Appendix I:A

Letter seeking permission from Dean to conduct study at adopted villages
From,
M. Navaneetha,
Asst.Prof.,
MCON,
MAHE,
Manipal

To,
Dean,
MCON,
MAHE,
Manipal

Through proper channel

Respected Madam,

Sub: Requesting permission to conduct research study

I am doing my PhD study. The title of the study is

‘A study of the factors influencing drug compliance among population with chronic
diseases in selected areas of Udupi district’

I have selected the areas adopted by Manipal College of Nursing, Community Health Nursing Department; Manne, Athrady and Herebettu as the setting of the study. I request you to kindly permit me to do the study in the above said areas.
Kindly do the needful.

Thanking You

Yours faithfully

(M. Navaneetha)

Forwarded

Guide:

Co-guide:

DR. N. UDUPA
PRINCIPAL
MANIPAL COLLEGE OF PHARMACEUTICAL SCIENCES
MANIPAL - 576 104, INDIA
Appendix I: B
Letter of introduction to Community medicine department

23.06.2006

Head of the Department,
Community Medicine Department,
Kasturba Medical College,
MAHE,
MANIPAL – 576 104.

Sir,

This is to introduce to you Ms. Navaneetha M, who is an Asst. Professor in the Community Health Nursing Department and is currently pursuing her Ph.D study from MAHE. The topic of the study is:

‘A study of the factors influencing drug compliance among population with chronic diseases in selected areas of Udupi district’

She has selected Malpe as one of the settings of the study. Kindly give her the necessary permission to conduct the study in that area. She will give further details regarding the study if needed to you in person.

Thanking you,

Yours sincerely,

( DR. RATNA PRAKASH)  
DEAN

[Handwritten note: 26/10/06]
Appendix I: C
Letter permitting to conduct study at Malpe

23.06.2006

Head of the Department,
Community Medicine Department,
Kasturba Medical College,
MAHE,
MANIPAL — 576 104.

Sir,

This is to introduce to you Ms. Navaneetha M, who is an Asst. Professor in the
Community Health Nursing Department and is currently pursuing her Ph.D study from
MAHE. The topic of the study is.

'A study of the factors influencing drug compliance among population with chronic
diseases in selected areas of Udupi district'

She has selected Malpe as one of the settings of the study. Kindly give her the
necessary permission to conduct the study in that area. She will give further details
regarding the study if needed to you in person.

Thanking you,

Yours sincerely,

(DR. RATNA PRAKASH)
DEAN
Appendix I: D
Letter seeking permission from DHO to conduct study

District Health Officer,
Udupi District,
Udupi

Respected Sir,

Sub: Requesting permission to conduct the research study

This is to introduce to you Ms. M. Navaneetha who is working as Assistant Professor in the Department of Community Health Nursing at Manipal College of Nursing, Manipal. She is conducting a study titled “A Study of the Factors influencing drug compliance among population with chronic diseases in selected areas of Udupi district” for the award of Ph.D degree from Manipal University.

She would like to conduct the study in the areas of Malpe and Manipura Primary health centres and its sub centres. I request you to kindly grant permission to conduct the study in the above areas. I assure you to that all ethical principles will be followed during the study.

Any further clarification will be done by the student in person.

Thanking you

Yours Sincerely,

Dr. Kirti Prakash
Dean

Manipal 576104, Karnataka, India  Phone: 0182 222443, 2271201 Fax: 0182 222572, 2270002
E-mail: office@manipal.edu  Website: www.manipal.edu
Appendix I: E
Letter of Acceptance from DHO
Appendix II: A
Letter seeking Ethical Committee clearance

From,
M. Navaneetha,
Lecturer,
Manipal College of Nursing,
MAHE,
Manipal.

To,
The Medical Superintendent,
Kasturba Hospital
Ethical Committee,
Manipal.

