new_plan_success] Show the field ONLY if: [ono_plan_success] = '1'	Section Header: <i>DEVELOPMENT OF NEW SHORT-TERM ACTION PLAN Strategies (See guidance corresponding to participant's level of success with current plan):</i> Success - Great job with your last plan! Let's create a new plan for the next two weeks. What do you think about making some changes to be even healthier? (e.g. Adding more vegetables and/or whole grains to your diet / Exercising more days per week and/or for longer each time)	descriptive										
	381	[ono_new_plan_partial] Show the field ONLY if: [ono_plan_success] = '2'	Partial success - Good try with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive										
	382	[ono_new_plan_nosuccess] Show the field ONLY if: [ono_plan_success] = '3'	No success / Did not try - I'm sorry it didn't work out with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive										
	383	[ono_new_plan]	4.a. Over the next 2 weeks, the participant selected to focus on:	radio <table><tr><td>1</td><td>Eat a healthy diet</td></tr><tr><td>2</td><td>Be physically active</td></tr><tr><td>3</td><td>Quit or reduce smoking, tobacco, or alcohol</td></tr><tr><td>4</td><td>Manage stress</td></tr><tr><td>10</td><td>Other plan</td></tr></table>	1	Eat a healthy diet	2	Be physically active	3	Quit or reduce smoking, tobacco, or alcohol	4	Manage stress	10	Other plan
1	Eat a healthy diet													
2	Be physically active													
3	Quit or reduce smoking, tobacco, or alcohol													
4	Manage stress													
10	Other plan													
	384	[ono_new_plan_quitreduce] Show the field ONLY if: [ono_new_plan] = '3'	Quit or reduce to: (number of cig/times/drink(s)) per day / week	text										
	385	[ono_new_plan_other] Show the field ONLY if: [ono_new_plan] = '10'	Other plan:	text										
	386	[ono_new_plan_what]	Section Header: <i>4.b. Record of Participant Plan:</i> What I will do (e.g. go for a 15 minute walk), if previous goal was physical activity-related, suggest increasing physical activity time:	text										
	387	[ono_new_plan_when]	When I will do it (e.g. in the morning after breakfast):	text										
	388	[ono_new_plan_where]	Where I will do it (e.g. around the block):	text										
	389	[ono_new_plan_howoften]	How often I will do it (e.g. M, W, F):	text										
	390	[ono_new_plan_getinway]	What might get in the way of my plan (e.g. too cold outside):	text Field Annotation: @HIDDEN										

	391	[ono_new_plan_whatican do]	What I can do about it (e.g. use the treadmill in the community center):	text Field Annotation: @HIDDEN																						
	392	[ono_addl_plan_notes]	Additional notes about participant's plan	notes																						
	393	[ono_new_plan_confiden ce]	Participant's Confidence Level in Reaching Goal: [Note: Use Brief Action Planning Guide to revise Participant Plan until confidence is greater than 7]	dropdown <table><tr><td>0</td><td>0 Not at all</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10 Totally confident</td></tr></table>	0	0 Not at all	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10 Totally confident
0	0 Not at all																									
1	1																									
2	2																									
3	3																									
4	4																									
5	5																									
6	6																									
7	7																									
8	8																									
9	9																									
10	10 Totally confident																									
	394	[ono_eye]	Section Header: <i>DIABETES MANAGEMENT 5. You may need to see one of these specialists. When was the last time you went to see a referred specialist regarding managing your diabetes?</i> 5.1a Eye specialist	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Yes	0	No	77	Don't know/Not sure																
1	Yes																									
0	No																									
77	Don't know/Not sure																									
	395	[ono_eye_date] Show the field ONLY if: [ono_eye] = '1'	5.1b Eye specialist: Date of most approximate visit	text																						
	396	[ono_kidney]	5.2a Kidney Specialist	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Yes	0	No	77	Don't know/Not sure																
1	Yes																									
0	No																									
77	Don't know/Not sure																									
	397	[ono_kidney_date] Show the field ONLY if: [ono_kidney] = '1'	5.2b Kidney specialist: Date of most approximate visit	text																						
	398	[ono_dental]	5.3a Dentist	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Yes	0	No	77	Don't know/Not sure																
1	Yes																									
0	No																									
77	Don't know/Not sure																									
	399	[ono_dental_date] Show the field ONLY if: [ono_dental] = '1'	5.3b Dentist: Date of most approximate visit	text																						
	400	[ono_specialist_oth]	5.4a Other Specialist	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Yes	0	No	77	Don't know/Not sure																
1	Yes																									
0	No																									
77	Don't know/Not sure																									
	401	[ono_specialist_oth_ty pe]	5.4a Other specialist type	text																						

		Show the field ONLY if: [ono_specialist_oth] = '1'																													
	402	[ono_specialist_oth_date] Show the field ONLY if: [ono_specialist_oth] = '1'	5.4b Other specialist: Date seen	text																											
	403	[ono_specialist_referral]	6. Do you need a referral for a specialist?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																														
0	No																														
	404	[ono_specialist_referral_text] Show the field ONLY if: [ono_specialist_referral] = '1'	If yes, which specialist?	text																											
	405	[ono_meds]	Section Header: <i>MEDICATION ADHERENCE</i> 7. Did you discuss the patient medications today?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																														
0	No																														
	406	[ono_meds_challenges]	8. Did the participant report any challenges with medication adherence? (select all that apply)	checkbox <table><tr><td>1</td><td>ono_meds_challenges__1</td><td>No challenges</td></tr><tr><td>2</td><td>ono_meds_challenges__2</td><td>Don't need it / feel fine</td></tr><tr><td>3</td><td>ono_meds_challenges__3</td><td>Too complicated</td></tr><tr><td>4</td><td>ono_meds_challenges__4</td><td>Too expensive</td></tr><tr><td>5</td><td>ono_meds_challenges__5</td><td>Trouble remembering</td></tr><tr><td>6</td><td>ono_meds_challenges__6</td><td>Makes me feel sick / side effects</td></tr><tr><td>7</td><td>ono_meds_challenges__7</td><td>Can't understand / read label</td></tr><tr><td>8</td><td>ono_meds_challenges__8</td><td>Embarrassed</td></tr><tr><td>20</td><td>ono_meds_challenges__20</td><td>Other</td></tr></table>	1	ono_meds_challenges__1	No challenges	2	ono_meds_challenges__2	Don't need it / feel fine	3	ono_meds_challenges__3	Too complicated	4	ono_meds_challenges__4	Too expensive	5	ono_meds_challenges__5	Trouble remembering	6	ono_meds_challenges__6	Makes me feel sick / side effects	7	ono_meds_challenges__7	Can't understand / read label	8	ono_meds_challenges__8	Embarrassed	20	ono_meds_challenges__20	Other
1	ono_meds_challenges__1	No challenges																													
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6	ono_meds_challenges__6	Makes me feel sick / side effects																													
7	ono_meds_challenges__7	Can't understand / read label																													
8	ono_meds_challenges__8	Embarrassed																													
20	ono_meds_challenges__20	Other																													
	407	[ono_meds_challenges_other] Show the field ONLY if: [ono_meds_challenges(20)] = '1'	Other challenge:	text																											
	408	[ono_meds_reportdoing]	9. Did the participant report doing any of the following: (select all that apply)	checkbox <table><tr><td>1</td><td>ono_meds_reportdoing__1</td><td>Skipping doses when feeling okay</td></tr><tr><td>2</td><td>ono_meds_reportdoing__2</td><td>Adjusting</td></tr></table>	1	ono_meds_reportdoing__1	Skipping doses when feeling okay	2	ono_meds_reportdoing__2	Adjusting																					
1	ono_meds_reportdoing__1	Skipping doses when feeling okay																													
2	ono_meds_reportdoing__2	Adjusting																													

60/122

			11a. Have you smoked at least 100 cigarettes in your entire life?	<table border="1"> <tr><td>2</td><td>No</td></tr> <tr><td>77</td><td>Don't know/Not sure</td></tr> <tr><td>98</td><td>Refused</td></tr> </table>	2	No	77	Don't know/Not sure	98	Refused				
2	No													
77	Don't know/Not sure													
98	Refused													
	412	[<i>ono_smoke_often</i>] Show the field ONLY if: [ono_smoke] = '1'	11b. Do you now smoke cigarettes every day, some days, or not at all?	dropdown <table border="1"> <tr><td>1</td><td>Every day</td></tr> <tr><td>2</td><td>Some days</td></tr> <tr><td>3</td><td>Not at all</td></tr> <tr><td>77</td><td>Don't know/Not sure</td></tr> <tr><td>98</td><td>Refused</td></tr> </table>	1	Every day	2	Some days	3	Not at all	77	Don't know/Not sure	98	Refused
1	Every day													
2	Some days													
3	Not at all													
77	Don't know/Not sure													
98	Refused													
	413	[<i>ono_paan</i>]	12a. Have you ever chewed paan, paan masala, zarda, kathi, or supari in your entire life, with or without tobacco?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>77</td><td>Don't know/Not sure</td></tr> <tr><td>98</td><td>Refused</td></tr> </table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused		
1	Yes													
2	No													
77	Don't know/Not sure													
98	Refused													
	414	[<i>ono_paan_often</i>] Show the field ONLY if: [ono_paan] = '1'	12b. If you do use these, how often do you use them?	dropdown <table border="1"> <tr><td>1</td><td>Every day</td></tr> <tr><td>2</td><td>Some days</td></tr> <tr><td>3</td><td>Not at all</td></tr> <tr><td>77</td><td>Don't know/Not sure</td></tr> <tr><td>98</td><td>Refused</td></tr> </table>	1	Every day	2	Some days	3	Not at all	77	Don't know/Not sure	98	Refused
1	Every day													
2	Some days													
3	Not at all													
77	Don't know/Not sure													
98	Refused													
	415	[<i>ono_alcohol_week</i>]	Section Header: <i>13. During the past 30 days, how many days per week or month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?</i> Days in the past week	text										
	416	[<i>ono_alcohol_30days</i>]	Days in past 30 days	text										
	417	[<i>ono_alcohol_add1</i>]	Alcohol - additional choices	radio <table border="1"> <tr><td>0</td><td>No drinks in past 30 days</td></tr> <tr><td>77</td><td>Don't know/Not sure</td></tr> <tr><td>96</td><td>Non-drinker</td></tr> <tr><td>98</td><td>Refused</td></tr> </table>	0	No drinks in past 30 days	77	Don't know/Not sure	96	Non-drinker	98	Refused		
0	No drinks in past 30 days													
77	Don't know/Not sure													
96	Non-drinker													
98	Refused													
	418	[<i>ono_chw_prevservice</i>]	Section Header: <i>FOLLOW-UP ON PREVIOUS SERVICES</i> 14a. Were you referred to a previous service by a CHW?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No						
1	Yes													
0	No													
	419	[<i>ono_prevservice1</i>] Show the field ONLY if: [ono_chw_prevservice] = '1'	14b. List service 1	text										
	420	[<i>ono_prevservice1_access</i>] Show the field ONLY if: [ono_chw_prevservice] = '1'	14c. Were you able to access [ono_prevservice1]?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>96</td><td>N/A</td></tr> </table>	1	Yes	0	No	96	N/A				
1	Yes													
0	No													
96	N/A													

421	[ono_prevservice1_why ot] Show the field ONLY if: [ono_prevservice1_acces s] = '0'	If no, what were the reasons for not following through with [ono_prevservice1]?	checkbox <table border="1"> <tr> <td>1</td> <td>ono_prevservice1_why not__1</td> <td>Too far</td> </tr> <tr> <td>2</td> <td>ono_prevservice1_why not__2</td> <td>Transpor issues</td> </tr> <tr> <td>3</td> <td>ono_prevservice1_why not__3</td> <td>Do not tr service provider</td> </tr> <tr> <td>4</td> <td>ono_prevservice1_why not__4</td> <td>Lack of ti</td> </tr> <tr> <td>5</td> <td>ono_prevservice1_why not__5</td> <td>Service n longer wanted/r</td> </tr> <tr> <td>10</td> <td>ono_prevservice1_why not__10</td> <td>Other</td> </tr> </table>	1	ono_prevservice1_why not__1	Too far	2	ono_prevservice1_why not__2	Transpor issues	3	ono_prevservice1_why not__3	Do not tr service provider	4	ono_prevservice1_why not__4	Lack of ti	5	ono_prevservice1_why not__5	Service n longer wanted/r	10	ono_prevservice1_why not__10	Other
1	ono_prevservice1_why not__1	Too far																			
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3	ono_prevservice1_why not__3	Do not tr service provider																			
4	ono_prevservice1_why not__4	Lack of ti																			
5	ono_prevservice1_why not__5	Service n longer wanted/r																			
10	ono_prevservice1_why not__10	Other																			
422	[ono_prevservice1_othe r] Show the field ONLY if: [ono_prevservice1_why not(10)] = '1'	Other reason [ono_prevservice1] was not accessed:	text																		
423	[ono_chw_prevservice2] Show the field ONLY if: [ono_chw_prevservice] = '1'	15a. Were you referred to another service by a CHW?	dropdown <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
424	[ono_prevservice2] Show the field ONLY if: [ono_chw_prevservice2] = '1'	15b. List service 2	text																		
425	[ono_prevservice2_acce ss] Show the field ONLY if: [ono_chw_prevservice2] = '1'	15c. Were you able to access [ono_prevservice2]?	dropdown <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>96</td> <td>N/A</td> </tr> </table>	1	Yes	0	No	96	N/A												
1	Yes																				
0	No																				
96	N/A																				
426	[ono_prevservice2_why ot] Show the field ONLY if: [ono_prevservice2_acces s] = '0'	If no, what were the reasons for not following through with [ono_prevservice2]?	checkbox <table border="1"> <tr> <td>1</td> <td>ono_prevservice2_why not__1</td> <td>Too far</td> </tr> <tr> <td>2</td> <td>ono_prevservice2_why not__2</td> <td>Transpor issues</td> </tr> <tr> <td>3</td> <td>ono_prevservice2_why not__3</td> <td>Do not tr service provider</td> </tr> <tr> <td>4</td> <td>ono_prevservice2_why not__4</td> <td>Lack of ti</td> </tr> <tr> <td>5</td> <td>ono_prevservice2_why not__5</td> <td>Service n longer wanted/r</td> </tr> <tr> <td>10</td> <td>ono_prevservice2_why not__10</td> <td>Other</td> </tr> </table>	1	ono_prevservice2_why not__1	Too far	2	ono_prevservice2_why not__2	Transpor issues	3	ono_prevservice2_why not__3	Do not tr service provider	4	ono_prevservice2_why not__4	Lack of ti	5	ono_prevservice2_why not__5	Service n longer wanted/r	10	ono_prevservice2_why not__10	Other
1	ono_prevservice2_why not__1	Too far																			
2	ono_prevservice2_why not__2	Transpor issues																			
3	ono_prevservice2_why not__3	Do not tr service provider																			
4	ono_prevservice2_why not__4	Lack of ti																			
5	ono_prevservice2_why not__5	Service n longer wanted/r																			
10	ono_prevservice2_why not__10	Other																			
427	[ono_prevservice2_othe r] Show the field ONLY if: [ono_prevservice2_why not(10)] = '1'	Other reason [ono_prevservice2] was not accessed:	text																		

428	[ono_chw_prevservice3] Show the field ONLY if: [ono_chw_prevservice2] = '1'	16a. Were you referred to another service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>			1	Yes	0	No														
1	Yes																						
0	No																						
429	[ono_prevservice3] Show the field ONLY if: [ono_chw_prevservice3] = '1'	16b. List service 3	text																				
430	[ono_prevservice3_acces ss] Show the field ONLY if: [ono_chw_prevservice3] = '1'	16c. Were you able to access [ono_prevservice3]?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>96</td><td>N/A</td></tr></table>			1	Yes	0	No	96	N/A												
1	Yes																						
0	No																						
96	N/A																						
431	[ono_prevservice3_whyn ot] Show the field ONLY if: [ono_prevservice3_acces s] = '0'	If no, what were the reasons for not following through with [ono_prevservice3]?	checkbox <table><tr><td>1</td><td>ono_prevservice3_whynot__1</td><td>Too far</td></tr><tr><td>2</td><td>ono_prevservice3_whynot__2</td><td>Transport issues</td></tr><tr><td>3</td><td>ono_prevservice3_whynot__3</td><td>Do not tr service provider</td></tr><tr><td>4</td><td>ono_prevservice3_whynot__4</td><td>Lack of ti</td></tr><tr><td>5</td><td>ono_prevservice3_whynot__5</td><td>Service n longer wanted/r</td></tr><tr><td>10</td><td>ono_prevservice3_whynot__10</td><td>Other</td></tr></table>			1	ono_prevservice3_whynot__1	Too far	2	ono_prevservice3_whynot__2	Transport issues	3	ono_prevservice3_whynot__3	Do not tr service provider	4	ono_prevservice3_whynot__4	Lack of ti	5	ono_prevservice3_whynot__5	Service n longer wanted/r	10	ono_prevservice3_whynot__10	Other
1	ono_prevservice3_whynot__1	Too far																					
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5	ono_prevservice3_whynot__5	Service n longer wanted/r																					
10	ono_prevservice3_whynot__10	Other																					
432	[ono_prevservice3_othe r] Show the field ONLY if: [ono_prevservice3_whyn ot(10)] = '1'	Other reason [ono_prevservice3] was not accessed:	text																				
433	[ono_services]	Section Header: <i>ADDITIONAL SERVICES / ASSISTANCE REQUESTED</i> 17. Do you need additional services?	dropdown <table><tr><td>0</td><td colspan="2">No, participant did not request services</td></tr><tr><td>1</td><td colspan="2">Yes, participant requested services</td></tr></table>			0	No, participant did not request services		1	Yes, participant requested services													
0	No, participant did not request services																						
1	Yes, participant requested services																						
434	[ono_services_notes] Show the field ONLY if: [ono_services] = '1'	If yes, describe request and assistance provided by the CHW, as well as any necessary next steps or follow-up:	notes																				
435	[ono_fu_date]	Section Header: <i>FOLLOW-UP PLAN</i> Next meeting scheduled for (date):	text (date_mdy)																				
436	[ono_fu_time]	Next meeting scheduled for (time):	text																				
437	[ono_fu_type]	Next meeting (encounter type)	radio <table><tr><td>1</td><td>In-person</td></tr><tr><td>2</td><td>By phone</td></tr></table>			1	In-person	2	By phone														
1	In-person																						
2	By phone																						
438	[ono_fu_location]	Next meeting (location)	text																				
439	[ono_minutes]	ONE-ON-ONE TIME (total minutes)	text																				
440	[on1_in_person_visit_1 _complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr></table>			0	Incomplete																
0	Incomplete																						

