

**Pre-diabetes/ Type 2 diabetes screening tool for PRE-PAID**  
**PRE-PAID 糖尿病前期/2型糖尿病筛选问卷调查表**

This questionnaire is intended for adults aged 40- 64 years who are members of certain ethnic minorities (**Chinese, South Asian, African or African-Caribbean**) to help find out if you are at risk of developing type 2 diabetes. Please answer as carefully as you can. We will help you complete this form.

该问卷旨在调查一些族裔（中国裔，南亚裔，非裔，加勒比非裔）年龄在40到64之间的人患2型糖尿病的风险。 请仔细回答下面的问题， 我们会帮助您完成该问卷调查表。

What ethnicity are (or were) your biological (blood) parents?

您的父母是（曾是）什么族裔的？

Mother 母亲      Father 父亲

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | White (Caucasian)<br>白人 (高加索人)  |
| <input type="checkbox"/> | <input type="checkbox"/> | African, African/Caribbean<br>非裔, 加勒比-非裔  |
| <input type="checkbox"/> | <input type="checkbox"/> | South Asian (India, Pakistan, Sri Lanka, Nepal, Bangladesh)<br>南亚裔(印度, 巴基斯坦, 斯里兰卡, 尼泊尔, 孟加拉国) |
| <input type="checkbox"/> | <input type="checkbox"/> | Chinese<br>中国裔  |
| <input type="checkbox"/> | <input type="checkbox"/> | Other<br>其他 (请注明_____)  |

AS YOU GET OLDER, YOUR RISK FOR DIABETES INCREASES

随着年龄的增长, 您患糖尿病的风险也会随之增长

1) What year were you born? 您是出生年份是? \_\_\_\_\_

Select your age group 请选择您的年龄组

- 40-44 years (0 points)  
 45-54 years (2 points)

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- 55- 64 years (3 points)

BODY SHAPE AND SIZE CAN AFFECT YOUR RISK OF DIABETES

身型和体重会影响您患糖尿病的风险

2a) How much do you weigh (either in pounds or in kilograms) 您的体重是多少 (磅或千克)?

我的体重是 \_\_\_\_\_ pounds 磅 或 \_\_\_\_\_ kilograms 千克

2b) How tall are you without shoes on 你的身高是多少 (不含鞋子)?

我的身高是 \_\_\_\_\_ feet 英尺和 \_\_\_\_\_ inches 英寸 或 \_\_\_\_\_ centimeters 厘米

Use the attached height and weight table to find body mass index (BMI)

请用身高体重表找出您的身体质量指数(BMI)

- unshaded area 无阴影部分 BMI <25 (0 points)  
 light shaded area 浅阴影部分 BMI 25-30 (1 points)  
 darker shaded area 深阴影部分 BMI >30 (3 points)

3) Waist Circumference 腰围

I am going to use a tape measure and place it around your waist at the level of the navel (belly button). I will take a measure after you breathing out (do not hold your breath).

我现在会用卷尺测量腰围（肚脐处）， 我会在你呼气后测量（无须屏气）。

\_\_\_\_\_ inches英寸 或 \_\_\_\_\_ cm厘米



male 男性



female 女性

< 94cm or 37 inches (0 pts)

94-102cm or 37-40inches (3 pts)

> 102cm or 40 inches (4 pts)

< 80cm or 31.5 inches (0 pts)

80-88cm or 31.5-35inches (3 pts)

> 88cm or 35 inches (4 pts)

YOUR LEVEL OF PHYSICAL ACTIVITY AND WHAT YOU EAT CAN AFFECT YOUR RISK OF HAVING DIABETES OR “PRE-DIABETES”.

您的运动锻炼和饮食会影响患糖尿病的风险。

#### 4) Daily Activity 日常活动

Over a typical seven-day period (one week), how many times do you engage in physical activity that is prolonged and intense enough to cause sweating and an increase in you heart rate?

通常情况下，您一周（7天）运动几次？该运动的强度和足以使您流汗和心跳加速。

- At least three times per week一周至少三次 (0 points)
- Normally once or twice per week一般一周一到两次 (1 points)
- Rarely or never很少或从不 (3 points)

HIGH BLOOD PRESSURE AND HIGH BLOOD SUGAR ARE ASSOCIATED WITH DIABETES

高血压和高血糖与糖尿病有关

#### 5) High Blood Pressure 高血压

Have you ever been told by a doctor or nurse that you have high blood pressure *OR* are you taking any medication (pills) for high blood pressure?