Through Proper Channel

Respected Sir,

Sub: Copies for ethical committee

I M. Navaneetha doing Ph.D at MAHE is hereby submitting the copies of my research work for the clearance of the ethical committee.

I have enclosed the protocol, the proposed tool, informed consent form and the ethical issues of the study.

Kindly do the needful.

Thanking you.

Yours Sincerely,
(M. Navaneetha)

Forwarded By: [Signature]

Guide: [Signature]
Co-guide: [Signature]
Dean: [Signature]

MANIPAL COLLEGE OF PHARMACEUTICAL SCIENCES
MANIPAL - 576104
Appendix II: B
Letter of Approval from Ethical Committee

Kasturba Hospital, Manipal
(An associate hospital of the Manipal Academy of Higher Education)

20 March 2006

M. Navaneetha
Lecturer
Manipal College of Nursing
MAHE, Manipal.

Madam,

Subject: Project entitled ‘A study of the factors influencing drug compliance among population with chronic diseases in selected areas of Udupi District’.

With reference to the above and on the basis of resubmission of Protocol with suggested changes, the proposal bearing KHEC No. 30/2006 has been approved.

Yours faithfully,

[Signature]

MEMBER SECRETARY
ETHICS COMMITTEE

Note:
- Inform KHEC in case of any amendments to the protocol, change of study procedure, site and investigator and premature termination of study with reasons along with summary.
- Final Report to be submitted to KHEC
- Members of KHEC have right to monitor the trial with prior intimation.
- A copy of the consent document be given to the person giving the consent.

Fax: 91 – 0820 – 2571934. E-mail: office.kh@manipal.edu

STN-024
Appendix III: A
Letter requesting to validate the tool

27.01.06

From,
M.Navaneetha,
Lecturer,
Manipal College of Nursing,
MAHE,
Manipal.

To,

Respected Sir/Madam

Sub: Request for opinion and suggestion for the tool

I am a Ph.D. student of MAHE university, Manipal. I am doing a study titled

A study of the factors influencing drug compliance among population with chronic diseases in selected areas of Udipi district

Kindly give your valuable suggestions and opinion regarding the tool consisting of

1. the demographic variables
2. factors influencing drug compliance

Enclosed are the objectives, hypotheses of the study, format for validation and the tool.

Thanking you in anticipation.

Yours truly,

(M.Navaneetha)
Appendix III:B

List Of Experts For Validation Of The Tools

1. Dr. Veena Kamath
   Professor
   Department of Community Health
   Kasturba Medical College
   Manipal.

2. Dr. Nagendra Prakash
   Former Professor,
   Manipal Institute of Management,
   Manipal.

3. Dr. Sanchita Pugalendi
   Former Dean,
   Manipal College of Nursing,
   Bangalore

4. Dr. Mallikarjun Rao
   Vice Principal,
   Manipal College of Pharmaceutical Sciences
   Manipal

5. Dr. Sreedhara Pai
   Department of Pharmacology
   Manipal College of Pharmaceutical Sciences
   Manipal
6. Dr. Louis Paulraj  
   Social Worker,  
   Madurai

7. Dr. R. D. Murugesan  
   Family Health Practitioner,  
   Thembavani Hospital,  
   Madurai
## Criteria for validation of tool

Kindly place a tick mark on your opinion of the tool and give your valuable suggestions in the remarks column

<table>
<thead>
<tr>
<th>Sl.No.</th>
<th>Content</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Demographic variables</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Nature of disease and treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Knowledge of patient</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Medical complexity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Social support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Patient provider interaction</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Scoring system</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Blue print of tool

<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Content</th>
<th>Total no.of items</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Knowledge of patient</td>
<td>8</td>
<td>19.05</td>
</tr>
<tr>
<td>2.</td>
<td>Medical complexity</td>
<td>12</td>
<td>28.57</td>
</tr>
<tr>
<td>3.</td>
<td>Social support</td>
<td>8</td>
<td>19.05</td>
</tr>
<tr>
<td>4.</td>
<td>Patient provider interaction</td>
<td>14</td>
<td>33.33</td>
</tr>
</tbody>
</table>

Appendix III: E1
English version of consent form

Consent form

I ___________________________ hereby give my consent to be included as a subject in the study ‘Factors influencing drug compliance among population with chronic diseases in selected areas of Udupi district’

I have been informed that the study is conducted by department of community health nursing (M.Navaneetha).