				<table border="1"> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	1	Unverified	2	Complete								
1	Unverified															
2	Complete															
Instrument: Progress Note (progress_note)																
	441	[pn_date]	Progress note date	text (date_mdy)												
	442	[pn_month]	Month	dropdown <table border="1"> <tr><td>2</td><td>Month 2</td></tr> <tr><td>3</td><td>Month 3</td></tr> <tr><td>4</td><td>Month 4</td></tr> <tr><td>5</td><td>Month 5</td></tr> </table>	2	Month 2	3	Month 3	4	Month 4	5	Month 5				
2	Month 2															
3	Month 3															
4	Month 4															
5	Month 5															
	443	[pn_month_fu]	Follow-up number:	radio <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> </table>	1	1	2	2								
1	1															
2	2															
	444	[pn_chw]	CHW Name:	dropdown <table border="1"> <tr><td>1</td><td>Hasan</td></tr> <tr><td>2</td><td>Sakila</td></tr> <tr><td>3</td><td>Zohra</td></tr> <tr><td>4</td><td>Nazneen</td></tr> </table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen				
1	Hasan															
2	Sakila															
3	Zohra															
4	Nazneen															
	445	[pn_pcp]	Clinic Site:	dropdown <table border="1"> <tr><td>1</td><td>Emory</td></tr> <tr><td>2</td><td>Shifa Clinic</td></tr> <tr><td>3</td><td>Grady</td></tr> <tr><td>20</td><td>Participant's home</td></tr> <tr><td>21</td><td>Restaurant</td></tr> <tr><td>22</td><td>Other location</td></tr> </table>	1	Emory	2	Shifa Clinic	3	Grady	20	Participant's home	21	Restaurant	22	Other location
1	Emory															
2	Shifa Clinic															
3	Grady															
20	Participant's home															
21	Restaurant															
22	Other location															
	446	[pn_pcp_other] Show the field ONLY if: [pn_pcp] = '21' or [pn_pcp] = '22'	Other location:	text												
	447	[pn_encounter_type]	Encounter type	dropdown <table border="1"> <tr><td>2</td><td>By phone</td></tr> <tr><td>1</td><td>In-person</td></tr> </table>	2	By phone	1	In-person								
2	By phone															
1	In-person															
	448	[pn_plan_success]	Section Header: <i>FOLLOW-UP ON CURRENT SHORT-TERM ACTION PLAN</i> Review current plan with participant -> Review the current plan (from most recent follow-up) 1.A. How did it go with your plan?	radio <table border="1"> <tr><td>1</td><td>Success - Participant completed or exceeded the plan</td></tr> <tr><td>2</td><td>Partial success - Participant completed the plan in part</td></tr> <tr><td>3</td><td>No success/Did not try - Participant did not complete any part of the plan</td></tr> </table>	1	Success - Participant completed or exceeded the plan	2	Partial success - Participant completed the plan in part	3	No success/Did not try - Participant did not complete any part of the plan						
1	Success - Participant completed or exceeded the plan															
2	Partial success - Participant completed the plan in part															
3	No success/Did not try - Participant did not complete any part of the plan															
	449	[pn_plan_success_partial] Show the field ONLY if: [pn_plan_success]='2'	Description of partial success:	notes												

	450	[pn_plan_success_full] Show the field ONLY if: [pn_plan_success] = '1'	Description of success:	notes																		
	451	[pn_plan_challenges] Show the field ONLY if: [pn_plan_success] = '2' or [pn_plan_success] = '3'	2.A. [If last plan was "Partial success" or "No success/Did not try"]: What challenge/s are you facing?	<table><tr><td colspan="3">checkbox</td></tr><tr><td>1</td><td>pn_plan_challenges__1</td><td>Plan was too hard</td></tr><tr><td>2</td><td>pn_plan_challenges__2</td><td>Weather related</td></tr><tr><td>3</td><td>pn_plan_challenges__3</td><td>Lack of time / Conflicted with schedule</td></tr><tr><td>4</td><td>pn_plan_challenges__4</td><td>Own illness / Injury / Pain</td></tr><tr><td>10</td><td>pn_plan_challenges__10</td><td>Other</td></tr></table>	checkbox			1	pn_plan_challenges__1	Plan was too hard	2	pn_plan_challenges__2	Weather related	3	pn_plan_challenges__3	Lack of time / Conflicted with schedule	4	pn_plan_challenges__4	Own illness / Injury / Pain	10	pn_plan_challenges__10	Other
checkbox																						
1	pn_plan_challenges__1	Plan was too hard																				
2	pn_plan_challenges__2	Weather related																				
3	pn_plan_challenges__3	Lack of time / Conflicted with schedule																				
4	pn_plan_challenges__4	Own illness / Injury / Pain																				
10	pn_plan_challenges__10	Other																				
	452	[pn_plan_challenges_other] Show the field ONLY if: [pn_plan_challenges(10)] = '1'	What was the challenge?	text																		
	453	[pn_plan_solutions] Show the field ONLY if: [pn_plan_challenges(1)] = '1' or [pn_plan_challenges(2)] = '1' or [pn_plan_challenges(3)] = '1' or [pn_plan_challenges(4)] = '1' or [pn_plan_challenges(10)] = '1'	2.B. Describe the solutions discussed with the participant to address each challenge faced.	notes																		
	454	[pn_new_plan_success] Show the field ONLY if: [pn_plan_success] = '1'	Section Header: <i>DEVELOPMENT OF NEW SHORT-TERM ACTION PLAN Strategies (See guidance corresponding to participant's level of success with current plan):</i> Success - Great job with your last plan! Let's create a new plan for the next two weeks. What do you think about making some changes to be even healthier? (e.g. Adding more vegetables and/or whole grains to your diet / Exercising more days per week and/or for longer each time)	descriptive																		
	455	[pn_new_plan_partialsuccess] Show the field ONLY if: [pn_plan_success] = '2'	Partial success - Good try with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive																		
	456	[pn_new_plan_nosuccess] Show the field ONLY if: [pn_plan_success] = '3'	No success / Did not try - I'm sorry it didn't work out with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive																		

457	[pn_new_plan]	3.A. Over the next 2 weeks, the participant selected to focus on:	radio <table border="1"> <tr> <td>1</td> <td>Eat a healthy diet</td> </tr> <tr> <td>2</td> <td>Be physically active</td> </tr> <tr> <td>3</td> <td>Quit or reduce smoking, tobacco, or alcohol</td> </tr> <tr> <td>4</td> <td>Manage stress</td> </tr> </table>	1	Eat a healthy diet	2	Be physically active	3	Quit or reduce smoking, tobacco, or alcohol	4	Manage stress																
1	Eat a healthy diet																										
2	Be physically active																										
3	Quit or reduce smoking, tobacco, or alcohol																										
4	Manage stress																										
458	[pn_new_plan_quitreduce] Show the field ONLY if: [pn_new_plan] = '3'	Quit or reduce to: (number of cig/times/drink(s)) per day / week	text																								
459	[pn_new_plan_what]	Section Header: <i>3.B. Record of Participant Plan:</i> What I will do (e.g. go for a 15 minute walk), if previous goal was physical activity-related, suggest increasing physical activity time:	text																								
460	[pn_new_plan_when]	When I will do it (e.g. in the morning after breakfast):	text																								
461	[pn_new_plan_where]	Where I will do it (e.g. around the block):	text																								
462	[pn_new_plan_howoften]	How often I will do it (e.g. M, W, F):	text																								
463	[pn_new_plan_getinway]	What might get in the way of my plan (e.g. too cold outside):	text Field Annotation: @HIDDEN																								
464	[pn_new_plan_whatcando]	What I can do about it (e.g. use the treadmill in the community center):	text Field Annotation: @HIDDEN																								
465	[pn_addl_plan_notes]	Additional notes about participant's plan	notes																								
466	[pn_new_plan_confidence]	Participant's Confidence Level in Reaching Goal: [Note: Use Brief Action Planning Guide to revise Participant Plan until confidence is greater than 7]	dropdown <table border="1"> <tr> <td>0</td> <td>0 Not at all</td> </tr> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5</td> </tr> <tr> <td>6</td> <td>6</td> </tr> <tr> <td>7</td> <td>7</td> </tr> <tr> <td>8</td> <td>8</td> </tr> <tr> <td>9</td> <td>9</td> </tr> <tr> <td>10</td> <td>10 Totally confident</td> </tr> <tr> <td>99</td> <td>Skipped</td> </tr> </table>	0	0 Not at all	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10 Totally confident	99	Skipped
0	0 Not at all																										
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4	4																										
5	5																										
6	6																										
7	7																										
8	8																										
9	9																										
10	10 Totally confident																										
99	Skipped																										
467	[pn_pcp_guidance]	Section Header: <i>COMMUNICATION / GUIDANCE FROM PCP</i> 4. Since the last time we spoke, did your primary care provider give you any guidance or counseling regarding managing your diet, weight, or physical activity or referral to a specialist?	dropdown <table border="1"> <tr> <td>96</td> <td>N/A - Did not have a visit since the last time we spoke</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>99</td> <td>Skipped</td> </tr> </table> Field Annotation: @HIDDEN	96	N/A - Did not have a visit since the last time we spoke	2	No	1	Yes	99	Skipped																
96	N/A - Did not have a visit since the last time we spoke																										
2	No																										
1	Yes																										
99	Skipped																										

468	[pn_pcp_guidance_what] Show the field ONLY if: [pn_pcp_guidance] = '1'	If yes, what guidance did you receive?	checkbox <table><tr><td>1</td><td>pn_pcp_guidance_what__1</td><td>Nutritional guidance</td></tr><tr><td>2</td><td>pn_pcp_guidance_what__2</td><td>Physical activity guidance</td></tr><tr><td>3</td><td>pn_pcp_guidance_what__3</td><td>Medication adherence</td></tr><tr><td>4</td><td>pn_pcp_guidance_what__4</td><td>Referred to a specialist</td></tr></table> Field Annotation: @HIDDEN	1	pn_pcp_guidance_what__1	Nutritional guidance	2	pn_pcp_guidance_what__2	Physical activity guidance	3	pn_pcp_guidance_what__3	Medication adherence	4	pn_pcp_guidance_what__4	Referred to a specialist			
1	pn_pcp_guidance_what__1	Nutritional guidance																
2	pn_pcp_guidance_what__2	Physical activity guidance																
3	pn_pcp_guidance_what__3	Medication adherence																
4	pn_pcp_guidance_what__4	Referred to a specialist																
469	[pn_pcp_guidance_other] Show the field ONLY if: [pn_pcp_guidance_what (4)] = '1'	What specialist? Check all that apply	checkbox <table><tr><td>1</td><td>pn_pcp_guidance_other__1</td><td>Eye</td></tr><tr><td>2</td><td>pn_pcp_guidance_other__2</td><td>Kidney</td></tr><tr><td>3</td><td>pn_pcp_guidance_other__3</td><td>Dentist</td></tr><tr><td>10</td><td>pn_pcp_guidance_other__10</td><td>Other</td></tr><tr><td>99</td><td>pn_pcp_guidance_other__99</td><td>Skipped</td></tr></table> Field Annotation: @HIDDEN	1	pn_pcp_guidance_other__1	Eye	2	pn_pcp_guidance_other__2	Kidney	3	pn_pcp_guidance_other__3	Dentist	10	pn_pcp_guidance_other__10	Other	99	pn_pcp_guidance_other__99	Skipped
1	pn_pcp_guidance_other__1	Eye																
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3	pn_pcp_guidance_other__3	Dentist																
10	pn_pcp_guidance_other__10	Other																
99	pn_pcp_guidance_other__99	Skipped																
470	[pn_pcp_specialist] Show the field ONLY if: [pn_pcp_guidance_other (10)] = '1'	Other specialist	text Field Annotation: @HIDDEN															
471	[pn_chw_prevservice]	Section Header: <i>FOLLOW-UP ON PREVIOUS SERVICES</i> 5a. Were you previously referred to a service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	99	Skipped									
1	Yes																	
0	No																	
99	Skipped																	
472	[pn_prevservice1] Show the field ONLY if: [pn_chw_prevservice] = '1'	5b. List service 1	text															
473	[pn_prevservice1_access] Show the field ONLY if: [pn_chw_prevservice]=1	5c. Were you able to access [pn_prevservice1]?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>96</td><td>N/A</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	96	N/A	99	Skipped							
1	Yes																	
0	No																	
96	N/A																	
99	Skipped																	
474	[pn_prevservice1_whynot] Show the field ONLY if: [pn_prevservice1_access]='0'	If no, what were the reasons for not following through with [pn_service1]?	checkbox <table><tr><td>1</td><td>pn_prevservice1_whynot__1</td><td>Too far</td></tr><tr><td>2</td><td>pn_prevservice1_whynot__2</td><td>Transport issues</td></tr><tr><td>3</td><td>pn_prevservice1_whynot__3</td><td>Do not trust service provider</td></tr><tr><td>4</td><td>pn_prevservice1_whynot__4</td><td>Lack of time</td></tr></table>	1	pn_prevservice1_whynot__1	Too far	2	pn_prevservice1_whynot__2	Transport issues	3	pn_prevservice1_whynot__3	Do not trust service provider	4	pn_prevservice1_whynot__4	Lack of time			
1	pn_prevservice1_whynot__1	Too far																
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				5	pn_prevservice1_whynot__5	Service no longer wanted/needed																		
				10	pn_prevservice1_whynot__10	Other																		
	475	[pn_prevservice1_other] Show the field ONLY if: [pn_prevservice1_whynot(10)] = '1'	Other reason [pn_prevservice1] was not accessed:	text																				
	476	[pn_chw_prevservice2] Show the field ONLY if: [pn_chw_prevservice]='1'	6a. Were you previously referred to another service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>			1	Yes	0	No	99	Skipped												
1	Yes																							
0	No																							
99	Skipped																							
	477	[pn_prevservice2] Show the field ONLY if: [pn_chw_prevservice2] = '1'	6b. List service 2	text																				
	478	[pn_prevservice2_access] Show the field ONLY if: [pn_chw_prevservice2]=1	6c. Were you able to access [pn_prevservice2]?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>96</td><td>N/A</td></tr><tr><td>99</td><td>Skipped</td></tr></table>			1	Yes	0	No	96	N/A	99	Skipped										
1	Yes																							
0	No																							
96	N/A																							
99	Skipped																							
	479	[pn_prevservice2_whynot] Show the field ONLY if: [pn_prevservice2_access]='0'	If no, what were the reasons for not following through with [pn_prevservice2]?	checkbox <table><tr><td>1</td><td>pn_prevservice2_whynot__1</td><td>Too far</td></tr><tr><td>2</td><td>pn_prevservice2_whynot__2</td><td>Transportation issues</td></tr><tr><td>3</td><td>pn_prevservice2_whynot__3</td><td>Do not trust service provider</td></tr><tr><td>4</td><td>pn_prevservice2_whynot__4</td><td>Lack of time</td></tr><tr><td>5</td><td>pn_prevservice2_whynot__5</td><td>Service no longer wanted/needed</td></tr><tr><td>10</td><td>pn_prevservice2_whynot__10</td><td>Other</td></tr></table>			1	pn_prevservice2_whynot__1	Too far	2	pn_prevservice2_whynot__2	Transportation issues	3	pn_prevservice2_whynot__3	Do not trust service provider	4	pn_prevservice2_whynot__4	Lack of time	5	pn_prevservice2_whynot__5	Service no longer wanted/needed	10	pn_prevservice2_whynot__10	Other
1	pn_prevservice2_whynot__1	Too far																						
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10	pn_prevservice2_whynot__10	Other																						
	480	[pn_prevservice2_other] Show the field ONLY if: [pn_prevservice2_whynot(10)] = '1'	Other reason [pn_prevservice2] was not accessed:	text																				
	481	[pn_chw_prevservice3] Show the field ONLY if: [pn_chw_prevservice2]='1'	7a. Were you previously referred to another service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>			1	Yes	0	No	99	Skipped												
1	Yes																							
0	No																							
99	Skipped																							
	482	[pn_prevservice3] Show the field ONLY if:	7b. List service 2	text																				

		[pn_chw_prevservice3] = '1'																				
483		[pn_prevservice3_access]	7c. Were you able to access [pn_prevservice3]?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>96</td><td>N/A</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	1	Yes	0	No	96	N/A	99	Skipped										
1	Yes																					
0	No																					
96	N/A																					
99	Skipped																					
484		[pn_prevservice3_whynt]	If no, what were the reasons for not following through with [pn_prevservice3]?	checkbox <table border="1"> <tr><td>1</td><td>pn_prevservice3_whynt__1</td><td>Too far</td></tr> <tr><td>2</td><td>pn_prevservice3_whynt__2</td><td>Transport issues</td></tr> <tr><td>3</td><td>pn_prevservice3_whynt__3</td><td>Do not trust service provider</td></tr> <tr><td>4</td><td>pn_prevservice3_whynt__4</td><td>Lack of time</td></tr> <tr><td>5</td><td>pn_prevservice3_whynt__5</td><td>Service no longer wanted/needed</td></tr> <tr><td>10</td><td>pn_prevservice3_whynt__10</td><td>Other</td></tr> </table>	1	pn_prevservice3_whynt__1	Too far	2	pn_prevservice3_whynt__2	Transport issues	3	pn_prevservice3_whynt__3	Do not trust service provider	4	pn_prevservice3_whynt__4	Lack of time	5	pn_prevservice3_whynt__5	Service no longer wanted/needed	10	pn_prevservice3_whynt__10	Other
1	pn_prevservice3_whynt__1	Too far																				
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10	pn_prevservice3_whynt__10	Other																				
485		[pn_prevservice3_other]	Other reason [pn_prevservice3] was not accessed:	text																		
486		[pn_services]	Section Header: <i>ADDITIONAL SERVICES / ASSISTANCE REQUESTED</i> 8. Do you need any additional services?	dropdown <table border="1"> <tr><td>0</td><td>No, participant did not request services</td></tr> <tr><td>1</td><td>Yes, participant requested services</td></tr> </table>	0	No, participant did not request services	1	Yes, participant requested services														
0	No, participant did not request services																					
1	Yes, participant requested services																					
487		[pn_servives_notes]	If yes, describe request and assistance provided by the CHW, as well as any necessary next steps or follow-up:	notes																		
488		[pn_fu_date]	Section Header: <i>FOLLOW-UP PLAN</i> Next meeting scheduled for (date):	text (date_mdy)																		
489		[pn_fu_time]	Next meeting scheduled for (time):	text																		
490		[pn_fu_type]	Next meeting (encounter type)	radio <table border="1"> <tr><td>1</td><td>In-person</td></tr> <tr><td>2</td><td>By phone</td></tr> </table>	1	In-person	2	By phone														
1	In-person																					
2	By phone																					
491		[pn_fu_location]	Next meeting (location)	text																		
492		[pn_minutes]	Total minutes	text (number)																		
493		[progress_note_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																					
1	Unverified																					
2	Complete																					
Instrument: 1on1 In Person Visit 2 (on1_in_person_visit_2)																						
494		[ono2_chw]	CHW Name:	dropdown																		

