

Factors Affecting Awareness of Medical Practitioners Regarding Type 2 Diabetes Mellitus and its Management

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Study ID _____

EDUCATIONAL EXPERIENCES AND CHALLENGES QUESTIONNAIRE			
Demographic Information			
Age (years)		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Education Level:	<input type="checkbox"/> Graduation <input type="checkbox"/> Diploma <input type="checkbox"/> 2 Years Post-Graduation <input type="checkbox"/> 4 Years Post-Graduation	Practice Duration:	<input type="checkbox"/> 1-5 Years <input type="checkbox"/> 6-10 Years <input type="checkbox"/> 11-15 Years <input type="checkbox"/> 16 Years or More
Employment Type:	<input type="checkbox"/> Government <input type="checkbox"/> Private	Type of Health Facility:	<input type="checkbox"/> Clinic <input type="checkbox"/> Dispensary <input type="checkbox"/> Hospital

Awareness Questions (Mark only the correct response)

Sr. #	Questions	Yes	No
1.	Diagnostic criteria of pre-diabetes		
	a) Fasting blood glucose greater than 100 and 2-hour random blood glucose less than 140 mg/dl		
	b) Fasting blood glucose greater than or equal 126 and 2-hour random blood glucose greater than equal 200mg/dl		
	c) Impaired fasting glucose or impaired glucose tolerance greater than or equal to 100 and less than 126 mg/dl and Fasting blood glucose greater than or equal 140 and random blood glucose less than 200 mg/dl		
	d) Fasting blood glucose greater than 140 and 2-hour random blood glucose less than 240 mg/dl		
2.	Diagnostic criteria of type 2 diabetes mellitus		
	a) Fasting blood glucose greater than 100 and 2-hour random blood glucose less than 140 mg/dl		
	b) Fasting blood glucose greater than or equal 126 and 2-hour random blood glucose greater than equal 200mg/dl		
	c) Impaired fasting glucose or Impaired glucose tolerance greater than or equal to 100 and less than 126 mg/dl and fasting blood glucose greater than or equal 140 and random blood glucose less than 200 mg/dl		
	d) Fasting blood glucose greater than 140 and 2-hour random blood glucose less than 240 mg/dl		
3.	Clinical features of hypoglycemia		
	a) Feeling of joy, Confusion, Sweating, Shakiness, Hunger, Consciousness, Seizures		
	b) Clumsiness, Confusion, Sweating, Shakiness, Hunger, Consciousness, Seizures		
4.	Clinical features of hyperglycemia		
	a) Polyuria, Polyphagia, Polydipsia, Hyperglycemia, Glycosuria		
	b) Clumsiness, Confusion, Sweating, Shakiness, Hunger, Consciousness, Seizures		
	c) Hypervitaminosis, Polyuria, Polyphagia, Polydipsia, Hyperglycemia, Glycosuria		

SUPPLEMENTARY MATERIAL

Sr. #	Questions	Yes	No
5.	Which is more dangerous?		
	a) Hypoglycemia		
	b) Hyperglycemia		
6.	Risk factors for diabetes mellitus type 2		
	a) Family history of diabetes, obesity, old-age, impaired glucose tolerance		
	b) Frequent exercise, obesity, young-age, impaired glucose tolerance		
7.	Stress is one of the factors of diabetes mellitus		
8.	Blood glucose level is normally maintained by		
	a) Liver glycogen		
	b) Muscle glycogen		
	c) Hormones		
9.	A newly diagnosed diabetic patient should be referred to a diabetologist		
10.	Treatment of newly diagnosed type 2 diabetic patient with oral hypoglycemic should be started immediately.		
11.	Lifestyle modification + metformin is the first step for control of diabetes mellitus		
12.	Drug alteration is the next step in the control of diabetes mellitus		
13.	Twice insulin therapy should be started in case of the failure of oral hypoglycemic drugs		
14.	Bedtime long acting insulin should be added in case of uncontrolled diabetes mellitus		
15.	Sulphonylureas should be omitted from therapy after starting insulin to prevent hypoglycemia		
16.	Diabetes self-management education is an essential part of diabetic care		
17.	Self-monitoring of blood glucose helps in diabetes control		
18.	Dietary modification and regular exercise helps in the control of diabetes mellitus		
19.	A non-drug treatment can be helpful in controlling diabetes mellitus		