I have been provided with information about the study and only simple questions will be asked to me regarding my health.

I understand that medical reports/records that reveal my identity will remain confidential, except that they will be provided as may be required by law.

I understand that the investigators of this study may stop the work or stop my participation in the study at any time, for any reason without my consent.

I am also aware of my right to opt out of the study at any time during the course of the study without giving reasons for doing so.

I have been explained that I will not get any direct benefit as cash or kind.

I also give permission to the investigators to publish the data/information obtained as a result of my participation in this study.

Place: _______________________ Name of the participant: ______________________

Date: ___________ Signature of participant: ______________________

Name of the investigator: ______________________

Signature:_____________________

Communicating address: M.Navaneetha, Lecturer, Department of community health nursing, Manipal College of nursing, MAHE, Manipal. Phone no: 2922443.

Appendix III: E2
Kannada version of consent form

MḷàÚÆ YĀvĀæ

........................................ DzÀ £Â£ÀÉ F áÀÆÆ®PÀ £Â£Àß MḷàÚÆiÀÄêÀÄiÀÄ F áÀvÀAÜ F PÉ¼ÀVÇÀ «µÀiÀÄêÀÄ «GqÁÀ ¡ÈÈiÀÄ DAiÀÄY YÀæzÉÅ±AUÀ¼À°è wÃ±Àæ gÉÆÄUÀ«gÀÀ³À d£À±ÀÅÊÀæAiÀÄ ëÉÀ· É OmÀcù vÉUÉzÄPÉÆ¼ÀÀìÀÄÀzÀgÀ YÀæ´sÁ³À ©ÃgÀÀ³CA±AUÀ¼ÀÀ³.

F CzsÀàAiÀÄêÀÄ³À DgÉÆÄUÀæ ËÀ³dAUë «sÁUÀcAzÀ £ÂqEÀ,À®aqÃÀvÀÜzÉ JÅ§ÀzÅÀß £ÂAUÉ w½½gÀÀ³AgÀA. (JÀ. £ÂÀ±ÀÀ³.)

Morisky scale

Kindly tick (√) mark for the correct answer:

1. You forget some time to consume prescribed drugs? Yes/ No
2. Nobody assists you when you consume drugs? Yes/ No
3. When you feel well is then that you do not consume drugs? Yes/ No
4. When you feel yourself little well: it is then that you do not consume drugs? Yes/ No

Scoring
Yes-0  No-1
0 to 1 no compliance  2 to 3 moderate compliance  4 high compliance

Scale for assessing factors affecting drug compliance

Kindly write the letter of your choice at the space provided for each question

Demographic Variables

1. Age:
Modified Srivastava scale to assess socio economic status

1. What is your level of education?
   A) Primary school   B) Middle school   C) High school   D) PUC
   E) Graduate   F) Post graduate

2. What is your occupation?
   A) Unemployed   B) Domestic servant   C) Semi-skilled worker   D) Skilled worker
   E) Clerical job   F) Administrative job

3. What is your family income/month in Rs.?
   A) below 999   B) 1000-1999   C) 2000-2999   D) 3000-3999   E) 4000 and above

4. Does your family subscribe to any magazine?
   A) Never   B) Occasionally   C) Daily

5. How often your family subscribes to any magazine?
   A) Never   B) Occasionally   C) Every month   D) Every week

6. Are you a member of any club?
   A) No   B) Yes
7. Do you participate in the activity of any social, economic, political or religious organization?
   A) No  B) Yes, if yes C) member of one organization
   D) member of more than one organization  E) office bearer of one organization
   F) office bearer of more than one organization