				<table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen							
1	Hasan																		
2	Sakila																		
3	Zohra																		
4	Nazneen																		
	495	[ono2_date]	One-on-one #2 date	text (date_mdy)															
	496	[ono2_encounter_type]	Encounter type	<div>dropdown</div> <table><tr><td>2</td><td>By phone</td></tr><tr><td>1</td><td>In-person</td></tr></table>	2	By phone	1	In-person											
2	By phone																		
1	In-person																		
	497	[ono2_plan_success]	<div>Section Header: FOLLOW-UP ON CURRENT SHORT-TERM ACTION PLAN Review current plan with participant -> Review the current plan from the most recent follow-up</div> <div>1. How did it go with your plan?</div>	<div>radio</div> <table><tr><td>1</td><td colspan="2">Success - Participant completed or exceeded the plan</td></tr><tr><td>2</td><td colspan="2">Partial success - Participant completed the plan in part</td></tr><tr><td>3</td><td colspan="2">No success/Did not try - Participant did not complete any part of the plan</td></tr></table>	1	Success - Participant completed or exceeded the plan		2	Partial success - Participant completed the plan in part		3	No success/Did not try - Participant did not complete any part of the plan							
1	Success - Participant completed or exceeded the plan																		
2	Partial success - Participant completed the plan in part																		
3	No success/Did not try - Participant did not complete any part of the plan																		
	498	[ono2_plan_challenges] <div>Show the field ONLY if: [ono2_plan_success] = '2' or [ono2_plan_success] = '3'</div>	<div>2.a. [If last plan was "Partial success" or "No success/Did not try"]: What challenge/s are you facing?</div>	<div>checkbox</div> <table><tr><td>1</td><td>ono2_plan_challenges__1</td><td>Plan was too hard</td></tr><tr><td>2</td><td>ono2_plan_challenges__2</td><td>Weather related</td></tr><tr><td>3</td><td>ono2_plan_challenges__3</td><td>Lack of time / Conflicted with schedule</td></tr><tr><td>4</td><td>ono2_plan_challenges__4</td><td>Own illness / Injury / Pain</td></tr><tr><td>10</td><td>ono2_plan_challenges__10</td><td>Other</td></tr></table>	1	ono2_plan_challenges__1	Plan was too hard	2	ono2_plan_challenges__2	Weather related	3	ono2_plan_challenges__3	Lack of time / Conflicted with schedule	4	ono2_plan_challenges__4	Own illness / Injury / Pain	10	ono2_plan_challenges__10	Other
1	ono2_plan_challenges__1	Plan was too hard																	
2	ono2_plan_challenges__2	Weather related																	
3	ono2_plan_challenges__3	Lack of time / Conflicted with schedule																	
4	ono2_plan_challenges__4	Own illness / Injury / Pain																	
10	ono2_plan_challenges__10	Other																	
	499	[ono2_plan_challenge_other] <div>Show the field ONLY if: [ono2_plan_challenges(10)] = '1'</div>	<div>Other challenge:</div>	<div>text</div>															
	500	[ono2_plan_solutions] <div>Show the field ONLY if: [ono2_plan_challenges(1)] = '1' or [ono2_plan_challenges(2)] = '1' or [ono2_plan_challenges(3)] = '1' or [ono2_plan_challenges(4)] = '1' or [ono2_plan_challenges(10)] = '1'</div>	<div>2.b. Describe the solutions discussed with the participant to address each challenge faced.</div>	<div>notes</div>															
	501	[ono2_sbp1]	<div>Section Header: 3. How has your weight and blood pressure been? Let's take some measurements:</div> <div>Systolic 1:</div>	<div>text (number)</div>															
	502	[ono2_dbp1]	<div>Diastolic 1:</div>	<div>text (number)</div>															

	503	[ono2_sbp2]	Systolic 2:	text (number)														
	504	[ono2_dbp2]	Diastolic 2:	text (number)														
	505	[ono2_sbp3]	Systolic 3:	text (number)														
	506	[ono2_dbp3]	Diastolic 3:	text (number)														
	507	[ono2_weight]	Weight (lbs)	text (number)														
	508	[ono2_new_plan_success] Show the field ONLY if: [ono2_plan_success] = '1'	Section Header: <i>DEVELOPMENT OF NEW SHORT-TERM ACTION PLAN Strategies (See guidance corresponding to participant's level of success with current plan):</i> Success - Great job with your last plan! Let's create a new plan for the next two weeks. What do you think about making some changes to be even healthier? (e.g. Adding more vegetables and/or whole grains to your diet / Exercising more days per week and/or for longer each time)	descriptive														
	509	[ono2_new_plan_partial] Show the field ONLY if: [ono2_plan_success] = '2'	Partial success - Good try with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive														
	510	[ono2_new_plan_nosuccess] Show the field ONLY if: [ono2_plan_success] = '3'	No success / Did not try - I'm sorry it didn't work out with your last plan. Let's create a new plan for the next two weeks. What do you think about making some changes to improve your chance for better success this time? (Re-work plan to address barriers)	descriptive														
	511	[ono2_new_plan]	4.a. Over the next 2 weeks, the participant selected to focus on:	radio <table><tr><td>1</td><td>Eat a healthy diet</td></tr><tr><td>2</td><td>Be physically active</td></tr><tr><td>3</td><td>Quit or reduce smoking, tobacco, or alcohol</td></tr><tr><td>4</td><td>Manage stress</td></tr><tr><td>10</td><td>Other goal</td></tr></table>	1	Eat a healthy diet	2	Be physically active	3	Quit or reduce smoking, tobacco, or alcohol	4	Manage stress	10	Other goal				
1	Eat a healthy diet																	
2	Be physically active																	
3	Quit or reduce smoking, tobacco, or alcohol																	
4	Manage stress																	
10	Other goal																	
	512	[ono2_new_plan_quitreduce] Show the field ONLY if: [ono2_new_plan] = '3'	Quit or reduce to: (number of cig/times/drink(s)) per day / week	text														
	513	[ono2_new_plan_other] Show the field ONLY if: [ono2_new_plan] = '10'	Other goal:	text														
	514	[ono2_new_plan_confidence]	Participant's Confidence Level in Reaching Goal: [Note: Use Brief Action Planning Guide to revise Participant Plan until confidence is greater than 7]	dropdown <table><tr><td>0</td><td>0 Not at all</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr></table>	0	0 Not at all	1	1	2	2	3	3	4	4	5	5	6	6
0	0 Not at all																	
1	1																	
2	2																	
3	3																	
4	4																	
5	5																	
6	6																	

				<table border="1"> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10 Totally confident</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	7	7	8	8	9	9	10	10 Totally confident	99	Skipped											
7	7																								
8	8																								
9	9																								
10	10 Totally confident																								
99	Skipped																								
	515	[ono2_new_plan_what]	Section Header: <i>4.b. Record of Participant Plan:</i> What I will do (e.g. go for a 15 minute walk), if previous goal was physical activity-related, suggest increasing physical activity time:	text																					
	516	[ono2_new_plan_when]	When I will do it (e.g. in the morning after breakfast):	text																					
	517	[ono2_new_plan_where]	Where I will do it (e.g. around the block):	text																					
	518	[ono2_new_plan_howoften]	How often I will do it (e.g. M, W, F):	text																					
	519	[ono2_new_plan_getinway]	What might get in the way of my plan (e.g. too cold outside):	text Field Annotation: @HIDDEN																					
	520	[ono2_new_plan_whaticanndo]	What I can do about it (e.g. use the treadmill in the community center):	text Field Annotation: @HIDDEN																					
	521	[ono2_addl_plan_notes]	Additional notes about participant's plan	notes																					
	522	[ono2_topic_review]	Section Header: <i>CHW Reviews Medication Booklet, Cholesterol/Diet, Foot Check, Brushing/Flossing, Heart Attack v. Heartburn.</i> 5a. CHW reviewed the following topics with participant (check all that apply)	checkbox <table border="1"> <tr> <td>1</td> <td>ono2_topic_review__1</td> <td>Medications: Is participant properly taking their medications?</td> </tr> <tr> <td>2</td> <td>ono2_topic_review__2</td> <td>Cholesterol: How to reduce cholesterol in diet</td> </tr> <tr> <td>3</td> <td>ono2_topic_review__3</td> <td>Foot health: How to check your feet</td> </tr> <tr> <td>4</td> <td>ono2_topic_review__4</td> <td>Proper Brushing technique</td> </tr> <tr> <td>5</td> <td>ono2_topic_review__5</td> <td>Proper Flossing Technique</td> </tr> <tr> <td>6</td> <td>ono2_topic_review__6</td> <td>Heart attack vs. Heartburn</td> </tr> <tr> <td>10</td> <td>ono2_topic_review__10</td> <td>CHW did not review any of these with participant</td> </tr> </table>	1	ono2_topic_review__1	Medications: Is participant properly taking their medications?	2	ono2_topic_review__2	Cholesterol: How to reduce cholesterol in diet	3	ono2_topic_review__3	Foot health: How to check your feet	4	ono2_topic_review__4	Proper Brushing technique	5	ono2_topic_review__5	Proper Flossing Technique	6	ono2_topic_review__6	Heart attack vs. Heartburn	10	ono2_topic_review__10	CHW did not review any of these with participant
1	ono2_topic_review__1	Medications: Is participant properly taking their medications?																							
2	ono2_topic_review__2	Cholesterol: How to reduce cholesterol in diet																							
3	ono2_topic_review__3	Foot health: How to check your feet																							
4	ono2_topic_review__4	Proper Brushing technique																							
5	ono2_topic_review__5	Proper Flossing Technique																							
6	ono2_topic_review__6	Heart attack vs. Heartburn																							
10	ono2_topic_review__10	CHW did not review any of these with participant																							
	523	[ono2_handout_fu]	5b. Did the participant have any questions to follow-up on after reviewing the information?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> </table>	1	Yes	2	No																	
1	Yes																								
2	No																								

				<table><tr><td>99</td><td>Skipped</td></tr></table>	99	Skipped						
99	Skipped											
524	[ono2_handout_fu_notes] Show the field ONLY if: [ono2_handout_fu]="1"	Follow-up notes:	notes									
525	[ono2_a1c_test]	6a. Are you scheduled to get an A1c test within the next 3 months?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	77	Don't know / Not sure	99	Skipped
1	Yes											
0	No											
77	Don't know / Not sure											
99	Skipped											
526	[ono2_a1c_test_date] Show the field ONLY if: [ono2_a1c_test]='1'	Date of appointment:	text									
527	[ono2_a1c_test_assist] Show the field ONLY if: [ono2_a1c_test]='0' or [ono2_a1c_test]='77'	6b. If no or not sure, would you like a CHW to assist you to set up an appointment with your doctor?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	99	Skipped		
1	Yes											
0	No											
99	Skipped											
528	[ono2_a1c_cost]	6c. There are no costs to participate in this study. Are you aware of a cost to you to get your A1c tested?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	77	Don't know/Not sure	99	Skipped
1	Yes											
0	No											
77	Don't know/Not sure											
99	Skipped											
529	[ono2_a1c_cost_chw]	6d. If you are unsure, would you like a CHW to assist you to find out if you will have an additional cost for the test?	dropdown, Identifier <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	99	Skipped		
1	Yes											
0	No											
99	Skipped											
530	[ono2_chw_prevservice]	Section Header: FOLLOW-UP ON PREVIOUS SERVICES 7a. Were you referred to a previous service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	99	Skipped		
1	Yes											
0	No											
99	Skipped											
531	[ono2_prevservice1] Show the field ONLY if: [ono2_chw_prevservice]='1'	7b. List service 1	text									
532	[ono2_prevservice1_access] Show the field ONLY if: [ono2_chw_prevservice]='1'	7c. Were you able to access [ono_prevservice1]?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>96</td><td>N/A</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	Yes	0	No	96	N/A	99	Skipped
1	Yes											
0	No											
96	N/A											
99	Skipped											
533	[ono2_prevservice1_why_not] Show the field ONLY if:	If no, what were the reasons for not following through with [ono_prevservice1]?	checkbox <table><tr><td>1</td><td>ono2_prevservice1_whynot__1</td><td>Too far</td></tr></table>		1	ono2_prevservice1_whynot__1	Too far					
1	ono2_prevservice1_whynot__1	Too far										

		[ono2_prevservice1_acces ss] = '0'		<table><tr><td>2</td><td>ono2_prevservice1_whynot__2</td><td>Transpo issues</td></tr><tr><td>3</td><td>ono2_prevservice1_whynot__3</td><td>Do not t service provider</td></tr><tr><td>4</td><td>ono2_prevservice1_whynot__4</td><td>Lack of i</td></tr><tr><td>5</td><td>ono2_prevservice1_whynot__5</td><td>Service longer wanted,</td></tr><tr><td>10</td><td>ono2_prevservice1_whynot__10</td><td>Other</td></tr></table>	2	ono2_prevservice1_whynot__2	Transpo issues	3	ono2_prevservice1_whynot__3	Do not t service provider	4	ono2_prevservice1_whynot__4	Lack of i	5	ono2_prevservice1_whynot__5	Service longer wanted,	10	ono2_prevservice1_whynot__10	Other			
2	ono2_prevservice1_whynot__2	Transpo issues																				
3	ono2_prevservice1_whynot__3	Do not t service provider																				
4	ono2_prevservice1_whynot__4	Lack of i																				
5	ono2_prevservice1_whynot__5	Service longer wanted,																				
10	ono2_prevservice1_whynot__10	Other																				
	534	[ono2_prevservice1_oth er] Show the field ONLY if: [ono2_prevservice1_why not(10)] = '1'	Other reason [ono2_prevservice1] was not accessed:	text																		
	535	[ono2_chw_prevservice 2] Show the field ONLY if: [ono2_chw_prevservice] = '1'	8a. Were you referred to another service by a CHW?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	99	Skipped												
1	Yes																					
0	No																					
99	Skipped																					
	536	[ono2_prevservice2] Show the field ONLY if: [ono2_chw_prevservice 2] = '1'	8b. List service 2	text																		
	537	[ono2_prevservice2_acc ess] Show the field ONLY if: [ono2_chw_prevservice 2] = '1'	8c. Were you able to access [ono_prevservice2]?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>96</td><td>N/A</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	0	No	96	N/A	99	Skipped										
1	Yes																					
0	No																					
96	N/A																					
99	Skipped																					
	538	[ono2_prevservice2_why not] Show the field ONLY if: [ono2_prevservice2_acce ss] = '0'	If no, what were the reasons for not following through with [ono_prevservice2]?	checkbox <table><tr><td>1</td><td>ono2_prevservice2_whynot__1</td><td>Too far</td></tr><tr><td>2</td><td>ono2_prevservice2_whynot__2</td><td>Transpo issues</td></tr><tr><td>3</td><td>ono2_prevservice2_whynot__3</td><td>Do not t service provider</td></tr><tr><td>4</td><td>ono2_prevservice2_whynot__4</td><td>Lack of i</td></tr><tr><td>5</td><td>ono2_prevservice2_whynot__5</td><td>Service longer wanted,</td></tr><tr><td>10</td><td>ono2_prevservice2_whynot__10</td><td>Other</td></tr></table>	1	ono2_prevservice2_whynot__1	Too far	2	ono2_prevservice2_whynot__2	Transpo issues	3	ono2_prevservice2_whynot__3	Do not t service provider	4	ono2_prevservice2_whynot__4	Lack of i	5	ono2_prevservice2_whynot__5	Service longer wanted,	10	ono2_prevservice2_whynot__10	Other
1	ono2_prevservice2_whynot__1	Too far																				
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5	ono2_prevservice2_whynot__5	Service longer wanted,																				
10	ono2_prevservice2_whynot__10	Other																				
	539	[ono2_prevservice2_oth er] Show the field ONLY if: [ono2_prevservice2_why not(10)] = '1'	Other reason [ono2_prevservice2] was not accessed:	text																		
	540	[ono2_chw_prevservice 3] Show the field ONLY if: [ono2_chw_prevservice3] = '1'	9a. Were you referred to another service by a CHW?	dropdown																		

		Show the field ONLY if: [ono2_chw_prevservice2] = '1'		<table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	1	Yes	0	No	99	Skipped												
1	Yes																					
0	No																					
99	Skipped																					
541	[ono2_prevservice3]	Show the field ONLY if: [ono2_chw_prevservice3] = '1'	9b. List service 3	text																		
542	[ono2_prevservice3_access]	Show the field ONLY if: [ono2_chw_prevservice3] = '1'	9c. Were you able to access [ono_prevservice3]?	dropdown <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>96</td><td>N/A</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	1	Yes	0	No	96	N/A	99	Skipped										
1	Yes																					
0	No																					
96	N/A																					
99	Skipped																					
543	[ono2_prevservice3_why not]	Show the field ONLY if: [ono2_prevservice3_access] = '0'	If no, what were the reasons for not following through with [ono_prevservice3]?	checkbox <table border="1"> <tr><td>1</td><td>ono2_prevservice3_whynot__1</td><td>Too far</td></tr> <tr><td>2</td><td>ono2_prevservice3_whynot__2</td><td>Transport issues</td></tr> <tr><td>3</td><td>ono2_prevservice3_whynot__3</td><td>Do not trust service provider</td></tr> <tr><td>4</td><td>ono2_prevservice3_whynot__4</td><td>Lack of information</td></tr> <tr><td>5</td><td>ono2_prevservice3_whynot__5</td><td>Service no longer wanted</td></tr> <tr><td>10</td><td>ono2_prevservice3_whynot__10</td><td>Other</td></tr> </table>	1	ono2_prevservice3_whynot__1	Too far	2	ono2_prevservice3_whynot__2	Transport issues	3	ono2_prevservice3_whynot__3	Do not trust service provider	4	ono2_prevservice3_whynot__4	Lack of information	5	ono2_prevservice3_whynot__5	Service no longer wanted	10	ono2_prevservice3_whynot__10	Other
1	ono2_prevservice3_whynot__1	Too far																				
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5	ono2_prevservice3_whynot__5	Service no longer wanted																				
10	ono2_prevservice3_whynot__10	Other																				
544	[ono2_prevservice3_other]	Show the field ONLY if: [ono2_prevservice3_why not(10)] = '1'	Other reason [ono2_prevservice3] was not accessed:	text																		
545	[ono2_services]		Section Header: <i>ADDITIONAL SERVICES / ASSISTANCE REQUESTED</i> 10. Do you need any additional services?	dropdown <table border="1"> <tr><td>0</td><td>No, participant did not request services</td></tr> <tr><td>1</td><td>Yes, participant requested services</td></tr> <tr><td>96</td><td>N/A</td></tr> <tr><td>99</td><td>Skipped</td></tr> </table>	0	No, participant did not request services	1	Yes, participant requested services	96	N/A	99	Skipped										
0	No, participant did not request services																					
1	Yes, participant requested services																					
96	N/A																					
99	Skipped																					
546	[ono2_services_notes]	Show the field ONLY if: [ono2_services] = '1'	If yes, describe request and assistance provided by the CHW, as well as necessary next steps or follow-up:	notes																		
547	[ono2_fu_date]		Section Header: <i>FOLLOW-UP PLAN</i> Next meeting scheduled for (date):	text (date_mdy)																		
548	[ono2_fu_time]		Next meeting scheduled for (time):	text																		
549	[ono2_fu_type]		Next meeting (encounter type)	radio <table border="1"> <tr><td>1</td><td>In-person</td></tr> <tr><td>2</td><td>By phone</td></tr> </table>	1	In-person	2	By phone														
1	In-person																					
2	By phone																					
550	[ono2_fu_location]		Next meeting (location)	text																		