您曾经被医生或护士告之您有高血压吗？或您正在吃治疗高血压的药吗？

- No or don't know没有或不清楚 (0 points)
- Yes是的 (2 points)

#### 6) High Blood Sugar高血糖

Have you ever been told by a doctor or nurse that you have high blood sugar (i.e. during a health exam) or that you have diabetes or “pre diabetes”?

您曾经被医生或护士告之您有高血糖吗（例如在体检时）？或您有糖尿病或糖尿病前期？

- No or don't know没有或不清楚 (0 points)
- Yes是的 (5 points)

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SOME TYPES OF DIABETES RUN IN FAMILIES

有些类型的糖尿病是遗传的

#### 7) Family家庭

Have any members of your family been diagnosed with diabetes? (You can circle the one below that have)

您有任何家庭成员被诊断为糖尿病吗？(请选择最适合的一项)

- No or don't know没有或不清楚 (0 points)
- Yes: grandparent, aunt, uncle, or first cousin (ignore this one if the one below applies) 是的: 祖父母, 姨妈, 叔父, 或第一代堂兄妹 (如下面一项更适合, 请忽略该项) (3 points)
- Yes: parent (mother or father), brother or sister or own child 是的: 父母 (母亲或父亲), 兄弟, 姐妹或您的小孩 (5 points)

Note: your score cannot be greater than 5 points

备注: 你的分数不能够超出5分

Likelihood of developing diabetes in the next 10 years:

10年内患糖尿病的可能性:

< 7 small risk 可能性小

7-11 moderate risk 有一定可能性

12-14 high risk 可能

15-20 very high risk 很可能

20-25 extreme risk (may already have diabetes)

非常有可能 (可能已经是糖尿病)

**\*SCORE:**

Thank you for filling this questionnaire about diabetes risk. What is the best way for us to contact you if you are eligible and interested in participating in our research study on physical activity and diabetes prevention?

感谢您填写糖尿病调查表。如果您符合要求并且有兴趣参加“运动及糖尿病防治”研究项目，请留下您的联系方式。

Name姓名 \_\_\_\_\_ Phone number电话 \_\_\_\_\_

Email \_\_\_\_\_

Mailing address邮政地址 \_\_\_\_\_  
\_\_\_\_\_

#### DO YOU CURRENTLY HAVE ACCESS TO OHIP MEDICAL COVERAGE

您现在享受安省健康保险计划（OHIP）吗？

Yes

No

The following questions are important for anyone who is starting to become more physically active than they are right now.

如果您要参加比现在更多的运动锻炼，请回答以下问题。

Please answer each question carefully请仔细回答：

1. Has your doctor ever said you that you have a heart condition and that you should only do physical activity recommended by a doctor?

您的医生曾经说过您有心脏问题，您只应该做医生推荐做的运动吗？

Yes  No

2. Do you feel pain in your chest when you do physical activity?

您在做运动时胸部会感觉到疼吗？

Yes  No

3. In the past month, have you had chest pain when you were not being physically active?

在过去几个月，您在没有运动时曾经感觉到胸部痛吗？

Yes  No

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4. Do you lose your balance because of dizziness or do you ever lose consciousness (faint/pass-out)?

您曾经因为头晕而失去平衡 或您曾经失去过意识（晕倒/昏厥）吗？

Yes  No

5. Do you have a bone or joint problem (for example, back, knee, or hip) that could be made worse by a change in your physical activity?

您有骨关节问题会因为加强锻炼而更为严重的吗（例如，背，膝关节，或臀部）？

Yes  No

6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?

目前您的医生有给你开任何治疗血压或心脏疾病的药吗（例如，water pills）？

Yes  No

7. Do you know of any other reason why you should not do physical activity?

您有任何其他原因可能妨碍你参加运动吗？

Yes  No

参与者签名: \_\_\_\_\_

This Questionnaire was prepared by the Physical Activity and Chronic Disease Unit: Diabetes Section at York University