Scoring
1. A) 1 B) 2  C) 3  D) 4  E) 5  F) 6
2. A) 1 B) 2  C) 3  D) 4  E) 5  F) 10
3. A) 1 B) 2  C) 3  D) 4  E) 5
4. A) 0 B) 1  C) 2
5. A) 0 B) 1  C) 2  D) 3
6. A) 0 B) 1
7. A) 0 B) 1  C) 3  D) 4  E) 5  F) 6

Upper class: 23-33  Middle class: 13-22  Lower class: 3-12

Details of disease and treatment

Kindly answer these questions to the best of your knowledge which will help to understand your disease and treatment particulars:

Nature of disease

1) Diagnosis -------------------

2) No. of years/ months/ days after diagnosis -------------------------------

3) Presence of complication ---------------------------------------------

Nature of treatment

<table>
<thead>
<tr>
<th>S.N o.</th>
<th>Name of the drug</th>
<th>Dosage</th>
<th>System of medicine</th>
<th>Started from</th>
<th>Taking regularly</th>
<th>Discontinued</th>
</tr>
</thead>
</table>

Scale to assess the factors- Kindly tick (√) the option you think is most appropriate for the statements
### Knowledge of Patient

| 1. I know what is the nature of my disease  | To full extent | To some extent | Don't know |
| 2. I understand the need for treatment  |               |               |            |
| 3. I know what food pattern I should follow  |               |               |            |
| 4. I know what my treatment plan is  |               |               |            |
| 5. I know why I should take drugs  |               |               |            |
| 6. I know about the side effects of the medication  |               |               |            |
| 7. I understand that drugs have interactions  |               |               |            |
| 8. I have a previous bad experience of taking drugs  |               |               |            |

**Total**

### Medical Complexity

| 1. I cannot afford to buy my medicines  |               |               |            |
| 2. I have too many medicines to take  |               |               |            |
| 3. I have to take medicine many times in a day  |               |               |            |
| 4. I have to take food for taking medicine which is not possible  |               |               |            |
| 5. The number of drugs /time is more  |               |               |            |
| 6. I have to get up early to take medication  |               |               |            |
| 7. I have to keep awake at night to take medication  |               |               |            |
| 8. I have to carry medication to work place  |               |               |            |
| 9. I do not get drugs nearby my house  |               |               |            |
| 10. Drugs have bad taste  |               |               |            |
| 11. The smell of the drug is not good  |               |               |            |
| 12. I cannot remember my drugs due to frequency of change in drug regimen  |               |               |            |

**Total**

### Social Support

| 1. My family knows my disease condition  |               |               |            |
| 2. My family knows my drug regimen  |               |               |            |
| 3. My family understands my disease condition  |               |               |            |
| 4. My family reminds me when I should take drugs  |               |               |            |
| 5. My family knows the side effects of the medicine  |               |               |            |
| 6. My family knows what to do when I get sick  |               |               |            |
| 7. My family members take care of my treatment regimen  |               |               |            |
| 8. My family accompany’s me to visit the doctor  |               |               |            |
### Patient Provider Interaction

1. I receive answers to all my queries from the health care provider  
   a. doctor  
   b. nurse  
   c. pharmacist  
2. The answer I get is only medical terms  
3. The person who gives me information has knowledge  
4. I have a bad past experience regarding taking medicines  
5. I don’t believe in the medicine  
6. The health personnel maintain good relation with me  
7. I would inform the health care provider if I miss medicines  
8. I like the health care set up I attend  
9. I had a conflict with my health care provider  
   a. doctor  
   b. nurse  
   c. pharmacist  
10. Medicine is given to me based on previous records  
11. The health care provider don’t respect me as an individual  
12. The health care provider just keep changing my drug regimens  
13. The health care provider’s tell me to eat foods which I cannot afford  
14. The procedures at health care set up are too complicated

<table>
<thead>
<tr>
<th>Total</th>
</tr>
</thead>
</table>
Scale SF-36

Your Health and Well-Being

This questionnaire asks for your views about your health. This information will help keep track of how you feel and how well you are able to do your usual activities. Thank you for completing this survey!