	551	[<i>ono2_minutes</i>]	ONE-ON-ONE TIME (total minutes)	text												
	552	[<i>on1_in_person_visit_2_complete</i>]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete						
0	Incomplete															
1	Unverified															
2	Complete															
Instrument: Endpoint Form (endpoint_form)																
	553	[<i>fu_chw</i>]	CHW name	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr><tr><td>20</td><td>LHW</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen	20	LHW	99	Skipped
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	554	[<i>fu_date</i>]	Endpoint Date	text (date_mdy)												
	555	[<i>fu_height</i>]	Section Header: <i>CLINICAL MEASURES</i> Height (total inches)	text Field Annotation: @DEFAULT='[height_inches]'												
	556	[<i>fu_weight</i>]	Weight (pounds) - self-reported	text (number)												
	557	[<i>fu_weight_method</i>]	Method of weight estimation	dropdown <table><tr><td>1</td><td>Measured in-person by the CHW</td></tr><tr><td>2</td><td>Self-reported by participant</td></tr><tr><td>3</td><td>Documentation from patient portal or provider EHR</td></tr><tr><td>4</td><td>No weight measurement available at the time of survey completion</td></tr></table>	1	Measured in-person by the CHW	2	Self-reported by participant	3	Documentation from patient portal or provider EHR	4	No weight measurement available at the time of survey completion				
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	558	[<i>fu_weight_method_self</i>] Show the field ONLY if: [fu_weight_method]='2'	Self-reported by participant method:	dropdown <table><tr><td>1</td><td>Measured by personal scale</td></tr><tr><td>2</td><td>Last time weighted at the doctor's office</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	Measured by personal scale	2	Last time weighted at the doctor's office	3	Other						
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	559	[<i>fu_weight_method_other</i>] Show the field ONLY if: [fu_weight_method_self]='3'	Other weight estimation method	text												
	560	[<i>fu_weight_date</i>]	Date of weight measurement	text (date_mdy)												
	561	[<i>fu_bmi</i>]	BMI	calc Calculation: round((((fu_weight)/([fu_height]*[fu_height])*703),1)												
	562	[<i>fu_sbp1</i>]	Systolic blood pressure 1:	text (number)												
	563	[<i>fu_dbp1</i>]	Diastolic blood pressure 1	text (number)												
	564	[<i>fu_hba1c</i>]	A1c value: Interview Note: This A1c value should be within	text (number_1dp) Custom alignment: LV												

			the last three months of the date of endpoint survey. The participant can schedule an appointment at the doctor's office or schedule an appointment with a CHW to get a point of care test. See notes on 2nd One-on-One to remember what option the participant chose.																																					
	565	[fu_hba1c_date]	Date of A1c measurement	text (date_mdy) Custom alignment: LV																																				
	566	[fu_hba1c_method]	Method of A1c measurement collection	radio <table><tr><td>1</td><td>Via medical records (as part of clinic standard of care)</td></tr><tr><td>2</td><td>Via point of care test (as part of study)</td></tr></table> Custom alignment: LV	1	Via medical records (as part of clinic standard of care)	2	Via point of care test (as part of study)																																
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	567	[fu_hba1c_refuse]		radio <table><tr><td>1</td><td>Participant refuses to schedule A1c test</td></tr></table> Custom alignment: LH	1	Participant refuses to schedule A1c test																																		
1	Participant refuses to schedule A1c test																																							
	568	[fu_self_health]	Section Header: <i>HEALTH RELATED QUALITY OF LIFE স্বাস্থ্য সম্পর্কিত জীবনের গুণমান</i> 1.1 In general, would you say your overall health is: 1.1 আপনি কি বলবেন সাধারণভাবে আপনার স্বাস্থ্য:	dropdown <table><tr><td>1</td><td>Excellent</td></tr><tr><td>2</td><td>Very good</td></tr><tr><td>3</td><td>Good</td></tr><tr><td>4</td><td>Fair</td></tr><tr><td>5</td><td>Poor</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Excellent	2	Very good	3	Good	4	Fair	5	Poor	77	Don't know / Not sure	99	Skipped																						
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	569	[fu_days_physical]	1.2 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? 1.2 এবার আপনার শারীরিক রোগ এবং আঘাত বা ক্ষত সহ শারীরিক স্বাস্থ্যের বিষয়ে চিন্তা করে বললে, গত 30 দিনের মধ্যে কত দিনের জন্য আপনার শারীরিক স্বাস্থ্য ভালো ছিল না?	dropdown <table><tr><td>0</td><td>0 - None</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr></table>	0	0 - None	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17
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570	[fu_days_mental]	<p>1.3 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?</p> <p>1.3 এবার মানসিক চাপ ও ডিপ্রেসন/বিষণ্নতা এবং আবেগ-অনুভূতির সমস্যা সহ আপনার মানসিক স্বাস্থ্যের বিষয়ে চিন্তা করে বললে, গত 30 দিনে কত দিনের জন্য আপনার মানসিক স্বাস্থ্য ভালো ছিল না?</p>	<p>dropdown</p> <table><tr><td>0</td><td>0 - None</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr></table>	0	0 - None	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23
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571	<p>[fu_days_usualactivities]</p> <p>Show the field ONLY if: [fu_days_physical] = '1' or [fu_days_physical] = '2' or [fu_days_physical] = '3' or [fu_days_physical] = '4' or [fu_days_physical] = '5' or [fu_days_physical] = '6' or [fu_days_physical] = '7' or [fu_days_physical] = '8' or [fu_days_physical] = '9' or [fu_days_physical] = '10' or [fu_days_physical] = '11' or [fu_days_physical] = '12' or [fu_days_physical] = '13' or [fu_days_physical] = '14' or [fu_days_physical] = '15' or [fu_days_physical] = '16' or [fu_days_physical] = '17' or [fu_days_physical] = '18' or [fu_days_physical] = '19' or [fu_days_physical] = '20' or [fu_days_physical] = '21' or [fu_days_physical] = '22' or [fu_days_physical] = '23' or [fu_days_physical] = '24' or [fu_days_physical] = '25' or [fu_days_physical] = '26' or [fu_days_physical] = '27' or [fu_days_physical] = '28' or [fu_days_physical] = '29' or [fu_days_physical] = '30' or [fu_days_physical] = '77' or [fu_days_physical] = '98' or [fu_days_physical] = '99' or [fu_days_mental] = '1' or [fu_days_mental] = '2' or [fu_days_mental] = '3' or [fu_days_mental] = '4' or [fu_days_mental] = '5' or [fu_days_mental] = '6' or</p>	<p>1.4 During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?</p> <p>1.4 গত 30 দিনে, কত দিনের জন্য ভগ্ন শারীরিক বা মানসিক স্বাস্থ্য আপনার সাধারণ কাজকর্ম যেমন নিজের যত্ন করা, কাজ করা বা বিনোদনে বাধা দিয়েছিল?</p>	<p>dropdown</p> <table><tr><td>0</td><td>0 - None</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr></table>	0	0 - None	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29
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572	[fu_se1]	<p>Section Header: <i>HEALTH SELF-EFFICACY</i></p> <p>2.1 You feel comfortable asking your doctor about questions on health issues you don't understand or know.</p> <p>2.1 স্বাস্থ্য বিষয়ক কোন কিছু আপনি না বুঝলে বা না জানলে ডাক্তারকে তা জিগেস করতে আপনার কোন সমস্যা হয়না।</p>	<p>dropdown</p> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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573	[fu_se2]	<p>2.2 You feel comfortable about going to the doctor alone.</p> <p>2.2 ডাক্তারের কাছে একা যেতে আপনার কোন সমস্যা হয়না।</p>	<p>dropdown</p> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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574	[fu_se3]	<p>2.3 You feel comfortable about picking up the phone and investigating where you can go to get medical care.</p> <p>2.3 ফোন করে কোথায় কোথায় স্বাস্থ্য সেবা পেতে পারবেন তার খোঁজ খবর নিতে আপনার আত্মবিশ্বাস রয়েছে।</p>	<p>dropdown</p> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	575	[fu_se4]	<p>2.4 You know where to go to get medical attention.</p> <p>2.4. স্বাস্থ্য সেবা পেতে কোথায় যেতে হবে, আপনি তা জানেন।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	576	[fu_se5]	<p>2.5 You prefer to have others accompany you to the doctor for support.</p> <p>2.5 ডাক্তারের কাছে যেতে সাহায্য করার জন্য আপনি চান যে অন্য কেউ আপনার সাথে যাক।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	577	[fu_se6]	<p>2.6 You can effectively use the public transportation system.</p> <p>2.6 পাব্লিক পরিবহনের মাধ্যমে সিটিতে সঠিক পথ খুঁজে নিতে আপনার তেমন সমস্যা হয়না।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	578	[fu_se7]	<p>2.7 You have the right to use some of your family income to take care of your personal medical needs.</p> <p>2.7 নিজের চিকিৎসার প্রয়োজনে পরিবারের আয় থেকে কিছু টাকা নেবার অধিকার আপনার রয়েছে।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	579	[fu_se8]	<p>2.8 You can make your own decisions regarding health concerns.</p> <p>2.8 স্বাস্থ্য বিষয়ক সিদ্ধান্ত আপনি নিজেই নিতে পারেন।</p>	<div>dropdown</div> <table><tr><td>1</td><td>Highly disagree</td></tr><tr><td>2</td><td>Somewhat disagree</td></tr><tr><td>3</td><td>Somewhat agree</td></tr><tr><td>4</td><td>Highly agree</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Highly disagree	2	Somewhat disagree	3	Somewhat agree	4	Highly agree	98	Refused	99	Skipped
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	580	[fu_pa]	<p>Section Header: <i>PHYSICAL ACTIVITY</i> শারীরিক কাজকর্ম/ব্যায়াম</p> <p>3.1 During the past week, did you participate in any physical activities such as running, push-ups, gardening, or walking for exercise?</p> <p>Interviewer note: Include up to three activities. It is not for you to decide whether or not</p>	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know / Not sure	98	Refused	99	Skipped		
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		something counts as physical activity. If the participant is unsure, simply re-read the question and tell them that it is up to them to include whatever activity."	Custom alignment: LV																																				
581	[fu_pa_1_yn] Show the field ONLY if: [fu_pa] = '1'	ACTIVITY 1 কাজ 1	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																
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582	[fu_pa_1_type] Show the field ONLY if: [fu_pa_1_yn] = '1'	3.2a What was the main type of physical activity or exercise during the past week? 3.2a গত সপ্তাহে আপনি কোন প্রকারের শারীরিক কাজ বা ব্যায়ামে সবচেয়ে বেশি সময় কাটিয়েছেন?	text																																				
583	[fu_pa_1_days] Show the field ONLY if: [fu_pa_1_yn] = '1'	3.2b How many times per week did you take part in this activity during the past week? 3.2b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?	dropdown <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped														
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584	[fu_pa_1_time] Show the field ONLY if: [fu_pa_1_yn] = '1'	3.2c When you took part in this activity, for how many minutes did you usually keep at it? 3.2c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?	dropdown <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr><tr><td>45</td><td>45 minutes</td></tr><tr><td>50</td><td>50 minutes</td></tr><tr><td>55</td><td>55 minutes</td></tr><tr><td>60</td><td>60 minutes</td></tr><tr><td>75</td><td>75 minutes</td></tr><tr><td>90</td><td>90 minutes</td></tr><tr><td>120</td><td>120 minutes</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes	45	45 minutes	50	50 minutes	55	55 minutes	60	60 minutes	75	75 minutes	90	90 minutes	120	120 minutes
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	585	[fu_pa_2_yn] Show the field ONLY if: [fu_pa_1_yn] = '1'	ACTIVITY 2 কাজ 2	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																								
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	586	[fu_pa_2_type] Show the field ONLY if: [fu_pa_2_yn] = '1'	3.3a What other type of physical activity gave you the second most exercise during the past week? 3.3a গত সপ্তাহে আপনার করা আর কোন শারীরিক কার্যক্রম আপনাকে দ্বিতীয় সর্বাধিক ব্যায়াম দিয়েছিলো?	text																												
	587	[fu_pa_2_days] Show the field ONLY if: [fu_pa_2_yn] = '1'	3.3b How many times per week did you take part in this activity during the past week? 3.3b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?	dropdown <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped						
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	588	[fu_pa_2_time] Show the field ONLY if: [fu_pa_2_yn] = '1'	3.3c When you took part in this activity, for how many minutes did you usually keep at it? 3.3c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?	dropdown <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr><tr><td>45</td><td>45 minutes</td></tr><tr><td>50</td><td>50 minutes</td></tr><tr><td>55</td><td>55 minutes</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes	45	45 minutes	50	50 minutes	55	55 minutes
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590	[fu_pa_3_type] Show the field ONLY if: [fu_pa_3_yn] = '1'	3.4a What other type of physical activity gave you the third most exercise during the past week? 3.4a গত সপ্তাহে আর কোন শারীরিক কার্যক্রম আপনার তৃতীয় সর্বাধিক ব্যায়াম দিয়েছিলো?	text																						
591	[fu_pa_3_days] Show the field ONLY if: [fu_pa_3_yn] = '1'	3.4b How many times per week did you take part in this activity during the past week? 3.4b গত সপ্তাহে এই কাজে প্রতি সপ্তাহে আপনি কতবার অংশ নিয়েছিলেন?	dropdown <table><tr><td>0</td><td>No days</td></tr><tr><td>1</td><td>1 day</td></tr><tr><td>2</td><td>2 days</td></tr><tr><td>3</td><td>3 days</td></tr><tr><td>4</td><td>4 days</td></tr><tr><td>5</td><td>5 days</td></tr><tr><td>6</td><td>6 days</td></tr><tr><td>7</td><td>7 days</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	No days	1	1 day	2	2 days	3	3 days	4	4 days	5	5 days	6	6 days	7	7 days	77	Don't know	98	Refused	99	Skipped
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592	[fu_pa_4_time] Show the field ONLY if: [fu_pa_3_yn] = '1'	3.4c When you took part in this activity, for how many minutes did you usually keep at it? 3.4c যখন আপনি এই কাজে অংশ নিয়েছিলেন তখন সাধারণত কত মিনিট বা ঘন্টার জন্য এটা করেছিলেন?	dropdown <table><tr><td>0</td><td>0 minutes</td></tr><tr><td>3</td><td>3 minutes</td></tr><tr><td>5</td><td>5 minutes</td></tr><tr><td>7</td><td>7 minutes</td></tr><tr><td>10</td><td>10 minutes</td></tr><tr><td>15</td><td>15 minutes</td></tr><tr><td>20</td><td>20 minutes</td></tr><tr><td>25</td><td>25 minutes</td></tr><tr><td>30</td><td>30 minutes</td></tr><tr><td>35</td><td>35 minutes</td></tr><tr><td>40</td><td>40 minutes</td></tr></table>	0	0 minutes	3	3 minutes	5	5 minutes	7	7 minutes	10	10 minutes	15	15 minutes	20	20 minutes	25	25 minutes	30	30 minutes	35	35 minutes	40	40 minutes
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	593	[fu_salt_cooking]	Section Header: <i>Nutrition</i> 4.1 Over the past week, how often was salt used in cooking?	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Sometimes</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All the time</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Sometimes	3	Most of the time	4	All the time	77	Don't know/Not sure	98	Refused	99	Skipped										
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	594	[fu_salt_add]	4.2 Over the past week, did you add salt to the food you eat AFTER it was served?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped														
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	595	[fu_salty_snacks]	4.3 Over the past month, how often did you eat salty foods or snacks?	<div>dropdown</div> <table><tr><td>1</td><td>Never or less than 1 time in the past month</td></tr><tr><td>2</td><td>1 time in the past month</td></tr><tr><td>3</td><td>2-3 times in the past month</td></tr><tr><td>4</td><td>1 time per week</td></tr><tr><td>5</td><td>2 times per week</td></tr><tr><td>6</td><td>3-4 times per week</td></tr><tr><td>7</td><td>5-6 times per week</td></tr><tr><td>8</td><td>1 time per day</td></tr><tr><td>9</td><td>2 or more times per day</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr></table>	1	Never or less than 1 time in the past month	2	1 time in the past month	3	2-3 times in the past month	4	1 time per week	5	2 times per week	6	3-4 times per week	7	5-6 times per week	8	1 time per day	9	2 or more times per day	77	Don't know/Not sure				
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	596	[fu_salt_rec]	4.4 How do you think your daily salt intake compares to the amount of salt recommended by health professionals?	<div>dropdown</div> <table><tr><td>1</td><td>I eat less salt than recommended</td></tr><tr><td>2</td><td>I eat about the right amount of salt</td></tr><tr><td>3</td><td>I eat more salt than recommended</td></tr><tr><td>77</td><td>I don't know</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	I eat less salt than recommended	2	I eat about the right amount of salt	3	I eat more salt than recommended	77	I don't know	99	Skipped																																				
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	597	[fu_salt_damage]	4.5 Do you think that eating too much salt could damage your health?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Yes	2	No	77	Don't know	99	Skipped																																						
1	Yes																																																	
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	598	[fu_fruit_amt]	<p>Section Header: <i>NUTRITION</i> পুষ্টি Now think about the foods you ate or drank during the past month, that is, in the past 30 days, including meals and snacks. এবার গত মাসে, মানে গত 30 দিনে, আপনি প্রধান খাবার ও স্ন্যাক্স সমেত যে খাবার বা পানীয় খেয়েছিলেন সেসব বিষয়ে চিন্তা করে দেখুন। Interviewer instructions: If a respondent indicates that they consume a food item every day then enter the number of times per day. If the respondent indicates that they eat a food less than daily, then enter the times per week or times per month. Do not enter times per day unless the respondent reports that he/she consumed that food each day during the past month. ENTER QUANTITY IN DAYS, WEEKS, OR MONTHS IF RESPONDENT GIVES A NUMBER WITHOUT A TIME FRAME, ASK "WAS THAT PER DAY, WEEK, OR MONTH?"</p> <p>4.6 In the past 30 days, not including juices, how often did you eat fruit? You can tell me times per day, times per week, or times per month.</p> <p>4.6 জুস বা ফলের রস যদি বাদ দেওয়া হয় তাহলে আপনি কত ঘন ঘন ফল খেয়েছিলেন? আপনি প্রতি দিনে যত বার, প্রতি সপ্তাহে যত বার বা প্রতি মাসে যত বার খেয়েছেন, তা আমাকে জানাতে পারেন।</p> <p>INTERVIEWER NOTE: INCLUDE FRESH, FROZEN OR CANNED FRUIT. DO NOT INCLUDE DRIED FRUITS.</p>	<div>dropdown</div> <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22
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555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

599 [fu_fruit_freq]

Show the field ONLY if:
 [fu_fruit_amt] = '1' or [fu_fruit_amt] = '2' or [fu_fruit_amt] = '3' or [fu_fruit_amt] = '4' or [fu_fruit_amt] = '5' or [fu_fruit_amt] = '6' or [fu_fruit_amt] = '7' or [fu_fruit_amt] = '8' or [fu_fruit_amt] = '9' or [fu_fruit_amt] = '11' or [fu_fruit_amt] = '10' or [fu_fruit_amt] = '12' or [fu_fruit_amt] = '13' or [fu_fruit_amt] = '14' or [fu_fruit_amt] = '15' or [fu_fruit_amt] = '16' or [fu_fruit_amt] = '17' or [fu_fruit_amt] = '18' or [fu_fruit_amt] = '19' or [fu_fruit_amt] = '20' or [fu_fruit_amt] = '21' or [fu_fruit_amt] = '22' or [fu_fruit_amt] = '23' or [fu_fruit_amt] = '24' or [fu_fruit_amt] = '25' or [fu_fruit_amt] = '26' or [fu_fruit_amt] = '27' or [fu_fruit_amt] = '28' or [fu_fruit_amt] = '29' or [fu_fruit_amt] = '30' or [fu_fruit_amt] = '555'

Fruit frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV

600 [fu_fruit_other]

Show the field ONLY if:
 [fu_fruit_amt] = '555'

Fruit - other amount

text

Custom alignment: LV

601 [fu_soda_amt]

4.7 In the past 30 days, how often did you drink regular soda? You can tell me times per day, times per week, or times per month.

dropdown

0	Never
1	1

4.7 ডায়েট সোডা বাদ দিয়ে, কত ঘন ঘন আপনি রেগুলার সোডা পান করেছেন? আপনি আমাকে প্রতি দিনে, প্রতি সপ্তাহে অথবা প্রতি মাসে যতবার পান করেছেন, তার হিসাব দিতে পারেন।

INTERVIEWER NOTE: INCLUDE COKE, SPRITE, GINGER ALE, ETC. DO NOT INCLUDE DIET SODAS.

