



Questions	Potential Answers
Age	
Sex	Male
	Female
Height	
Weight	
Ethnicity	White
	African American
	Hispanic or Latino
	Asian or Pacific Islander
	American Indian or Alaska Native
	Other
	Unknown/no answer
Please specify your ethnicity.	Asian
	Pacific Islander
	NA (ethnicity != 'asian_pacific_islander')
Smoking	Never Smoked
	Quit smoking (more than 1 yr)
	Quit smoking (less than 1 yr)
	Smoked within 30 days
Minutes of weekly exercise	x minutes of moderate activity
	x minutes of vigorous activity
Primary care physician	I don't have a primary care physician
	I have a primary care physician
My last checkup was	Less than 1 year ago
, ,	1 to 2 years ago
	More than 2 years ago
	N/A (primaryCarePhysician_has = '0')
Your waist measurement	Smaller than [##] inches
	[## to ##} inches
	[## to ##} inches
	Larger than [##] inches
	I don't know
	(Not Answered)
Has a doctor ever told you that you have high blood pressure?	Yes
, , , , , , , , , , , , , , , , , , , ,	No
	(Not Answered)
Are you taking any of these medications regularly?	Blood pressure meds
	Cholesterol meds
	Diabetes meds
	None of these
Do you have diabetes?	No diabetes
	Prediabetes
	Diabetes (Type 1)
Is your A1C within the range recommended by your doctor?	Diabetes (Type 2)
	(Not Answered)
	Yes
	No I don't know
	I don't know
Don'there for any and house true 2 districts	(NOTE: not applicable when diabetes = 'no' OR 'pre')
Do either of your parents have type 2 diabetes?	(Not Answered)
	No
	Yes
	I don't know
Do you have a brother or sister with type 2 diabetes?	(Not Answered)

1	1
	No
	Yes
	I don't know
Have you ever been diagnosed with diabetes during pregnancy?	(Not Answered)
	No
	Yes
	(NOTE: not applicable if sex = male OR diabetes_type* = 1)
Are your cholesterol numbers within the healthy ranges recommended by a doctor?	(Not Answered)
	Yes
	No
	I don't know
Fasting blood sugar	(NOTE: not applicable when diabetes = 'type1' OR 'type2')
	I don't know

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