For each of the following questions, please mark an ☐ in the one box that best describes your answer.

1. In general, would you say your health is:

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Very good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
<td>□ 5</td>
</tr>
</tbody>
</table>

2. Compared to one year ago, how would you rate your health in general now?

<table>
<thead>
<tr>
<th>Much better now than one year ago</th>
<th>Somewhat better now than one year ago</th>
<th>About the same as one year ago</th>
<th>Somewhat worse now than one year ago</th>
<th>Much worse now than one year ago</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
<td>□ 5</td>
</tr>
</tbody>
</table>

SF-36/2™ Health Survey © 1992, 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric Incorporated. All rights reserved. SF-36® is a registered trademark of Medical Outcomes Trust. (QOLHA SF-36-2 Standard, India (English))
3. The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

<table>
<thead>
<tr>
<th></th>
<th>Yes, limited a lot</th>
<th>Yes, limited a little</th>
<th>No, not limited at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>图纸插图</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Moderate activities, such as moving a table, sweeping the floor, gardening, or bicycling</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Lifting or carrying groceries</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Climbing several flights of stairs</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Climbing one flight of stairs</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Bending, kneeling, or stooping</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Walking more than a kilometre</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Walking several hundred metres</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Walking one hundred metres</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Bathing or dressing yourself</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

SF-36® Health Survey © 1992, 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric Incorporated. All rights reserved.
SF-36® is a registered trademark of Medical Outcomes Trust.
(IQOLA SF-36-2 Standard, India (English))
4. During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

- Cut down on the amount of time you spent on work or other activities
- Accomplished less than you would like
- Were limited in the kind of work or other activities
- Had difficulty performing the work or other activities (for example, it took extra effort)

5. During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

- Cut down on the amount of time you spent on work or other activities
- Accomplished less than you would like
- Did work or other activities less carefully than usual

SF-36® Health Survey © 1992, 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric, Incorporated. All rights reserved. SF-36® is a registered trademark of Medical Outcomes Trust.

(IQOLA SF-36v2 Standard, India (English))
6. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbours, or groups?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Slightly</th>
<th>Moderately</th>
<th>Quite a bit</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

7. How much bodily pain have you had during the past 4 weeks?

<table>
<thead>
<tr>
<th>None</th>
<th>Very mild</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Very severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little bit</th>
<th>Moderately</th>
<th>Quite a bit</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...

<table>
<thead>
<tr>
<th>All of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
</tr>
</tbody>
</table>

- Did you feel full of life? □ 1 □ 2 □ 3 □ 4 □ 5
- Have you been very nervous? □ 1 □ 2 □ 3 □ 4 □ 5
- Have you felt so sad and low in spirit that nothing could cheer you up? □ 1 □ 2 □ 3 □ 4 □ 5
- Have you felt calm and peaceful? □ 1 □ 2 □ 3 □ 4 □ 5
- Did you have a lot of energy? □ 1 □ 2 □ 3 □ 4 □ 5
- Have you felt downhearted and depressed? □ 1 □ 2 □ 3 □ 4 □ 5
- Did you feel worn out? □ 1 □ 2 □ 3 □ 4 □ 5
- Have you been happy? □ 1 □ 2 □ 3 □ 4 □ 5
- Did you feel tired? □ 1 □ 2 □ 3 □ 4 □ 5

10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?

<table>
<thead>
<tr>
<th>All of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
</tr>
<tr>
<td>□ 1</td>
<td>□ 2</td>
<td>□ 3</td>
<td>□ 4</td>
<td>□ 5</td>
</tr>
</tbody>
</table>

SF-36® (Health Survey) © 1992, 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric incorporated. All rights reserved.
SF-36® is a registered trademark of Medical Outcomes Trust.
IQOLA SF-36v2 Standard, India (English)
11. How TRUE or FALSE is each of the following statements for you?