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30	30
555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

602 [fu_soda_freq]

Show the field ONLY if:
[fu_soda_amt] = '1' or [fu_soda_amt] = '2' or [fu_soda_amt] = '3' or [fu_soda_amt] = '4' or [fu_soda_amt] = '5' or [fu_soda_amt] = '6' or [fu_soda_amt] = '7' or [fu_soda_amt]

Soda frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV

		<div>= '8' or [fu_soda_amt] = '9' or [fu_soda_amt] = '1 1' or [fu_soda_amt] = '1 0' or [fu_soda_amt] = '1 2' or [fu_soda_amt] = '1 3' or [fu_soda_amt] = '1 4' or [fu_soda_amt] = '1 5' or [fu_soda_amt] = '1 6' or [fu_soda_amt] = '1 7' or [fu_soda_amt] = '1 8' or [fu_soda_amt] = '1 9' or [fu_soda_amt] = '2 0' or [fu_soda_amt] = '2 1' or [fu_soda_amt] = '2 2' or [fu_soda_amt] = '2 3' or [fu_soda_amt] = '2 4' or [fu_soda_amt] = '2 5' or [fu_soda_amt] = '2 6' or [fu_soda_amt] = '2 7' or [fu_soda_amt] = '2 8' or [fu_soda_amt] = '2 9' or [fu_soda_amt] = '3 0' or [fu_soda_amt] = '55 5'</div>																																												
	603	<div>[fu_soda_other]</div> <div>Show the field ONLY if: [fu_soda_amt] = '555'</div>	Soda - other amount	text Custom alignment: LV																																										
	604	<div>[fu_ssb_amt]</div>	<div>4.8 In the past 30 days, how often did you drink sugary drinks other than regular soda? You can tell me times per day, times per week, or times per month.</div> <div>৪.৪ রেগুলার সোডা বাদ দিয়ে, কত ঘন ঘন আপনি চিনি বা মিষ্টি যুক্ত পানীয় পান করেছেন? আপনি আমাকে প্রতি দিনে, প্রতি সপ্তাহে অথবা প্রতি মাসে যতবার পান করেছেন, তার হিসাব দিতে পারেন।</div> <div>INTERVIEWER NOTE: INCLUDE SWEET TEA, CHAI, LASSI, ENGERY DRINK (RED BULL), MANGO JUICE (SHEZAN), ETC. DO NOT INCLUDE DIET DRINKS AND 100% FRUIT JUICE.</div>	dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20
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555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

605 [fu_ssb_freq]

Show the field ONLY if:
 [fu_ssb_amt] = '1' or [fu_ssb_amt] = '2' or [fu_ssb_amt] = '3' or [fu_ssb_amt] = '4' or [fu_ssb_amt] = '5' or [fu_ssb_amt] = '6' or [fu_ssb_amt] = '7' or [fu_ssb_amt] = '8' or [fu_ssb_amt] = '9' or [fu_ssb_amt] = '11' or [fu_ssb_amt] = '10' or [fu_ssb_amt] = '12' or [fu_ssb_amt] = '13' or [fu_ssb_amt] = '14' or [fu_ssb_amt] = '15' or [fu_ssb_amt] = '16' or [fu_ssb_amt] = '17' or [fu_ssb_amt] = '18' or [fu_ssb_amt] = '19' or [fu_ssb_amt] = '20' or [fu_ssb_amt] = '21' or [fu_ssb_amt] = '22' or [fu_ssb_amt] = '23' or [fu_ssb_amt] = '24' or [fu_ssb_amt] = '25' or [fu_ssb_amt] = '26' or [fu_ssb_amt] = '27' or [fu_ssb_amt] = '28' or [fu_ssb_amt] = '29' or [fu_ssb_amt] = '30' or [fu_ssb_amt] = '555'

Sugar sweetened beverage frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV

606 [fu_ssb_other]

Show the field ONLY if:
 [fu_ssb_amt] = '555'

Sugar sweetened beverage - other amount

text

Custom alignment: LV

607 [fu_friedpotato_amt]

4.9 In the past 30 days, how often did you eat
 any kinds of fried potatoes, including those in

dropdown

0	Never
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aloo chop or samosas, or French fries?

4.9 আপনি আলুর চপ বা সিঙ্গাড়া, বা ফ্রেঞ্চ ফ্রাইয়ের
মত ভাজা আলু কত বার খেয়েছিলেন?

INTERVIEWER NOTE: READ IF RESPONDENT
ASKS ABOUT POTATO CHIPS: "DO NOT INCLUDE
POTATO CHIPS."

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555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

608 [fu_friedpotato_freq]

Show the field ONLY if:
[fu_friedpotato_amt] =
'1' or [fu_friedpotato_am
t] = '2' or [fu_friedpotato
_amt] = '3' or [fu_friedpo
tato_amt] = '4' or [fu_frie

Fried potato frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

		dpotato_amt] = '5' or [fu_friedpotato_amt] = '6' or [fu_friedpotato_amt] = '7' or [fu_friedpotato_amt] = '8' or [fu_friedpotato_amt] = '9' or [fu_friedpotato_amt] = '10' or [fu_friedpotato_amt] = '11' or [fu_friedpotato_amt] = '12' or [fu_friedpotato_amt] = '13' or [fu_friedpotato_amt] = '14' or [fu_friedpotato_amt] = '15' or [fu_friedpotato_amt] = '16' or [fu_friedpotato_amt] = '17' or [fu_friedpotato_amt] = '18' or [fu_friedpotato_amt] = '19' or [fu_friedpotato_amt] = '20' or [fu_friedpotato_amt] = '21' or [fu_friedpotato_amt] = '22' or [fu_friedpotato_amt] = '23' or [fu_friedpotato_amt] = '24' or [fu_friedpotato_amt] = '25' or [fu_friedpotato_amt] = '26' or [fu_friedpotato_amt] = '27' or [fu_friedpotato_amt] = '28' or [fu_friedpotato_amt] = '29' or [fu_friedpotato_amt] = '30' or [fu_friedpotato_amt] = '555' or [fu_friedpotato_amt] = '555'		Custom alignment: LV																												
	609	[fu_friedpotato_other] Show the field ONLY if: [fu_friedpotato_amt] = '555'	Fried potato - other amount	text Custom alignment: LV																												
	610	[fu_potato_amt] 4.10 In the past 30 days, how often did you eat any other kind of potatoes, such as aloo bortha, mishti aloo, dry potato curry, or potatoes used in vegetable, meat, or fish curries? 4.10 আপনি অন্য ভাবে কতবার আলু ভর্তা, মিষ্টি আলু, শুকনো আলুর তরকারি, বা শাক সজ্জি, মাংস বা মাছে আলু যুক্ত করে আলু খেয়েছিলেন? INTERVIEWER NOTE: READ IR RESPONDENT ASKS ABOUT WHAT TYPES OF POTATOES TO INCLUDE: "INCLUDE ALL TYPES OF POTATOES EXCEPT FRIED."	4.10 In the past 30 days, how often did you eat any other kind of potatoes, such as aloo bortha, mishti aloo, dry potato curry, or potatoes used in vegetable, meat, or fish curries? 4.10 আপনি অন্য ভাবে কতবার আলু ভর্তা, মিষ্টি আলু, শুকনো আলুর তরকারি, বা শাক সজ্জি, মাংস বা মাছে আলু যুক্ত করে আলু খেয়েছিলেন? INTERVIEWER NOTE: READ IR RESPONDENT ASKS ABOUT WHAT TYPES OF POTATOES TO INCLUDE: "INCLUDE ALL TYPES OF POTATOES EXCEPT FRIED."	dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13
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30	30
555	Other amount
777	Don't know
888	Refused
999	Skipped

Custom alignment: LV

611 [fu_potato_freq]

Show the field ONLY if:
[fu_potato_amt] = '1' or
[fu_potato_amt] = '2' or
[fu_potato_amt] = '3' or
[fu_potato_amt] = '4' or
[fu_potato_amt] = '5' or
[fu_potato_amt] = '6' or
[fu_potato_amt] = '7' or
[fu_potato_amt] = '8' or
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[fu_potato_amt] = '10' or
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[fu_potato_amt] = '16' or
[fu_potato_amt] = '17' or
[fu_potato_amt] = '18' or
[fu_potato_amt] = '19' or
[fu_potato_amt] = '20' or
[fu_potato_amt] = '21' or
[fu_potato_amt] = '22' or
[fu_potato_amt] = '23' or
[fu_potato_amt] = '24' or
[fu_potato_amt] = '25' or

Other potato frequency

dropdown

1	Times per day
2	Times per week
3	Times per month
99	Skipped

Custom alignment: LV

		[fu_potato_amt] = '26' or [fu_potato_amt] = '27' or [fu_potato_amt] = '28' or [fu_potato_amt] = '29' or [fu_potato_amt] = '30' or [fu_potato_amt] = '555'																																																																			
	612	[fu_potato_other] Show the field ONLY if: [fu_potato_amt] = '555'	Other potato - other amount text Custom alignment: LV																																																																		
	613	[fu_vegetable_amt] 4.11 In the past 30 days, not including lettuce and potatoes, how often did you eat other vegetables? 4.11 লেটুস পাতা ও আলু বাদে আপনি কত ঘন ঘন অন্যান্য শাক সব্জি খেয়েছেন? INTERVIEWER NOTE: READ IF RESPONDENT ASKS ABOUT WHAT TO INCLUDE: "INCLUDE TOMATOES, GREEN BEANS, CARROTS, CORN, CABBAGE, BEAN SPROUTS, COLLARD GREENS, AND BROCCOLI. INCLUDE RAW, COOKED, CANNED, OR FROZEN VEGETABLES. DO NOT INCLUDE RICE."	dropdown <table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>21</td><td>21</td></tr><tr><td>22</td><td>22</td></tr><tr><td>23</td><td>23</td></tr><tr><td>24</td><td>24</td></tr><tr><td>25</td><td>25</td></tr><tr><td>26</td><td>26</td></tr><tr><td>27</td><td>27</td></tr><tr><td>28</td><td>28</td></tr><tr><td>29</td><td>29</td></tr><tr><td>30</td><td>30</td></tr><tr><td>555</td><td>Other amount</td></tr><tr><td>777</td><td>Don't know</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	21	21	22	22	23	23	24	24	25	25	26	26	27	27	28	28	29	29	30	30	555	Other amount	777	Don't know
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888	Refused														
999	Skipped														
614	<p>[fu_vegetable_freq]</p> <p>Show the field ONLY if: [fu_vegetable_amt] = '1' or [fu_vegetable_amt] = '2' or [fu_vegetable_amt] = '3' or [fu_vegetable_amt] = '4' or [fu_vegetable_amt] = '5' or [fu_vegetable_amt] = '6' or [fu_vegetable_amt] = '7' or [fu_vegetable_amt] = '8' or [fu_vegetable_amt] = '9' or [fu_vegetable_amt] = '10' or [fu_vegetable_amt] = '11' or [fu_vegetable_amt] = '12' or [fu_vegetable_amt] = '13' or [fu_vegetable_amt] = '14' or [fu_vegetable_amt] = '15' or [fu_vegetable_amt] = '16' or [fu_vegetable_amt] = '17' or [fu_vegetable_amt] = '18' or [fu_vegetable_amt] = '19' or [fu_vegetable_amt] = '20' or [fu_vegetable_amt] = '21' or [fu_vegetable_amt] = '22' or [fu_vegetable_amt] = '23' or [fu_vegetable_amt] = '24' or [fu_vegetable_amt] = '25' or [fu_vegetable_amt] = '26' or [fu_vegetable_amt] = '27' or [fu_vegetable_amt] = '28' or [fu_vegetable_amt] = '29' or [fu_vegetable_amt] = '30' or [fu_vegetable_amt] = '555'</p>	Other vegetable frequency	<div>dropdown</div> <table><tr><td>1</td><td>Times per day</td></tr><tr><td>2</td><td>Times per week</td></tr><tr><td>3</td><td>Times per month</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV	1	Times per day	2	Times per week	3	Times per month	99	Skipped				
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2	Times per week														
3	Times per month														
99	Skipped														
615	<p>[fu_vegetable_other]</p> <p>Show the field ONLY if: [fu_vegetable_amt] = '555'</p>	Other vegetable - other amount	<div>text</div> Custom alignment: LV												
616	<p>[fu_inst_support_1]</p>	<p>Section Header: <i>Social Support</i> সোশাল বা সামাজিক সহায়তা</p> <p>5.1 Someone is around to make meals if I am unable to do it myself</p>	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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2	Rarely														
3	Sometimes														
4	Usually														
5	Always														
99	Skipped														

	617	[fu_inst_support_2]	5.2 I have someone to take me shopping if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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	618	[fu_inst_support_3]	5.3 I have someone to help me if I'm sick in bed	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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3	Sometimes															
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	619	[fu_inst_support_4]	5.4 I have someone to pick up medicine for me if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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3	Sometimes															
4	Usually															
5	Always															
99	Skipped															
	620	[fu_inst_support_5]	5.5 I have someone to take me to the doctor if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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4	Usually															
5	Always															
99	Skipped															
	621	[fu_inst_support_6]	5.6 There is someone around to help me if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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	622	[fu_inst_support_7]	5.7 I can find someone to drive me places if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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4	Usually															
5	Always															
99	Skipped															
	623	[fu_inst_support_8]	5.8 I can get help cleaning up around my home if I need it	<div>dropdown</div> <table><tr><td>1</td><td>Never</td></tr><tr><td>2</td><td>Rarely</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Usually</td></tr><tr><td>5</td><td>Always</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Never	2	Rarely	3	Sometimes	4	Usually	5	Always	99	Skipped
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2	Rarely															
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5	Always															
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	624	[fu_smoke]	<div>Section Header: CHW says, "I am now going to ask you a few questions about cigarettes, tobacco, and alcohol, which are important for preventing and managing diabetes."</div> <div>6. Have you smoked at least 100 cigarettes in your entire life?</div>	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped		
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	625	[fu_smoke_often] <div>Show the field ONLY if: [fu_smoke] = "1"</div>	6a. Do you now smoke cigarettes every day, some days, or not at all?	<div>dropdown</div> <table><tr><td>1</td><td>Every day</td></tr><tr><td>2</td><td>Some days</td></tr><tr><td>3</td><td>Not at all</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Every day	2	Some days	3	Not at all	77	Don't know/Not sure	98	Refused	99	Skipped
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98	Refused															
99	Skipped															
	626	[fu_paan]	7. Have you ever chewed paan, paan masala, zarda, kathi, or supari in your entire life, with or without tobacco?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped		
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98	Refused															
99	Skipped															
	627	[fu_paan_often] <div>Show the field ONLY if: [fu_paan] = "1"</div>	7a. If you do use these, how often do you use them?	<div>dropdown</div> <table><tr><td>1</td><td>Every day</td></tr><tr><td>2</td><td>Some days</td></tr><tr><td>3</td><td>Not at all</td></tr></table>	1	Every day	2	Some days	3	Not at all						
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628	[fu_alcohol_week]	Section Header: 8. During the past 30 days, how many days per week or month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor? Days in the past week	text																															
629	[fu_alcohol_30days]	Days in past 30 days	text																															
630	[fu_alcohol_add1]	Alcohol - additional choices	<table><tr><td>0</td><td>No drinks in past 30 days</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>96</td><td>Non-drinker</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> Custom alignment: LV		0	No drinks in past 30 days	77	Don't know/Not sure	96	Non-drinker	98	Refused	99	Skipped																				
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631	[fu_diab_management]	DIABETES MANAGEMENT ONLY শুধু ডায়াবেটিস নিয়ন্ত্রণ INTERVIEWER NOTE: In the following section, I will ask about how you manage your diabetes as well as how you interact with your doctors to control your diabetes.	descriptive																															
632	[fu_diab_manage]	9.1 How do you manage your diabetes? (Select all that apply) 9.1 আপনি কিভাবে নিজের ডায়াবেটিস নিয়ন্ত্রণে রাখেন? (যে কটা প্রযোজ্য সেসব বেছে নিন)	<table><tr><td colspan="3">checkbox</td></tr><tr><td>1</td><td>fu_diab_manage__1</td><td>Medication: {fu_diab_manage_</td></tr><tr><td>2</td><td>fu_diab_manage__2</td><td>Insulin</td></tr><tr><td>3</td><td>fu_diab_manage__3</td><td>Physical activity / exercise</td></tr><tr><td>4</td><td>fu_diab_manage__4</td><td>Diet control</td></tr><tr><td>5</td><td>fu_diab_manage__5</td><td>Traditional medicir</td></tr><tr><td>6</td><td>fu_diab_manage__6</td><td>Other: {fu_diab_manage_</td></tr><tr><td>98</td><td>fu_diab_manage__98</td><td>Refused</td></tr><tr><td>77</td><td>fu_diab_manage__77</td><td>Don't know / Not s</td></tr><tr><td>99</td><td>fu_diab_manage__99</td><td>Skipped</td></tr></table> Custom alignment: LV		checkbox			1	fu_diab_manage__1	Medication: {fu_diab_manage_	2	fu_diab_manage__2	Insulin	3	fu_diab_manage__3	Physical activity / exercise	4	fu_diab_manage__4	Diet control	5	fu_diab_manage__5	Traditional medicir	6	fu_diab_manage__6	Other: {fu_diab_manage_	98	fu_diab_manage__98	Refused	77	fu_diab_manage__77	Don't know / Not s	99	fu_diab_manage__99	Skipped
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99	fu_diab_manage__99	Skipped																																
633	[fu_diab_manage_med] Show the field ONLY if: [fu_diab_manage(1)]	Medication name:	text																															
634	[fu_diab_manage_other] Show the field ONLY if: [fu_diab_manage(6)] = '1'	Other:	text																															
635	[fu_chk_feet_amt]	9.2 About how often do you check your feet for sores or irritations? Include times when checked	dropdown																															

