Patient Survey Form By Group #3

1.	What are Female	What are your gender? (If Female, 3.08 points; Male, 0 points) Female Male											
2.	2. What is your age (years)? (if 0-20 , -157.29 points; 21-30 , -47.71 points; 31-40 , -29.93 points; 41-50 , -22.93 points; 51-60 , -18.22 points; 61-70 , -7.69 points; 71-80 , 0 points; >80 , 4.7 points)												
	0-20	21-30	31-40	41-50	51-60	61-70	71-80	>80					
3.	9.48 points; Other ,												
	White	Black		ck	Н	ispanic		Other					
4.	4. Are you unmarried? (If Yes, 2.80 points; No, 0 points) Yes No												
5.	5. Do you have PVD? (If Yes, 3.81 points; No, 0 points) Yes No												
6.	6. Do you have Hypertension? (if Yes, 7.20 points; No, 0 points) Yes No												
7.	7. Do you have Diabetes? (If Yes, 6.09 points; No, 0 points) Yes No												
8. Has a doctor ever told you that you had angina pectoris, myocardial infarction, or stroke? (if Yes, 8.24 points; No, 0 points) Yes No													
9.	•			points; N	ia in past th		ns or hemog	globin at exam lower					
10. What is your HDL level (mg/dL)? (if 0-20, -132.31 points; 21-30, 12.55 points; 31-40, 11.63 points; 41-50, 11.65 points; 51-60, 6.72 points; 61-70, 4.92 points; 71-80, 5.14 points; 81-90 5.64 points; 91-100, 6.14 points; >100, -0.68 points)													
	0-20	21-	-30	31-40	41	-50	51-60						
	61-70	71-	-80	81-90	9	1-100	>100						
	Total po	oints: =											
	CKD prediction: Positive Negative												
	(If total points >= 31.98, CKD prediction is Positive, otherwise Negative)												