<table>
<thead>
<tr>
<th>Definitely true</th>
<th>Mostly true</th>
<th>Don’t know</th>
<th>Mostly false</th>
<th>Definitely false</th>
</tr>
</thead>
</table>

1. I seem to get sick a little easier than other people .......... ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I am as healthy as anybody I know .................................. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I expect my health to get worse ........................................ ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. My health is excellent .................................................. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

*Thank you for completing these questions!*

SF-36™ Health Survey © 1992, 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric Incorporated. All rights reserved. SF-36® is a registered trademark of Medical Outcomes Trust. (QOL/Q SF-36/2 Standard, India (English))
Appendix III: F2
Kannada version of tool

ªÉÆjÌ ÆiÁyÅPÀ

1. ñUàc¥Ar¹gÀAë ÔµÀëûUÀ¼ÅläÅB
2. ñÀìÀÄ ÔµÀcÀiÀiÀslÀB BÀÉUÉ ñÀ÷À• ñÈÀÄÀ òE®è
3. ñÀìÀÄ DgÉÆÄUÀAëÄvzÉYÀÅ JÀzÀÀ
dÀs«, «ÀsÀÂUÀ ñÀìÀÄ ÔµÀcÀiÀ ÉÀ«. ÀÀëÀÉÀÉÀÉÀÉÀ ñÈÀÄÀ òE®è
4. ñÀìÀÄ DgÉÆÄUÀAëAzóë ÈéÀaÀ ÆáàzÁsÀåUÈ
PÀAqÀåÀSÀÁzÀÀÀÀÀ, ñÀìÀÄ ÔµÀzÀÀ ñÈÀÄÀ òE®è

CAPÀUÀ¼ÀÀ
ñÈÀÄ À 0 Ë®è 1
0 ¬ÀÀzÀ 1 vÀÈ|ÜPÀgÀAëÀë 2jÀzÀ 3. ÁáàzÁgt 4 GvÀÜÀÀ
ÔµÀcÀiÀÉÀÅÉ SÜÉ ÎYÀæ°sÀÀ @ÇgÀÅÀ ÆÇÀUÀ¼ÀÀ:
ñÀÀUÉ Àj CàB¹zÀ CPÀëgÀÅéÀÁÀB SÀî. ÀÀëÀáÀëÀ 2gÉ¬Àj.
dÉÀ, ÀÀsÀÀ ÆÀvÀå, ÀÀUÀ¼ÀÀ
1. ÀÀiÀÁ, ÀÀìÀ
J. 30-40°ÔµÀd ©. 41-50 ^ÔµÀd 1. 51-60 ^ÔµÀd
2. ÆUÀ : J) UÀÀqÀÀ ©) ÆtÀÜ

-----
3. ਅਂਕੀ ਕੱਤੀ-ਕੱਤੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

-----

ਅਂਕੀ ਕੱਤੀ-ਕੱਤੀ, ਦੋਹਲੀ ਅਂਕੀ ਹੋਧਾਰੀ ਅਂਕ ਜਾਂ ਕੱਤੀ ਅਂਕੀ ਅਂਕਾ ਅਂਕੀ

ਸਰਾ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

1. ਅਂਕੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ  

-----

2. ਅਂਕੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

-----

3. ਅਂਕੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

-----

4. ਅਂਕੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

-----

5. ਅਂਕੀ ਹੋਣ ਲਈ ਅਤੇ ਅਖਾਡੀ ਨਾਲ ਹੋਣ ਲਈ: J) ਸਬੜਾਗਾਂ ©) ਸਬੜਾਗਾਂ

-----

Manipal University
J) AiÀiÁªÁUÀ®Æ E®è ©) M®ÉÆä®ÉÄä 1) ¥Àæw wAUÀ¼ÂÄ g) ¥Àæw ÆgÀ ------