		<p>by a family member or friend, but do NOT include times when checked by a health professional.</p> <p>9.2 আপনি প্রায় কতবার আপনার পায়ের পাতায় ঘা বা অস্বস্তি পরীক্ষা করে দেখেন? পরিবারের সদস্য বা বন্ধু যত বার পরীক্ষা করেন সেসবের হিসাব জানাবেন তবে পেশাগত স্বাস্থ্য কর্মী যত বার পরীক্ষা করেন তার হিসাব জানাবেন না।</p> <p>[CHOOSE NUMBER OF TIMES] <i>Choose number of times</i></p>	<table><tr><td>0</td><td>Never</td></tr><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>96</td><td>No feet</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	Never	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20	95	Other	96	No feet	77	Don't know / Not sure	98	Refused	99	Skipped
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636	<p>[fu_chk_feet_freq]</p> <p>Show the field ONLY if: [fu_chk_feet_amt] = '1' or [fu_chk_feet_amt] = '2' or [fu_chk_feet_amt] = '3' or [fu_chk_feet_amt] = '4' or [fu_chk_feet_amt] = '5' or [fu_chk_feet_amt] = '6' or [fu_chk_feet_amt] = '7' or [fu_chk_feet_amt] = '8' or [fu_chk_feet_amt] = '9' or [fu_chk_feet_amt] = '10' or [fu_chk_feet_amt] = '11' or [fu_chk_feet_amt] = '12' or [fu_chk_feet_amt] = '13' or [fu_chk_feet_amt] = '14' or [fu_chk_feet_amt] = '15' or [fu_chk_feet_amt] = '16' or [fu_chk_feet_amt] = '17' or [fu_chk_feet_amt]</p>	9.2 Feet check frequency [CHOOSE ONE]	<p>dropdown</p> <table><tr><td>1</td><td>Times per day</td></tr><tr><td>2</td><td>Times per week</td></tr><tr><td>3</td><td>Times per month</td></tr><tr><td>4</td><td>Times per year</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Times per day	2	Times per week	3	Times per month	4	Times per year	98	Refused	99	Skipped																																								
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		= '18' or [fu_chk_feet_amt] = '19' or [fu_chk_feet_amt] = '20' or [fu_chk_feet_amt] = '95'																																		
	637	[fu_chk_feet_other] Show the field ONLY if: [fu_chk_feet_amt] = '95'	9.2 Other amount	text																																
	638	[fu_diab_doc] 9.3 About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes? 9.3 গত 12 মাসে প্রায় কত বার আপনি আপনার ডায়বেটিসের জন্য ডাক্তার, নার্স বা অন্য পেশাদার স্বাস্থ্য সেবা প্রদানকারীর সঙ্গে দেখা করেছেন? <i>Choose number of times</i>	9.3 Other amount	dropdown <table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr><tr><td>6</td><td>6 times</td></tr><tr><td>7</td><td>7 times</td></tr><tr><td>8</td><td>8 times</td></tr><tr><td>9</td><td>9 times</td></tr><tr><td>10</td><td>10 times</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times	6	6 times	7	7 times	8	8 times	9	9 times	10	10 times	77	Don't know / Not sure	95	Other	98	Refused	99	Skipped		
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	639	[fu_diab_doc_other] Show the field ONLY if: [fu_diab_doc] = '95'	9.3 Other amount	text																																
	640	[fu_chk_a1c] 9.4 A test for "A1c" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A1c"? 9.4 "A1c" পরীক্ষা মানে গত তিন মাসে রক্তে সুগারের গড় হিসাব বোঝায়। গত 12 মাসে প্রায় কত বার ডাক্তার, নার্স বা অন্য পেশাদার স্বাস্থ্য সেবা প্রদানকারী আপনার "A1c" পরীক্ষা করে দেখেছেন? <i>Write in number of times</i>	9.4 Other amount	dropdown <table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr><tr><td>6</td><td>6 times</td></tr><tr><td>7</td><td>7 times</td></tr><tr><td>8</td><td>8 times</td></tr><tr><td>9</td><td>9 times</td></tr><tr><td>10</td><td>10 times</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>96</td><td>Never heard of "A1c" test</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times	6	6 times	7	7 times	8	8 times	9	9 times	10	10 times	95	Other	96	Never heard of "A1c" test	77	Don't know / Not sure	98	Refused	99	Skipped
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	641	[fu_chk_a1c_other] Show the field ONLY if: [fu_chk_a1c] = '95'	9.4 Other amount	text																														
	642	[fu_doc_feet] 9.5 About how many times in the past 12 months has a health professional checked your feet for any sores or irritations? 9.5 গত 12 মাসে প্রায় কত বার পেশাদার স্বাস্থ্য সেবা প্রদানকারী আপনার পায়ে কোনরকম ঘা বা অস্বস্তি পরীক্ষা করে দেখেছেন? <i>Choose number of times</i>	9.5 Other amount	dropdown <table><tr><td>0</td><td>None</td></tr><tr><td>1</td><td>1 time</td></tr><tr><td>2</td><td>2 times</td></tr><tr><td>3</td><td>3 times</td></tr><tr><td>4</td><td>4 times</td></tr><tr><td>5</td><td>5 times</td></tr><tr><td>6</td><td>6 times</td></tr><tr><td>7</td><td>7 times</td></tr><tr><td>8</td><td>8 times</td></tr><tr><td>9</td><td>9 times</td></tr><tr><td>10</td><td>10 times</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>95</td><td>Other</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	None	1	1 time	2	2 times	3	3 times	4	4 times	5	5 times	6	6 times	7	7 times	8	8 times	9	9 times	10	10 times	77	Don't know / Not sure	95	Other	98	Refused	99	Skipped
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	643	[fu_doc_feet_other] Show the field ONLY if: [fu_doc_feet] = '95'	9.5 Other amount	text																														
	644	[fu_fluvaccine] 9.6 In the past 12 months, did you get a flu vaccine sprayed into your nose or a flu shot injected into your arm?	9.6 Other amount	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped																				
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	645	[fu_pneumvaccine] 9.7 Have you ever had the pneumonia shot also know as pneumococcal vaccine?	9.7 Other amount	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped																				
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	646	[fu_eye_dilated] 9.8 When was the last time you had an eye exam in which the pupils were dilated? 9.8 শেষ কবে আপনার চোখ পরীক্ষা করিয়েছিলেন যাতে আপনার চোখের তারা ডাইলেট বা প্রসারিত করে দেখা হয়েছিল? NOTES: "PUPIL DILATION INVOLVES GETTING EYE DROPS TO MAKE YOUR PUPILS LARGER."	9.8 Other amount	dropdown <table><tr><td>1</td><td>Within the past month</td></tr><tr><td>2</td><td>Within the past year</td></tr><tr><td>3</td><td>Within the past 2 years</td></tr><tr><td>4</td><td>2 or more years ago</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>0</td><td>Never</td></tr></table>	1	Within the past month	2	Within the past year	3	Within the past 2 years	4	2 or more years ago	77	Don't know / Not sure	0	Never																		
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	647	[fu_retinopathy]	9.9 Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy? 9.9 আপনার ডাক্তার কি আপনাকে কখনো জানিয়েছেন যে ডায়াবেটিসে আপনার চোখ আক্রান্ত হয়েছে বা আপনার রেটিনোপ্যাথি হয়েছে? NOTES: "RETINOPATHY CAUSES SMALL BLOOD VESSELS IN THE BACK OF THEY EYE TO GET WEAK AND POSSIBLY LEAK BLOOD."	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know / Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know / Not sure	98	Refused	99	Skipped		
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	648	[fu_arms]	MEDICATION ADHERENCE Adherence to refills and medications scale (ARMS) অ্যাডহেরেন্স টু রিফিলস অ্যান্ড মেডিকেশন স্কেল (ARMS)	descriptive												
	649	[fu_arms1]	10.1 How often do you forget to take your medicine? 10.1 আপনি কতবার আপনার ওষুধ নিতে ভুলে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	650	[fu_arms2]	10.2 How often do you decide not to take your medicine? 10.2 আপনি কত বার ওষুধ না নেওয়ার সিদ্ধান্ত নেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	651	[fu_arms3]	10.3 How often do you forget to get prescriptions filled? 10.3 আপনি কতবার আপনার প্রেসক্রিপশন পূরণ করতে ভুলে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	652	[fu_arms4]	10.4 How often do you run out of medicine? 10.4 আপনার কত বার ওষুধ ফুরিয়ে যায়?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused		
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	653	[fu_arms5]	10.5 How often do you skip a dose of your medicine before you go to the doctor? 10.5 ডাক্তারের কাছে যাওয়ার আগে আপনি কত ঘন ঘন আপনার ওষুধের ডোজ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	654	[fu_arms6]	10.6 How often do you miss taking your medicine when you feel better? 10.6 যখন আপনি আগের থেকে সুস্থ বোধ করেন তখন কত ঘন ঘন ওষুধ বাদ দিয়ে দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	655	[fu_arms7]	10.7 How often do you miss taking your medicine when you feel sick? 10.7 যখন আপনি অসুস্থ বোধ করেন তখন কত ঘন ঘন আপনার ওষুধ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	656	[fu_arms8]	10.8 How often do you miss taking your medicine when you are careless? 10.8 অবহেলার কারণে আপনি কত ঘন ঘন আপনার ওষুধ বাদ দেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	657	[fu_arms9]	10.9 How often do you change the dose of your medicine to suit your needs (like when you take more or less than you're supposed to)? 10.9 নিজের দরকারমত আপনি কত ঘন ঘন নিজের ওষুধের ডোজ বদলে নেন (যেমন আপনার যতগুলি বড়ি সেবন করা দরকার তার চেয়ে বেশি বা কম খান)?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped
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	658	[fu_arms10]	10.10 How often do you forget to take your medicine when you are supposed to take it more than once a day? 10.10 যখন আপনার দিনে একবারের বেশি ওষুধ	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr></table>		1	None of the time	2	Some of the time	3	Most of the time						
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659	[fu_arms11]	10.11 How often do you put off refilling your medicines because they cost too much money? 10.11 আপনার ওষুধের দাম অতিরিক্ত হওয়ার কারণে আপনি কত ঘন ঘন সেসব রিফিল করা এড়িয়ে যান?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped															
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2	Some of the time																													
3	Most of the time																													
4	All of the time																													
98	Refused																													
99	Skipped																													
660	[fu_arms12]	10.12 How often do you plan ahead and refill your medicine before they run out? 10.12 আপনি কত ঘন ঘন আগে থেকে পরিকল্পনা করে আপনার ওষুধ ফুরিয়ে যাওয়ার আগেই সেসব রিফিল করে রাখেন?	dropdown <table><tr><td>1</td><td>None of the time</td></tr><tr><td>2</td><td>Some of the time</td></tr><tr><td>3</td><td>Most of the time</td></tr><tr><td>4</td><td>All of the time</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	None of the time	2	Some of the time	3	Most of the time	4	All of the time	98	Refused	99	Skipped															
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3	Most of the time																													
4	All of the time																													
98	Refused																													
99	Skipped																													
661	[fu_insurance]	11.1 Are you covered by health insurance or some other kind of health care plan?	dropdown <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	1	Yes	2	No	77	Don't know	99	Skipped																			
1	Yes																													
2	No																													
77	Don't know																													
99	Skipped																													
662	[fu_insurance_type]	11.1a. Which type?	checkbox <table><tr><td>1</td><td>fu_insurance_type__1</td><td>Medicaid ("White Card")</td></tr><tr><td>2</td><td>fu_insurance_type__2</td><td>Private insurance</td></tr><tr><td>3</td><td>fu_insurance_type__3</td><td>Other type of public/government insurance (Family Plus)</td></tr><tr><td>4</td><td>fu_insurance_type__4</td><td>Medicare ("Blue Card")</td></tr><tr><td>5</td><td>fu_insurance_type__5</td><td>Work or company insurance</td></tr><tr><td>6</td><td>fu_insurance_type__6</td><td>Hospital card</td></tr><tr><td>7</td><td>fu_insurance_type__7</td><td>Other health insurance {fu_insurance_type__7}</td></tr><tr><td>98</td><td>fu_insurance_type__98</td><td>Refused</td></tr><tr><td>99</td><td>fu_insurance_type__99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	fu_insurance_type__1	Medicaid ("White Card")	2	fu_insurance_type__2	Private insurance	3	fu_insurance_type__3	Other type of public/government insurance (Family Plus)	4	fu_insurance_type__4	Medicare ("Blue Card")	5	fu_insurance_type__5	Work or company insurance	6	fu_insurance_type__6	Hospital card	7	fu_insurance_type__7	Other health insurance {fu_insurance_type__7}	98	fu_insurance_type__98	Refused	99	fu_insurance_type__99	Skipped
1	fu_insurance_type__1	Medicaid ("White Card")																												
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6	fu_insurance_type__6	Hospital card																												
7	fu_insurance_type__7	Other health insurance {fu_insurance_type__7}																												
98	fu_insurance_type__98	Refused																												
99	fu_insurance_type__99	Skipped																												
663	[fu_insurance_other_type] Show the field ONLY if:	Other type:	text Custom alignment: LV																											

		[fu_insurance_type(7)] = '1'																		
	664	[fu_doctor]	11.2 Do you have a regular doctor or other health professional, such as a nurse or midwife, you usually go to when you are sick or need health care?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know/Not sure</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Yes	2	No	77	Don't know/Not sure	98	Refused	99	Skipped						
1	Yes																			
2	No																			
77	Don't know/Not sure																			
98	Refused																			
99	Skipped																			
	665	[fu_unable_treatments]	11.3 In the past 6 months, were there obstacles to obtain medical care, tests, or treatments that you or a doctor believed necessary?	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>98</td><td>Refused</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Yes	2	No	77	Don't know	98	Refused	99	Skipped						
1	Yes																			
2	No																			
77	Don't know																			
98	Refused																			
99	Skipped																			
	666	[fu_reason_unable1] Show the field ONLY if: [fu_unable_treatments] = '1'	11.3a Which of these are reasons you were unable to obtain medical care, tests or treatments that you or a doctor believed necessary? First reason	<div>dropdown</div> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped
1	Couldn't afford care																			
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5	Couldn't get child care																			
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	667	[fu_reason_unable2] Show the field ONLY if: [fu_unable_treatments] = '1'	11.3a Which of these are reasons you were unable to obtain medical care, tests or treatments that you or a doctor believed necessary? Second reason	<div>dropdown</div> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped
1	Couldn't afford care																			
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5	Couldn't get child care																			
6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
	668	[fu_reason_unable3] Show the field ONLY if: [fu_unable_treatments] = '1'	11.3a Which of these are reasons you were unable to obtain medical care, tests or treatments that you or a doctor believed necessary? Third reason	<div>dropdown</div> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr></table>	1	Couldn't afford care	2	Transportation problems	3	Different language										
1	Couldn't afford care																			
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3	Different language																			

				<table><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped						
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6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
669	<div>[fu_reason_unable4]</div> <div>Show the field ONLY if: [fu_unable_treatments] = '1'</div>	11.3a Which of these are reasons you were unable to obtain medical care, tests or treatments that you or a doctor believed necessary? Fourth reason	<div>dropdown</div> <table><tr><td>1</td><td>Couldn't afford care</td></tr><tr><td>2</td><td>Transportation problems</td></tr><tr><td>3</td><td>Different language</td></tr><tr><td>4</td><td>Didn't know where to go to get care</td></tr><tr><td>5</td><td>Couldn't get child care</td></tr><tr><td>6</td><td>Didn't have time or took too long</td></tr><tr><td>10</td><td>Other</td></tr><tr><td>99</td><td>Skipped</td></tr></table> <div>Custom alignment: LV</div>	1	Couldn't afford care	2	Transportation problems	3	Different language	4	Didn't know where to go to get care	5	Couldn't get child care	6	Didn't have time or took too long	10	Other	99	Skipped	
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6	Didn't have time or took too long																			
10	Other																			
99	Skipped																			
670	<div>[fu_reason_unable_other]</div> <div>Show the field ONLY if: [fu_reason_unable1] = '10' or [fu_reason_unable2] = '10' or [fu_reason_unable3] = '10' or [fu_reason_unable4] = '10'</div>	Other reason:	<div>text</div> <div>Custom alignment: LV</div>																	
671	<div>[fu_info_doctor]</div>	<div>Section Header: <i>In general, where do you get your health information? (Mark all that apply</i></div> <div>Doctor or health professional</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused									
1	Yes																			
2	No																			
77	Don't know																			
99	Refused																			
672	<div>[fu_info_family]</div>	Family members	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused									
1	Yes																			
2	No																			
77	Don't know																			
99	Refused																			
673	<div>[fu_info_friends]</div>	Friends	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	1	Yes	2	No	77	Don't know	99	Refused									
1	Yes																			
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77	Don't know																			
99	Refused																			
674	<div>[fu_info_newspaper]</div>	Newspaper	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></table>	1	Yes	2	No													
1	Yes																			
2	No																			

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77	Don't know													
99	Refused													
	675	[fu_info_radio]	Radio	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	radio (Matrix)		1	Yes	2	No	77	Don't know	99	Refused
radio (Matrix)														
1	Yes													
2	No													
77	Don't know													
99	Refused													
	676	[fu_info_internet]	Internet	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	radio (Matrix)		1	Yes	2	No	77	Don't know	99	Refused
radio (Matrix)														
1	Yes													
2	No													
77	Don't know													
99	Refused													
	677	[fu_info_other]	Other (specify)	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>99</td><td>Refused</td></tr></table>	radio (Matrix)		1	Yes	2	No	77	Don't know	99	Refused
radio (Matrix)														
1	Yes													
2	No													
77	Don't know													
99	Refused													
	678	[fu_info_other_text] Show the field ONLY if: [fu_info_other] = '1'	Other source:	text										
	679	[digital]	Digital Utilization INTERVIEWER NOTE: In the following section, I will ask about your use of technology since starting this program.	descriptive										
	680	[gain_phone]	Section Header: <i>12. Through this program, I have gained technological abilities with the following devices or technology</i> a. Tablet, phone, or computer	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Somewhat</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Very</td></tr></table>	radio (Matrix)		1	Not at all	2	Somewhat	3	Moderately	4	Very
radio (Matrix)														
1	Not at all													
2	Somewhat													
3	Moderately													
4	Very													
	681	[gain_videocall]	b. Video calling on Zoom, FaceTime, or WhatsApp	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Somewhat</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Very</td></tr></table>	radio (Matrix)		1	Not at all	2	Somewhat	3	Moderately	4	Very
radio (Matrix)														
1	Not at all													
2	Somewhat													
3	Moderately													
4	Very													
	682	[gain_email]	c. Email	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Somewhat</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Very</td></tr></table>	radio (Matrix)		1	Not at all	2	Somewhat	3	Moderately	4	Very
radio (Matrix)														
1	Not at all													
2	Somewhat													
3	Moderately													
4	Very													
	683	[gain_social]	d. Social networking sites like Facebook, WhatsApp, Twitter, Instagram	<table><tr><td colspan="2">radio (Matrix)</td></tr><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Somewhat</td></tr></table>	radio (Matrix)		1	Not at all	2	Somewhat				
radio (Matrix)														
1	Not at all													
2	Somewhat													

				<table><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Very</td></tr></table>	3	Moderately	4	Very						
3	Moderately													
4	Very													
	684	[gain_onlinehealth]	e. Online health information	radio (Matrix) <table><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Somewhat</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Very</td></tr></table>	1	Not at all	2	Somewhat	3	Moderately	4	Very		
1	Not at all													
2	Somewhat													
3	Moderately													
4	Very													
	685	[improve_healthinternet]	Section Header: 13. After participating in this program, how would you rate your improvement in using the following digital resources? a. Using the internet to look for health or medical information	radio (Matrix) <table><tr><td>1</td><td>Worse</td></tr><tr><td>2</td><td>No change</td></tr><tr><td>3</td><td>Some improvement</td></tr><tr><td>4</td><td>Significant improvement</td></tr></table>	1	Worse	2	No change	3	Some improvement	4	Significant improvement		
1	Worse													
2	No change													
3	Some improvement													
4	Significant improvement													
	686	[improve_video]	b. Using video conference technology like Zoom	radio (Matrix) <table><tr><td>1</td><td>Worse</td></tr><tr><td>2</td><td>No change</td></tr><tr><td>3</td><td>Some improvement</td></tr><tr><td>4</td><td>Significant improvement</td></tr></table>	1	Worse	2	No change	3	Some improvement	4	Significant improvement		
1	Worse													
2	No change													
3	Some improvement													
4	Significant improvement													
	687	[improve_emaildr]	c. Using email or the internet to communicate with your doctor or other health professional	radio (Matrix) <table><tr><td>1</td><td>Worse</td></tr><tr><td>2</td><td>No change</td></tr><tr><td>3</td><td>Some improvement</td></tr><tr><td>4</td><td>Significant improvement</td></tr></table>	1	Worse	2	No change	3	Some improvement	4	Significant improvement		
1	Worse													
2	No change													
3	Some improvement													
4	Significant improvement													
	688	[improve_devices]	d. Using a device such as computer, smartphone, or tablet	radio (Matrix) <table><tr><td>1</td><td>Worse</td></tr><tr><td>2</td><td>No change</td></tr><tr><td>3</td><td>Some improvement</td></tr><tr><td>4</td><td>Significant improvement</td></tr></table>	1	Worse	2	No change	3	Some improvement	4	Significant improvement		
1	Worse													
2	No change													
3	Some improvement													
4	Significant improvement													
	689	[fu_phq1]	Section Header: Depression screening I am going to ask you a couple of questions about the frequency of depressed mood you may have experienced over the last two weeks. Over the last two weeks, how often have you been bothered by the following problems? Little interest or pleasure in doing things	dropdown <table><tr><td>0</td><td>Not at all</td></tr><tr><td>1</td><td>Several days</td></tr><tr><td>2</td><td>More than half the days</td></tr><tr><td>3</td><td>Nearly every day</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	Not at all	1	Several days	2	More than half the days	3	Nearly every day	99	Skipped
0	Not at all													
1	Several days													
2	More than half the days													
3	Nearly every day													
99	Skipped													
	690	[fu_phq2]	Feeling down, depressed, or hopeless	dropdown <table><tr><td>0</td><td>Not at all</td></tr><tr><td>1</td><td>Several days</td></tr><tr><td>2</td><td>More than half the days</td></tr><tr><td>3</td><td>Nearly every day</td></tr><tr><td>99</td><td>Skipped</td></tr></table>	0	Not at all	1	Several days	2	More than half the days	3	Nearly every day	99	Skipped
0	Not at all													
1	Several days													
2	More than half the days													
3	Nearly every day													
99	Skipped													
	691	[endpoint_form_complete]	Section Header: Form Status Complete?	dropdown										

