

## AU78 Supplementary interview due to glucose load test

Interviewees

Prerequisites: 1. Referred to a doctor or hospital from the previous Mobile Clinic health examination because of high glucose load test value. (on computer list C) Sample 1:2

Note: Question 4 refers to a doctor working in a specialist-led hospital. Accordingly, a municipal physician who has a part-time practice for instance at district hospital is not considered as a hospital doctor and the communal hospital as such a hospital.

### Detection

**1. Was one referred to a doctor or hospital from the previous Mobile Clinic health examination because of high glucose load test value?** (To be filled in based on the identity card)

0 No

1 Yes,

(If No then the interview will not be performed)

**2. Did you go to a doctor or hospital due to the Mobile Clinic referral (sent by mail) because of high blood sugar?**

0 No

1 Yes (If yes, proceed to question 4)

**3. Why did you not go?**

1 I was already being treated for diabetes,

2 Other reason What? (proceed to question 11)

**4. Was the doctor whom you visited first** (Read the following options)

1 Doctor working in a hospital or hospital polyclinic

2 Doctor working in outpatient care (communal, private, occupational health care)

**5. Asked only, if in the question 4 option 2 was selected**

**Did the doctor refer you**

- To the laboratory where a blood or urine sample was taken?

0 No

1 Yes

For examinations in a hospital or hospital polyclinic

0 No

1 Yes

**6. What did the doctor say to you after the examinations?**

0 No diabetes or other abnormality,

1 Diabetes mellitus,

2 Latent diabetes,

3 No diabetes but temporarily raised blood sugar,

4 Other disease What?

8 Did not say anything

**7. Did the doctor at that time prescribe you any of the following because of diabetes:** (Cross, if yes.  
If one was already taking the medication that was further prescribed, also cross)

- a Insulin treatment,
- b Tablet treatment,
- c Diet therapy,
- d Instructed to lose weight,
- e None of these

**8. Has a doctor later prescribed you any of the following because of diabetes:**

- a Insulin treatment,
  - b Tablet treatment,
  - c Diet therapy,
  - d Instructed to lose weight,
  - e None of these
- (if no, proceed to question 10)

**9. When (which year) did a doctor prescribe medications (a or b) for the first time?**

**10. Did the doctor at that time advise you to routine control visits or to laboratory tests because of diabetes?**

0 No

1 Yes

#### **Examination and treatment by a doctor and public health nurse**

**11. How many times have you visited a doctor because of diabetes during the past 12 months?**

(Polyclinic + outpatient care + home visits + hospital care)

**12. How many times have you visited a public health nurse because of diabetes sugar during the past 12 months?**

**13. When do you have an appointment to visit a doctor next time because of diabetes?**

0 No appointment,

1 Only as needed,

2 Time of visit appointed ,After how many months?

**14. How many times did you have your urine or blood sample analysed in a laboratory (or doctor's surgery) for glucose during the past 12 months?**

#### **Medication**

**15. Which medicines prescribed by a doctor do you currently take because of diabetes?**

Names:

0 No medication

1 Insulin treatment

2 Pill treatment

3 Insulin and pill treatment

4 Other medication

**16. Who is the doctor currently treating you because of diabetes?**

Name

Address

1 I cannot say

**Diet therapy**

**17. Do you have a special diet because of diabetes?**

0 No

1 Yes