

NB Insulin Pump Program

DH14

- Variable List -

Disclaimer: This variable list is not a final product but is intended to provide information about the variables in this data set while a codebook is being developed. Due to the ongoing nature of this work, NB-IRDT makes no guarantee that the information herein is complete.

Variable	Label	Description/Code
Date of Birth	Date of Birth	(MM/DD/YYYY)
Postal Code	Postal Code	6-Digit Postal Code
Language of Service	Language of Service	English/French
Child Lives with	Child Lives with	Role (Parents, Mother, Father, Other, etc.)
Legal Guardian	Legal Guardian	Role (Parents, Mother, Father, Other, etc.)
Date of Last Renewal Letter	Date of Last Renewal Letter	(MM/DD/YYYY)
New Applicant A1c	New Applicant A1c	Lab Value Reading (0-12)
Date of Test	Date of Test	(MM/DD/YYYY)
Renewal A1c	Renewal A1c	Lab Value Reading (0-12)
Date1	Date1	(MM/DD/YYYY)
Renewal A1c 2nd	Renewal A1c 2 nd	Lab Value Reading (0-12)
Date2	Date2	(MM/DD/YYYY)
DKA Episodes Last 6 Months	DKA Episodes Last 6 Months	Number of Episodes
DKA Episodes Last 12 Months	DKA episodes Last 12 Months	Number of Episodes
Reg Attendance	Reg Attendance	At Medical Appointments for Diabetes Care (Check box)
Diabetes Mgmt Knowledge	Diabetes Mgmt Knowledge	Yes/No (Check box)
Self-monitoring	Self-monitoring	Yes/No (Check box)
Attend Pump Orientation	Attend Pump Orientation	Yes/No (Check box)
Appropriate Family Support	Appropriate Family Support	Yes/No (Check box)
Attends Program at	Attends Program at	Name of Diabetes Care Program (Defined list)
Signature Date	Signature Date	Day/Month/Year
Parent Signature Date	Parent Signature Date	Day/Month/Year

Termination	Termination	Yes/No (Check box)
Termination Date	Termination Date	Day/Month/Year
Termination Reason	Termination Reason	Defined List of reasons
Program	Program	PIPP/SD
Tax Year	Tax Year	Year
Parent #1 Line 150	Parent #1 Line 150	Total Income
Parent #1 Line 430	Parent #1 Line 435	Total Tax Payable
Parent #2 Line 150	Parent #2 Line 150	Total Income
Parent #2 Line 430	Parent #2 Line 435	Total Tax Payable
Family Size	Family Size	Number in Family
Family Contribution	Family Contribution	Monetary Amount Contributed by Family for Pump
Family Contribution Supply	Family Contribution Supply	Monetary Amount Contributed by Family for Supplies
Date Entered	Date Entered	Year
Client Letter Sent	Client Letter Sent	Yes/No (Check box)
Client Accepts	Client Accepts	Date (Day/Month/Year)
Vendor Letter Sent	Vendor Letter Sent	Yes/No (Check box)
Participation Date	Participation Date	Date (Day/Month/Year)
Renewal Letter Sent	Renewal Letter Sent	Yes/No (Check box)
Renewal Letter Received	Renewal Letter Received	Yes/No (Check box)

Document History

Version	Author	Nature of Change	Date
1.0	Andy Balzer	Creation of document	2020-03-20
1.1	Nicholas Larade	Updated data set numbers	2021-04-16