				<table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete															
0	Incomplete																								
1	Unverified																								
2	Complete																								
Instrument: Encounter Report (encounter_report)																									
692	[er_chw]	CHW Name	dropdown <table border="1"> <tr><td>1</td><td>Hasan</td></tr> <tr><td>2</td><td>Sakila</td></tr> <tr><td>3</td><td>Zohra</td></tr> <tr><td>4</td><td>Nazneen</td></tr> </table>		1	Hasan	2	Sakila	3	Zohra	4	Nazneen													
1	Hasan																								
2	Sakila																								
3	Zohra																								
4	Nazneen																								
693	[er_date]	Encounter date	text (date_mdy)																						
694	[er_pcp]	PCP Site	dropdown <table border="1"> <tr><td>1</td><td>Emory</td></tr> <tr><td>2</td><td>Shifa Clinic</td></tr> <tr><td>3</td><td>Grady</td></tr> <tr><td>10</td><td>Other site</td></tr> </table>		1	Emory	2	Shifa Clinic	3	Grady	10	Other site													
1	Emory																								
2	Shifa Clinic																								
3	Grady																								
10	Other site																								
695	[er_time]	Encounter time:	text																						
696	[er_type]	Encounter type:	radio <table border="1"> <tr><td>1</td><td>In-Person</td></tr> <tr><td>2</td><td>By Phone</td></tr> </table>		1	In-Person	2	By Phone																	
1	In-Person																								
2	By Phone																								
697	[er_occurred]	Check any boxes if relevant and describe what occurred or what was discussed	checkbox <table border="1"> <tr> <td>1</td> <td>er_occurred__1</td> <td>Participant requested health information</td> </tr> <tr> <td>2</td> <td>er_occurred__2</td> <td>Participant requested a referral or services</td> </tr> <tr> <td>3</td> <td>er_occurred__3</td> <td>Participant reported or was measured to have very high or low blood sugar / very high blood pressure</td> </tr> <tr> <td>4</td> <td>er_occurred__4</td> <td>Participant reported an illness, a new diagnosis, a medical procedure, or hospitalization</td> </tr> <tr> <td>5</td> <td>er_occurred__5</td> <td>Participant reported very low blood pressure</td> </tr> <tr> <td>6</td> <td>er_occurred__6</td> <td>Participant reported very high blood pressure</td> </tr> <tr> <td>7</td> <td>er_occurred__7</td> <td>Participant reported very low blood sugar</td> </tr> </table>		1	er_occurred__1	Participant requested health information	2	er_occurred__2	Participant requested a referral or services	3	er_occurred__3	Participant reported or was measured to have very high or low blood sugar / very high blood pressure	4	er_occurred__4	Participant reported an illness, a new diagnosis, a medical procedure, or hospitalization	5	er_occurred__5	Participant reported very low blood pressure	6	er_occurred__6	Participant reported very high blood pressure	7	er_occurred__7	Participant reported very low blood sugar
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6	er_occurred__6	Participant reported very high blood pressure																							
7	er_occurred__7	Participant reported very low blood sugar																							

				<table border="1"> <tr> <td>8</td><td>er_occurred__8</td><td>Participant reported very high blood sugar</td></tr> <tr> <td>10</td><td>er_occurred__10</td><td>Other</td></tr> </table> <p>Field Annotation: @HIDECHOICE='3'</p>	8	er_occurred__8	Participant reported very high blood sugar	10	er_occurred__10	Other								
8	er_occurred__8	Participant reported very high blood sugar																
10	er_occurred__10	Other																
	698	[er_occurred_text]	Describe:	notes														
	699	[er_actions_taken]	Describe the actions taken or recommendations provided by the CHW.	notes														
	700	[er_outcome]	Describe the outcome.	notes														
	701	[er_followup]	<p>FOLLOW-UP</p> <p>Describe any necessary follow-up or any follow-up that was provided.</p>	notes														
	702	[encounter_report_complete]	<p>Section Header: <i>Form Status</i></p> <p>Complete?</p>	<p>dropdown</p> <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete								
0	Incomplete																	
1	Unverified																	
2	Complete																	
Instrument: Contact Attempts Intervention (contact_attempts_intervention)																		
	703	[call_phone_home_t]	Phone (home)	<p>text (phone)</p> <p>Field Annotation: @DEFAULT='[phone_home]'</p>														
	704	[call_phone_cell_t]	Phone (cell)	<p>text (phone)</p> <p>Field Annotation: @DEFAULT='[phone_cell]'</p>														
	705	[call_date_t]	Date of encounter	text (date_mdy)														
	706	[call_time_t]	Time of encounter	text														
	707	[call_encounter_type_t]	Type of encounter	<p>radio</p> <table border="1"> <tr><td>1</td><td>Phone call</td></tr> <tr><td>2</td><td>In-person encounter</td></tr> <tr><td>3</td><td>Text message</td></tr> </table>	1	Phone call	2	In-person encounter	3	Text message								
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2	In-person encounter																	
3	Text message																	
	708	[call_address_update_t]	<p>Address update provided</p> <p><i>If yes, update in the tracking log</i></p>	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No										
1	Yes																	
0	No																	
	709	[call_phone_update_t]	<p>Phone # update provided</p> <p><i>If yes, update in the tracking log</i></p>	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No										
1	Yes																	
0	No																	
	710	[call_chw_t]	Call made by	<p>dropdown</p> <table border="1"> <tr><td>1</td><td>Hasan</td></tr> <tr><td>2</td><td>Sakila</td></tr> <tr><td>3</td><td>Zohra</td></tr> <tr><td>4</td><td>Nazneen</td></tr> <tr><td>19</td><td>LHW</td></tr> <tr><td>20</td><td>Phone call from pt to CHW</td></tr> <tr><td>21</td><td>Phone call from pt relative to CHW</td></tr> </table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen	19	LHW	20	Phone call from pt to CHW	21	Phone call from pt relative to CHW
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2	Sakila																	
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20	Phone call from pt to CHW																	
21	Phone call from pt relative to CHW																	

	711	[<i>call_purpose_t</i>]	Purpose of call	dropdown <table><tr><td>1</td><td>Schedule session</td></tr><tr><td>2</td><td>Schedule survey</td></tr><tr><td>3</td><td>Reschedule session</td></tr><tr><td>4</td><td>Reschedule survey</td></tr><tr><td>5</td><td>Reminder for session</td></tr><tr><td>6</td><td>Reminder for survey</td></tr><tr><td>7</td><td>Participant no-show - check if participant is on the way</td></tr><tr><td>8</td><td>Complete survey via phone</td></tr><tr><td>9</td><td>CHW needs to cancel/reschedule session</td></tr><tr><td>10</td><td>Complete action plan</td></tr><tr><td>11</td><td>Complete progress note</td></tr><tr><td>12</td><td>Invite to graduation</td></tr><tr><td>13</td><td>Follow-up on significant health event</td></tr><tr><td>14</td><td>Follow-up with requested health/referral information</td></tr><tr><td>15</td><td>Returning a missed call from participant</td></tr><tr><td>16</td><td>Complete 1-on-1</td></tr><tr><td>20</td><td>Other (describe)</td></tr></table>	1	Schedule session	2	Schedule survey	3	Reschedule session	4	Reschedule survey	5	Reminder for session	6	Reminder for survey	7	Participant no-show - check if participant is on the way	8	Complete survey via phone	9	CHW needs to cancel/reschedule session	10	Complete action plan	11	Complete progress note	12	Invite to graduation	13	Follow-up on significant health event	14	Follow-up with requested health/referral information	15	Returning a missed call from participant	16	Complete 1-on-1	20	Other (describe)
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	712	[<i>call_purpose_session_t</i>] Show the field ONLY if: [call_purpose_t] = '1' or [call_purpose_t] = '3' or [call_purpose_t] = '5'	Which session(s)?	checkbox <table><tr><td>2</td><td>call_purpose_session_t__2</td><td>Session 2</td></tr><tr><td>3</td><td>call_purpose_session_t__3</td><td>Session 3</td></tr><tr><td>4</td><td>call_purpose_session_t__4</td><td>Session 4</td></tr><tr><td>5</td><td>call_purpose_session_t__5</td><td>Session 5</td></tr></table>	2	call_purpose_session_t__2	Session 2	3	call_purpose_session_t__3	Session 3	4	call_purpose_session_t__4	Session 4	5	call_purpose_session_t__5	Session 5																						
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5	call_purpose_session_t__5	Session 5																																				
	713	[<i>call_purpose_survey_t</i>] Show the field ONLY if: [call_purpose_t] = '2' or [call_purpose_t] = '4' or [call_purpose_t] = '6' or [call_purpose_t] = '8'	Which survey?	radio <table><tr><td>1</td><td>Intake/Baseline</td></tr><tr><td>2</td><td>Midpoint</td></tr><tr><td>3</td><td>Endpoint</td></tr></table>	1	Intake/Baseline	2	Midpoint	3	Endpoint																												
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	714	[<i>call_purpose_cancel_t</i>] Show the field ONLY if: [call_purpose_t] = '9'	Reason CHW needs to cancel/reschedule session	dropdown <table><tr><td>1</td><td>Poor weather conditions</td></tr><tr><td>2</td><td>CHW is ill</td></tr><tr><td>3</td><td>CHW has a personal conflict</td></tr><tr><td>4</td><td>PCP office cannot provide space at the scheduled time</td></tr><tr><td>10</td><td>Other</td></tr></table>	1	Poor weather conditions	2	CHW is ill	3	CHW has a personal conflict	4	PCP office cannot provide space at the scheduled time	10	Other																								
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	715	[<i>call_purpose_cancel_o th_t</i>] Show the field ONLY if:	Other reason to cancel/reschedule session	text																																		

		[call_purpose_cancel_t] = '10'																																														
	716	[call_purpose_describe_t] Show the field ONLY if: [call_purpose_t] = '13' or [call_purpose_t]=14 or [c all_purpose_t] = '20'	Describe:	notes																																												
	717	[call_outcome_t]	Outcome	<div>dropdown</div> <table><tr><td>1</td><td>Scheduled for session</td></tr><tr><td>2</td><td>Scheduled for survey</td></tr><tr><td>3</td><td>Rescheduled for session</td></tr><tr><td>4</td><td>Rescheduled for survey</td></tr><tr><td>5</td><td>Participant confirmed will attend scheduled session</td></tr><tr><td>6</td><td>Participant confirmed will attend survey appointment</td></tr><tr><td>7</td><td>Completed survey via phone</td></tr><tr><td>8</td><td>Completed Action Plan</td></tr><tr><td>9</td><td>Completed Progress Note</td></tr><tr><td>10</td><td>Completed Encounter Report</td></tr><tr><td>11</td><td>Participant confirmed will attend graduation</td></tr><tr><td>12</td><td>Participant answered but did not have time to speak</td></tr><tr><td>13</td><td>Followed up on significant health event</td></tr><tr><td>14</td><td>Provided unscheduled health coaching</td></tr><tr><td>15</td><td>Provided requested health/referral information</td></tr><tr><td>16</td><td>Drop Out request</td></tr><tr><td>17</td><td>Left message on voicemail/answered machine</td></tr><tr><td>18</td><td>Left message with person who answered phone</td></tr><tr><td>19</td><td>No answer/Unable to leave a message</td></tr><tr><td>20</td><td>Session canceled</td></tr><tr><td>21</td><td>Completed 1-on-1</td></tr><tr><td>30</td><td>Other</td></tr></table>	1	Scheduled for session	2	Scheduled for survey	3	Rescheduled for session	4	Rescheduled for survey	5	Participant confirmed will attend scheduled session	6	Participant confirmed will attend survey appointment	7	Completed survey via phone	8	Completed Action Plan	9	Completed Progress Note	10	Completed Encounter Report	11	Participant confirmed will attend graduation	12	Participant answered but did not have time to speak	13	Followed up on significant health event	14	Provided unscheduled health coaching	15	Provided requested health/referral information	16	Drop Out request	17	Left message on voicemail/answered machine	18	Left message with person who answered phone	19	No answer/Unable to leave a message	20	Session canceled	21	Completed 1-on-1	30	Other
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719	<div>[call_outcome_session_day_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '1' or [call_outcome_t] = '3'</div>	Day of scheduled session	<div>dropdown</div> <table><tr><td>1</td><td>Monday</td></tr><tr><td>2</td><td>Tuesday</td></tr><tr><td>3</td><td>Wednesday</td></tr><tr><td>4</td><td>Thursday</td></tr><tr><td>5</td><td>Friday</td></tr><tr><td>6</td><td>Saturday</td></tr><tr><td>7</td><td>Sunday</td></tr></table>	1	Monday	2	Tuesday	3	Wednesday	4	Thursday	5	Friday	6	Saturday	7	Sunday
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4	Thursday																
5	Friday																
6	Saturday																
7	Sunday																
720	<div>[call_outcome_session_date_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '1' or [call_outcome_t] = '3'</div>	Date of scheduled session	text (date_mdy)														
721	<div>[call_outcome_session_time_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '1' or [call_outcome_t] = '3'</div>	Time of scheduled session	text														
722	<div>[call_outcome_survey_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '2' or [call_outcome_t] = '4' or [call_outcome_t] = '6' or [call_outcome_t] = '7'</div>	Which survey?	<div>radio</div> <table><tr><td>1</td><td>Intake/Baseline</td></tr><tr><td>2</td><td>Endpoint</td></tr></table>	1	Intake/Baseline	2	Endpoint										
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723	<div>[call_outcome_describe_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '13' or [call_outcome_t] = '14' or [call_outcome_t] = '15' or [call_outcome_t] = '18' or [call_outcome_t] = '30'</div>	Describe:	notes														
724	<div>[call_drop_out_reason_t]</div> <div>Show the field ONLY if: [call_outcome_t] = '16'</div>	<div>Reason for drop out</div> <div>Record on tracking page</div>	<div>dropdown</div> <table><tr><td>1</td><td>Participant is out of state through end of intervention period</td></tr><tr><td>2</td><td>Participant is out of country through end of intervention period</td></tr><tr><td>3</td><td>Participant requests to not be contacted</td></tr><tr><td>4</td><td>Participant requests to end study participation</td></tr><tr><td>5</td><td>Participant changed PCP and is unable to attend sessions</td></tr><tr><td>6</td><td>Participant did not answer or return CHW calls through end of intervention period</td></tr><tr><td>7</td><td>Participant has a health issue and can no longer participate</td></tr></table>	1	Participant is out of state through end of intervention period	2	Participant is out of country through end of intervention period	3	Participant requests to not be contacted	4	Participant requests to end study participation	5	Participant changed PCP and is unable to attend sessions	6	Participant did not answer or return CHW calls through end of intervention period	7	Participant has a health issue and can no longer participate
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	725	[call_next_step_t]	Next Step	dropdown <table border="1"> <tr><td>1</td><td>Schedule session</td></tr> <tr><td>2</td><td>Schedule survey</td></tr> <tr><td>3</td><td>Reschedule session</td></tr> <tr><td>4</td><td>Reschedule survey</td></tr> <tr><td>5</td><td>Reminder call for session</td></tr> <tr><td>6</td><td>Reminder call for survey</td></tr> <tr><td>7</td><td>Invite to graduation</td></tr> <tr><td>8</td><td>Reminder call for graduation</td></tr> <tr><td>9</td><td>Complete Action Plan</td></tr> <tr><td>10</td><td>Complete Progress Note</td></tr> <tr><td>11</td><td>Follow-up on significant health event</td></tr> <tr><td>12</td><td>Follow-up with requested health/referral information</td></tr> <tr><td>13</td><td>Call back</td></tr> <tr><td>14</td><td>Do not call</td></tr> <tr><td>15</td><td>Complete session</td></tr> <tr><td>16</td><td>Complete 1-on-1</td></tr> <tr><td>20</td><td>Other</td></tr> </table>		1	Schedule session	2	Schedule survey	3	Reschedule session	4	Reschedule survey	5	Reminder call for session	6	Reminder call for survey	7	Invite to graduation	8	Reminder call for graduation	9	Complete Action Plan	10	Complete Progress Note	11	Follow-up on significant health event	12	Follow-up with requested health/referral information	13	Call back	14	Do not call	15	Complete session	16	Complete 1-on-1	20	Other
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	726	[call_next_step_session_t] Show the field ONLY if: [call_next_step_t] = '1' or [call_next_step_t] = '3' or [call_next_step_t] = '5' or [call_next_step_t]='15'	Which session(s)?	checkbox <table border="1"> <tr><td>2</td><td>call_next_step_session_t__2</td><td>Session 2</td></tr> <tr><td>3</td><td>call_next_step_session_t__3</td><td>Session 3</td></tr> <tr><td>4</td><td>call_next_step_session_t__4</td><td>Session 4</td></tr> <tr><td>5</td><td>call_next_step_session_t__5</td><td>Session 5</td></tr> </table>		2	call_next_step_session_t__2	Session 2	3	call_next_step_session_t__3	Session 3	4	call_next_step_session_t__4	Session 4	5	call_next_step_session_t__5	Session 5																						
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	727	[call_next_step_survey_t] Show the field ONLY if: [call_next_step_t] = '2' or [call_next_step_t] = '4' or [call_next_step_t] = '6'	Which survey?	radio <table border="1"> <tr><td>1</td><td>Intake/Baseline</td></tr> <tr><td>2</td><td>Endpoint</td></tr> </table>		1	Intake/Baseline	2	Endpoint																														
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	728	[call_next_step_describe_t]	Describe:	notes																																			
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	730	[call_phone_home]	Phone (home)	text (phone), Identifier Field Annotation: @DEFAULT='[phone_home]'																																			
	731	[call_phone_cell]	Phone (cell)	text (phone), Identifier Field Annotation: @DEFAULT='[phone_cell]'																																			

732	[call_pcp]	PCP:	dropdown <table><tr><td>1</td><td>Emory</td></tr><tr><td>2</td><td>Shifa Clinic</td></tr><tr><td>3</td><td>Grady</td></tr></table> Field Annotation: @DEFAULT='[pcp]'	1	Emory	2	Shifa Clinic	3	Grady						
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733	[call_dob]	Date of birth:	text (date_mdy) Field Annotation: @DEFAULT='[dob]'												
734	[call_address_street]	Street address:	text Field Annotation: @DEFAULT='[address_street]'												
735	[call_date]	Date of call/encounter	text (date_mdy) Field Annotation: @TODAY												
736	[call_time]	Time of call/encounter	text												
737	[call_address_update] Show the field ONLY if: [call_sig_contact] = '1'	Address update provided <i>If yes, please update in the tracking form</i>	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes														
0	No														
738	[call_address_new] Show the field ONLY if: [call_address_update] = '1'	New address:	text												
739	[call_phone_update] Show the field ONLY if: [call_sig_contact] = '1'	Phone number update provided <i>If yes, please update in the tracking form</i>	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes														
0	No														
740	[call_phone_new] Show the field ONLY if: [call_phone_update]='1'	New phone number:	text												
741	[call_chw]	Call/encounter by:	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr><tr><td>20</td><td>Phone call from pt to CHW</td></tr><tr><td>21</td><td>Phone call from pt relative to CHW</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen	20	Phone call from pt to CHW	21	Phone call from pt relative to CHW
1	Hasan														
2	Sakila														
3	Zohra														
4	Nazneen														
20	Phone call from pt to CHW														
21	Phone call from pt relative to CHW														
742	[call_chw_pt_called] Show the field ONLY if: [call_chw] = '20' or [call_chw] = '21'	CHW reached	dropdown <table><tr><td>1</td><td>Hasan</td></tr><tr><td>2</td><td>Sakila</td></tr><tr><td>3</td><td>Zohra</td></tr><tr><td>4</td><td>Nazneen</td></tr></table>	1	Hasan	2	Sakila	3	Zohra	4	Nazneen				
1	Hasan														
2	Sakila														
3	Zohra														
4	Nazneen														
743	[call_encounter_type]	Type of encounter	radio <table><tr><td>1</td><td>Phone call</td></tr><tr><td>2</td><td>In-person encounter</td></tr><tr><td>3</td><td>Text message</td></tr><tr><td>4</td><td>Email</td></tr></table>	1	Phone call	2	In-person encounter	3	Text message	4	Email				
1	Phone call														
2	In-person encounter														
3	Text message														
4	Email														

