The Summary of Diabetes Self- Care Activities for Diabetes and Kidney Disease

The questions below ask you about your diabetes and kidney disease self-care activities
during the past 7 days. If you were sick during the past 7 days, please think back to the last 7
days that you were not sick.

Diet											
How many of the last SEVEN DAYS have you followed a healthful eating plan?											
	0	1	2	3	4	5	6	7			
On average, over the past month , how many DAYS PER WEEK have you followed your eating plan?											
	0	1	2	3	4	5	6	7			
On how many of the last SEVEN DAYS did you eat five or more servings of fruits and vegetables?											
	0	1	2	3	4	5	6	7			
On how many of the last SEVEN DAYS did you eat high fat foods such as red meat or full-fat dairy products?											
	0	1	2	3	4	5	6	7			
Exercise											
On how many of the last SEVEN DAYS did you participate in at least 30 minutes of physical activity? (Total minutes of continuous activity, including walking).											
	0	1	2	3	4	5	6	7			
On how many of the last SEVEN DAYS did you participate in a specific exercise session (such as swimming, walking, biking) other than what you do around the house or as part of your work?											
	0	1	2	3	4	5	6	7			
Blood Sugar Testing											
On how many of the last SEVEN DAYS did you test your blood sugar?											
	0	1	2	3	4	5	6	7			
On how many of the last SEVEN DAYS did you test your blood sugar the number of times recommended by your health care provider?											
	0	1	2	2	4	_	6	7			

On how many of the last SEVEN DAYS did you check your feet?										
	0	1	2	3	4	5	6	7		
On how many of the last SEVEN DAYS did you inspect the inside of your shoes?										
	0	1	2	3	4	5	6	7		
Smoking										
Have you smoked a cigarette—even one puff—during the past SEVEN DAYS?										
0. No										
1. Yes.										
If yes, how many cigarettes did you smoke on an average day?										
Number of	cigarette	es:								
N.C. 12										
Medications										
On how many of the last SEVEN DAYS, did you take your recommended diabetes medication?										
	0	1	2	3	4	5	6	7		
On how many of the last SEVEN days did you take your recommended insulin injections?										
	0	1	2	3	4	5	6	7		
On how many of the last SEVEN days did you take your recommended number of diabetes										
pills?	0	1	2	3	4	5	6	7		
Toobert et al. The Summary of Diabetes Self-Care Activities Measure. Diabetes Care, 23(7) July 2000: 943-950.										

Foot Care