6. ÆÀÀ ÄiÀiÁªÁÀæÁÀgÀÆ ,ÀAWÀzÀÀ ÆzÀÀæÁÀVçÝÄAIÉÆÀ?
E®è ⁹ÈzÀÀ ------

7. ÆÀÀ ÄiÀiÁªÁÀæÁÀgÀÆ ,ÁÄÀiÁfPÀ, DyöPÀ, gÄdQÄAiÀÄ CxÀÁ
zsÀ«øPÀ ,AA,ÉUUÀ¼ÂÀ ZÀIÀ®ÀnPÉUÀ¼Â°ë “sÁVÄiÀiÁUÀÄwÜAgÀ?
J) E®è ©) ⁹ÈzÀÀ, DzÀgÉ 1) MAzÉÀ ,ÀAWÀzÀ ÀzÀÀä
r) MAzÀQÌAvÀ ⁹ÈzÀÀÀN ,ÀAWÀUÀ¼Â°ë ÀzÀÀä
E) AiÀiÁªÁÀæÁÀgÉÆAzÉÀ ,ÀAWÀzÀ°ë ¥ÀzÀçüPÀj
J¥sì) MAzÀQÌAvÀ ⁹ÈzÀÀÀN ,ÀAWÀUÀ¼Â°ë ¥ÀzÀçüPÀj
-----

gÉÆÀUÀ ⁹ÀvÀÄÀ ÇzÀgÀ aQvéiAiÀÄ «ÀgÀUÀ¼ÂÄ
⁹ÀÀ Ä ÀAYÀÆtöÀAzÀ J®ë gÉÆÀUÀ¼ÂÀ ⁹ÀvÀÄÀ aQvéiAiÀÄ
«ÀgÀUÀ¼ÂÀÆÀß w½AiÀÄ®À ÇÀÀPÀÆ®ÀUÀÄ®ÀAvÉ zÀÀ ÀíÀ «lÀö
⁹ÀÀUE JµÀÄÖ ,ÀÀsÀÀ®ÉÇÀ ÇµÀÄOF PÉ¼ÀVÀ ¥Àæ±ÉBUÀ½UE GvÀÚj.

CEgÉÆÀUÀÀzÀ ÀégÀÆ¥À
1) PÀ¬À ÉÀÀ ÆÈ,ÀgÀÀ -------
2) gÉÆÀUÀÀÆÀß ¥ÀvÉÜ ⁹ÀvÀÉ ÀvÂgÀ JµÀÄÖ
⁹ÀgÀµÀUÀ¼ÂÀ/wAUÀ¼ÂÀUÀ¼ÂÀÀÆÀ/ÇÀÀUÀ¼ÂÀ¬ÀvÀÀ. -------
3) zÀÀµÀjuÀ²ÀÀUÀ¼ÂÀ -------
aQvéiAiÀÄ _ÀégÀÆ¥À
<table>
<thead>
<tr>
<th>PA</th>
<th>µAzsÅ</th>
<th>¥Aæ@Ai</th>
<th>aQvAi</th>
<th>¥AægÅ“s</th>
<th>PAæ@AA§zÅ</th>
<th>ØAØ</th>
<th>ØnÖÆ</th>
<th>ØYÆÆ</th>
</tr>
</thead>
</table>

**CA±ÀUÀ½ÀΩÀĂB C½ÉAiÀÑ®Ä G¥ÀAiÉÆAV,ÀÄ®À À@ÀÝÀPÀ zÀAiÀÀ«IÔ øÀÄÜÉ ,Àj JgÀ@À«ÀgÀuÉAiÀÀ JzÀgÀÁ (✓) øÁQj.**

<table>
<thead>
<tr>
<th>gÉÆAVAIÀÀ eAO@Å</th>
<th>ÀÀYÀÆtø@Å</th>
<th>AzsAgÅt</th>
<th>UEÆwUøè</th>
</tr>
</thead>
<tbody>
<tr>
<td>w½ÀÄ®À½PÉ</td>
<td>w½ÀÄ®À½PÉ</td>
<td>ÀÀYÀÆtø@Å</td>
<td>AzsAgÅt</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>UFÆwUøè</td>
</tr>
</tbody>
</table>