744	[call_purpose]	Purpose of call/encounter	dropdown <table><tr><td>1</td><td>Complete screening via phone</td></tr><tr><td>2</td><td>Schedule session</td></tr><tr><td>3</td><td>Reschedule session</td></tr><tr><td>4</td><td>Reminder for session</td></tr><tr><td>5</td><td>Participant no-show - check if participant is on the way</td></tr><tr><td>6</td><td>No show to session - need to reschedule</td></tr><tr><td>7</td><td>CHW needs to cancel/reschedule session</td></tr><tr><td>8</td><td>Follow-up on significant health event</td></tr><tr><td>9</td><td>Follow-up with requested health/referral information</td></tr><tr><td>10</td><td>Returning a missed call from participant</td></tr><tr><td>11</td><td>Obtain consent form signature</td></tr><tr><td>12</td><td>Schedule intake survey</td></tr><tr><td>13</td><td>Complete intake survey</td></tr><tr><td>20</td><td>Other (describe)</td></tr></table>	1	Complete screening via phone	2	Schedule session	3	Reschedule session	4	Reminder for session	5	Participant no-show - check if participant is on the way	6	No show to session - need to reschedule	7	CHW needs to cancel/reschedule session	8	Follow-up on significant health event	9	Follow-up with requested health/referral information	10	Returning a missed call from participant	11	Obtain consent form signature	12	Schedule intake survey	13	Complete intake survey	20	Other (describe)
1	Complete screening via phone																														
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10	Returning a missed call from participant																														
11	Obtain consent form signature																														
12	Schedule intake survey																														
13	Complete intake survey																														
20	Other (describe)																														
745	[call_purpose_text] Show the field ONLY if: [call_purpose] = '20'	Purpose - describe	notes																												
746	[call_sig_contact] Show the field ONLY if: [call_encounter_type] = '1'	Was significant contact made with the Pt?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																								
1	Yes																														
0	No																														
747	[call_cancel_reason] Show the field ONLY if: [call_purpose] = '7'	Reason for cancelling/rescheduling session	dropdown <table><tr><td>1</td><td>Poor weather conditions</td></tr><tr><td>2</td><td>CHW is ill</td></tr><tr><td>3</td><td>CHW has a personal conflict</td></tr><tr><td>4</td><td>PCP office cannot provide space at the scheduled time</td></tr><tr><td>10</td><td>Other reason</td></tr></table>	1	Poor weather conditions	2	CHW is ill	3	CHW has a personal conflict	4	PCP office cannot provide space at the scheduled time	10	Other reason																		
1	Poor weather conditions																														
2	CHW is ill																														
3	CHW has a personal conflict																														
4	PCP office cannot provide space at the scheduled time																														
10	Other reason																														
748	[call_cancel_reason_text] Show the field ONLY if: [call_cancel_reason] = '10'	Other reason for cancelling/rescheduling	text																												
749	[call_sig_event] Show the field ONLY if: [call_purpose] = '8'	Describe significant health event:	text																												
750	[call_referral_info] Show the field ONLY if: [call_purpose] = '9'	Describe requested health/referral information:	text																												

	751	<div>[call_mailing]</div> <div>Show the field ONLY if: [call_encounter_type]='1'</div>	<div>Received mailing</div> <div>(Only recorded during initial call) If no, confirm address, resend mailing, and update on tracking form</div>	<div>dropdown</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>77</td><td>Don't know</td></tr><tr><td>96</td><td>N/A</td></tr></table>	1	Yes	0	No	77	Don't know	96	N/A																								
1	Yes																																			
0	No																																			
77	Don't know																																			
96	N/A																																			
	752	<div>[call_outcome_y]</div> <div>Show the field ONLY if: [call_sig_contact] = '1' OR [call_encounter_type]='2'</div>	<div>Outcome</div>	<div>dropdown</div> <table><tr><td>1</td><td>Completed screening</td></tr><tr><td>2</td><td>Scheduled for session 1</td></tr><tr><td>3</td><td>Declined to participate</td></tr><tr><td>4</td><td>Not eligible</td></tr><tr><td>5</td><td>Confirmed for session</td></tr><tr><td>6</td><td>Pt unable to join scheduled session</td></tr><tr><td>7</td><td>Pt needs to discuss program with family before joining</td></tr><tr><td>8</td><td>Pt needs time to decide whether to join</td></tr><tr><td>9</td><td>Enrolled/Completed session 1</td></tr><tr><td>10</td><td>Pt wants to discuss program with doctor</td></tr><tr><td>11</td><td>Sent email to pt</td></tr><tr><td>12</td><td>Scheduled for intake survey</td></tr><tr><td>13</td><td>Completed intake survey</td></tr><tr><td>14</td><td>Enrolled</td></tr><tr><td>15</td><td>Completed session 1</td></tr><tr><td>20</td><td>Other</td></tr></table>	1	Completed screening	2	Scheduled for session 1	3	Declined to participate	4	Not eligible	5	Confirmed for session	6	Pt unable to join scheduled session	7	Pt needs to discuss program with family before joining	8	Pt needs time to decide whether to join	9	Enrolled/Completed session 1	10	Pt wants to discuss program with doctor	11	Sent email to pt	12	Scheduled for intake survey	13	Completed intake survey	14	Enrolled	15	Completed session 1	20	Other
1	Completed screening																																			
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14	Enrolled																																			
15	Completed session 1																																			
20	Other																																			
	753	<div>[call_session_day]</div> <div>Show the field ONLY if: [call_outcome_y] = '2' or [call_outcome_y] = '5' or [call_outcome_y] = '9'</div>	<div>Day of scheduled session</div>	<div>dropdown</div> <table><tr><td>1</td><td>Monday</td></tr><tr><td>2</td><td>Tuesday</td></tr><tr><td>3</td><td>Wednesday</td></tr><tr><td>4</td><td>Thursday</td></tr><tr><td>5</td><td>Friday</td></tr><tr><td>6</td><td>Saturday</td></tr><tr><td>7</td><td>Sunday</td></tr></table>	1	Monday	2	Tuesday	3	Wednesday	4	Thursday	5	Friday	6	Saturday	7	Sunday																		
1	Monday																																			
2	Tuesday																																			
3	Wednesday																																			
4	Thursday																																			
5	Friday																																			
6	Saturday																																			
7	Sunday																																			
	754	<div>[call_session_date]</div> <div>Show the field ONLY if: [call_outcome_y] = '2' or [call_outcome_y] = '5' or [call_outcome_y] = '9'</div>	<div>Date of scheduled session</div>	<div>text (date_mdy)</div>																																
	755	<div>[call_session_time]</div> <div>Show the field ONLY if: [call_outcome_y] = '2' or [call_outcome_y] = '5'</div>	<div>Time of scheduled session</div>	<div>text</div>																																
	756	<div>[call_decline]</div>	<div>If declined to participate:</div>	<div>dropdown</div>																																

		Show the field ONLY if: [call_outcome_y] = '3' or [call_outcome_n] = '9'		<table><tr><td>1</td><td>Extended travel out of country/state during intervention period</td></tr><tr><td>2</td><td>No time</td></tr><tr><td>3</td><td>Spouse/Adult child declined</td></tr><tr><td>4</td><td>Too sick</td></tr><tr><td>5</td><td>No one to bring</td></tr><tr><td>6</td><td>Personal problems</td></tr><tr><td>7</td><td>Too far</td></tr><tr><td>8</td><td>Not interested</td></tr><tr><td>9</td><td>Unable to participate in scheduled session/conflict with session schedules</td></tr><tr><td>10</td><td>Unknown</td></tr><tr><td>20</td><td>Other</td></tr></table>	1	Extended travel out of country/state during intervention period	2	No time	3	Spouse/Adult child declined	4	Too sick	5	No one to bring	6	Personal problems	7	Too far	8	Not interested	9	Unable to participate in scheduled session/conflict with session schedules	10	Unknown	20	Other		
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9	Unable to participate in scheduled session/conflict with session schedules																											
10	Unknown																											
20	Other																											
	757	[call_decline_oth] Show the field ONLY if: [call_decline] = '20'	If declined to participate: other reason	text																								
	758	[call_ineligible] Show the field ONLY if: [call_outcome_y] = '4' or [call_outcome_n] = '8'	Ineligibility reason	<table><tr><td colspan="2">dropdown</td></tr><tr><td>1</td><td>Not South Asian</td></tr><tr><td>2</td><td>Does not have diabetes (confirm with PCP)</td></tr><tr><td>3</td><td>Does not speak English or Bengali/Bangla</td></tr><tr><td>4</td><td>Pregnant</td></tr><tr><td>5</td><td>Not a resident of Atlanta</td></tr><tr><td>6</td><td>Out of country at the time of recruitment</td></tr><tr><td>7</td><td>Person passed away/deceased</td></tr><tr><td>8</td><td>Changed PCP/No longer patient at participating PCP</td></tr><tr><td>9</td><td>Unable to perform unsupervised physical activity</td></tr><tr><td>10</td><td>Does not have high BP reading</td></tr><tr><td>20</td><td>Other</td></tr></table>	dropdown		1	Not South Asian	2	Does not have diabetes (confirm with PCP)	3	Does not speak English or Bengali/Bangla	4	Pregnant	5	Not a resident of Atlanta	6	Out of country at the time of recruitment	7	Person passed away/deceased	8	Changed PCP/No longer patient at participating PCP	9	Unable to perform unsupervised physical activity	10	Does not have high BP reading	20	Other
dropdown																												
1	Not South Asian																											
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9	Unable to perform unsupervised physical activity																											
10	Does not have high BP reading																											
20	Other																											
	759	[call_ineligible_oth] Show the field ONLY if: [call_ineligible] = '20'	Ineligibility: Other reason	text																								
	760	[call_outcome_y_other] Show the field ONLY if: [call_outcome_y] = '20'	Outcome: Other	text																								
	761	[call_outcome_n] Show the field ONLY if: [call_sig_contact] = '0'	Outcome (if significant contact not made)	<table><tr><td colspan="2">dropdown</td></tr><tr><td>1</td><td>Left message on voicemail/answering machine</td></tr><tr><td>2</td><td>Left message with person who answered phone</td></tr></table>	dropdown		1	Left message on voicemail/answering machine	2	Left message with person who answered phone																		
dropdown																												
1	Left message on voicemail/answering machine																											
2	Left message with person who answered phone																											

				<table><tr><td>3</td><td>No Answer/Unable to leave a message</td></tr><tr><td>4</td><td>Busy signal</td></tr><tr><td>5</td><td>Wrong Number/person who answered phone is not the contact or contact's relative</td></tr><tr><td>6</td><td>Disconnected phone/ # not in service</td></tr><tr><td>7</td><td>Pt answered but did not have time to speak</td></tr><tr><td>8</td><td>Pt is reported to be ineligible by person who answered the phone</td></tr><tr><td>9</td><td>Pt is reported to decline intervention by person who answered phone</td></tr><tr><td>10</td><td>No show/Unable to reach pt</td></tr><tr><td>20</td><td>Other</td></tr></table>	3	No Answer/Unable to leave a message	4	Busy signal	5	Wrong Number/person who answered phone is not the contact or contact's relative	6	Disconnected phone/ # not in service	7	Pt answered but did not have time to speak	8	Pt is reported to be ineligible by person who answered the phone	9	Pt is reported to decline intervention by person who answered phone	10	No show/Unable to reach pt	20	Other		
3	No Answer/Unable to leave a message																							
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9	Pt is reported to decline intervention by person who answered phone																							
10	No show/Unable to reach pt																							
20	Other																							
	762	<div>[call_outcome_n_other]</div> <div>Show the field ONLY if: [call_outcome_n] = '20'</div>	Outcome: Other	text																				
	763	<div>[call_next_step_y_contact]</div> <div>Show the field ONLY if: [call_sig_contact] = '1' or [call_encounter_type]='2'</div>	Next step	<div>dropdown</div> <table><tr><td>1</td><td>Call back</td></tr><tr><td>2</td><td>Do not call</td></tr><tr><td>3</td><td>Complete screening</td></tr><tr><td>4</td><td>Schedule session 1</td></tr><tr><td>5</td><td>Reminder call for session</td></tr><tr><td>6</td><td>Call back to reschedule session 1</td></tr><tr><td>7</td><td>Complete session</td></tr><tr><td>8</td><td>Complete intake survey</td></tr><tr><td>9</td><td>Obtain consent form signature</td></tr><tr><td>20</td><td>Other</td></tr></table>	1	Call back	2	Do not call	3	Complete screening	4	Schedule session 1	5	Reminder call for session	6	Call back to reschedule session 1	7	Complete session	8	Complete intake survey	9	Obtain consent form signature	20	Other
1	Call back																							
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3	Complete screening																							
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5	Reminder call for session																							
6	Call back to reschedule session 1																							
7	Complete session																							
8	Complete intake survey																							
9	Obtain consent form signature																							
20	Other																							
	764	<div>[call_next_step_y_text]</div> <div>Show the field ONLY if: [call_next_step_y_contact] = '20'</div>	Next step (other)	notes																				
	765	<div>[call_next_step_n_contact]</div> <div>Show the field ONLY if: [call_sig_contact] = '0'</div>	Next step (if no significant contact made)	<div>dropdown</div> <table><tr><td>1</td><td>Call back</td></tr><tr><td>2</td><td>Do not call</td></tr><tr><td>3</td><td>Reschedule session</td></tr><tr><td>4</td><td>Confirm pt phone # with PCP staff</td></tr><tr><td>5</td><td>Do not call - call limit reached</td></tr><tr><td>10</td><td>Other</td></tr></table>	1	Call back	2	Do not call	3	Reschedule session	4	Confirm pt phone # with PCP staff	5	Do not call - call limit reached	10	Other								
1	Call back																							
2	Do not call																							
3	Reschedule session																							
4	Confirm pt phone # with PCP staff																							
5	Do not call - call limit reached																							
10	Other																							
	766	<div>[call_next_step_n_text]</div> <div>Show the field ONLY if:</div>	Next step (other)	text																				

		[call_next_step_n_contact] = '10'								
	767	[call_outcome_n_message] Show the field ONLY if: [call_outcome_n] = '2'	Details of message left	notes						
	768	[call_comments]	Additional comments about contact/call or details of message left	notes						
	769	[call_minutes]	Total minutes of call	text (number)						
	770	[contact_attempts_recruitment_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Christina Administrative (christina_administrative)										
	771	[giftcard]	Gift card Mailed Date sent Gift card # Session 1 {gc_1} {gc_date_1} {gc_number_1} Session 2 {gc_2} {gc_date_2} {gc_number_2} Session 3 {gc_3} {gc_date_3} {gc_number_3} Session 4 {gc_4} {gc_date_4} {gc_number_4} Session 5 {gc_5} {gc_date_5} {gc_number_5} Endpoint survey {gc_fu} {gc_date_fu} {gc_number_fu} Focus group session {gc_fg} {gc_date_fg} {gc_number_fg}	descriptive						
	772	[gc_1]	Gift card session 1 - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No		
1	Yes									
0	No									
	773	[gc_date_1] Show the field ONLY if: [gc_1] = '1'	Gift card session 1 - date sent	text (date_mdy)						
	774	[gc_number_1] Show the field ONLY if: [gc_1]='1'	Gift card session 1 - number	text						
	775	[gc_2]	Gift card session 2 - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No		
1	Yes									
0	No									
	776	[gc_date_2] Show the field ONLY if: [gc_2] = '1'	Gift card session 2 - date sent	text (date_mdy)						
	777	[gc_number_2] Show the field ONLY if: [gc_2]='1'	Gift card session 2 - number	text						
	778	[gc_3]	Gift card session 3 - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No		
1	Yes									
0	No									

				Field Annotation: @DEFAULT='0'				
	779	[gc_date_3] Show the field ONLY if: [gc_3] = '1'	Gift card session 3 - date sent	text (date_mdy)				
	780	[gc_number_3] Show the field ONLY if: [gc_3]='1'	Gift card session 3 - number	text				
	781	[gc_4]	Gift card session 4 - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No
1	Yes							
0	No							
	782	[gc_date_4] Show the field ONLY if: [gc_4] = '1'	Gift card session 4 - date sent	text (date_mdy)				
	783	[gc_number_4] Show the field ONLY if: [gc_4]='1'	Gift card session 4 - number	text				
	784	[gc_5]	Gift card session 5 - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No
1	Yes							
0	No							
	785	[gc_date_5] Show the field ONLY if: [gc_5] = '1'	Gift card session 5 - date sent	text (date_mdy)				
	786	[gc_number_5] Show the field ONLY if: [gc_5]='1'	Gift card session 5 - number	text				
	787	[gc_fu]	Gift card endpoint survey - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No
1	Yes							
0	No							
	788	[gc_date_fu] Show the field ONLY if: [gc_fu] = '1'	Gift card endpoint survey - date sent	text (date_mdy)				
	789	[gc_number_fu] Show the field ONLY if: [gc_fu]='1'	Gift card follow-up - number	text				
	790	[gc_fg]	Gift card focus group - mailed	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: @DEFAULT='0'	1	Yes	0	No
1	Yes							
0	No							

	791	[gc_date_fg] Show the field ONLY if: [gc_fg] = '1'	Gift card focus group - date sent	text (date_mdy)								
	792	[gc_number_fg] Show the field ONLY if: [gc_fg]='1'	Gift card focus group - number	text								
	793	[bp_cuff_mailed]	Section Header: <i>BP Cuff</i> BP cuff received	radio <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No				
1	Yes											
0	No											
	794	[bp_cuff_date] Show the field ONLY if: [bp_cuff_mailed]='1'	BP cuff - date received	text								
	795	[bp_cuff_method] Show the field ONLY if: [bp_cuff_mailed]='1'	BP cuff - Method of delivery	dropdown <table><tr><td>1</td><td>Picked up</td></tr><tr><td>2</td><td>Dropped off</td></tr></table>	1	Picked up	2	Dropped off				
1	Picked up											
2	Dropped off											
	796	[bp_cuff_chw] Show the field ONLY if: [bp_cuff_mailed]='1'	BP cuff - CHW	dropdown <table><tr><td>1</td><td>SN</td></tr><tr><td>2</td><td>HY</td></tr><tr><td>3</td><td>ZA</td></tr><tr><td>4</td><td>NA</td></tr></table>	1	SN	2	HY	3	ZA	4	NA
1	SN											
2	HY											
3	ZA											
4	NA											
	797	[christina_administrative_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete		
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