1) £ÀÆÅB  gÉÆÄÀZÀ  „ÀÉgÀÆ¥À@ÉÄÉÀzÀÀ  £ÀÆÀÉÉÉÉ Àw½czÉ  
2) aQvÉiAiÀÀ  
CUÀvÀ@ÀΩÀÎB  £ÀÆÀÀ  w½cgÀÀvÉÜÀÅÉ  
3) ÀÄiÀ®À £À@ÀÆÉÀ1ÀÀ  
D@ÀgÀ@ÀΩÀÎB  „ÉÀ“As À“ÉÉPÉÀzÀÀ  £ÀÆÀÀ  Àw½cgÀÀvÉÜÀÅÉ  
4) £ÀÆÀÀ  aQvÉiAiÀÀ  
AiÉÆdÆÉUÀ@ÀΩÀÎB  £ÀÆÀÀ  Àw½cgÀÀvÉÜÀÅÉ  
5) £ÀÆÉPÉ  OµÀøÅ  „ÉÀ“As À“ÉÉPÉÀzÀÀ  £ÀÆÀÉÉÉ Àw½ÆwUøÉ  

---

Manipal University  Page 139
<table>
<thead>
<tr>
<th>E EzAáQAAiAA dn®vÈ</th>
<th>AiAiÀ®AUA®</th>
<th>PE®ÈÇ®EA</th>
<th>AiAiÀ®AUA®</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. OµÀ¢üUA¼À£ÀÄ Rjâ¸À®Ä §À£ÀÉ</td>
<td>Æ</td>
<td>ä</td>
<td>Æ E®è</td>
</tr>
<tr>
<td>2. §À£ÀÉ vÀÄÀ®Á OµÀ¢ü §À£ÀÉ EzÉ.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. £À£ÀÉ c£ÀPÉÌ §À£ÀÉ OµÀ¢ü §À£ÀÉ EzÉ.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. OµÀ¢ü §À£ÀÉ EzÉ.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6) OµÀ¢ü „ÉÀ®£À£É–ÄAzÀ §gÀÀ£À  vÉÆAzÀgÉUÀ¼À §UÉI £À£ÀÉ UÉÆvÀÄÜ  7) OµÀ¢üUÀ¼ÀÄ CqÀØ ÀÁjmuÀÄ Æ IÀ®ÁiÁqÀÄvÀÄÉ JAzÀÄ £À£ÀÉ w½çzÉ  8) OµÀ¢ü „ÉÀ®£À£É–ÄAzÀ »AzÉ £À£ÀÉ PÀ» C£ÀÄsÀ®ÁUÀ¼ÀÄ DVÉ MIÄÖ CAPÀ
5. MAzAA  "Á®PEI
ΩÁìÀÄ
vÉUÉzÀÄPÉÆ½ÅÄi8
À OµÀ¢üUÀ½À
ÀASEå EÁZZÀÄN

6. OµÀ¢ü ÉÅ®ÅÉÉUÀV
 É½UEÎ ΣÁ€Ä
 ÉÄUÀ
 K½ÀÉÄPÀÀÀnvÄUz
 É.

7. OµÀ¢ü ÉÅ®ÅÉÉUÀV
gáwæ ΣÁ€Ä
JZAÅgÀÁVgÀÀvÉÜÄ
ÉE

8. ΣÁ€Ä PÉ®À
 ÆiÁqÀÀÀ ÛÀ½ÀPEÎ
OµÀ¢ü
MAiÀÀÀÉÄPÀÀÀÀvÄUz

9. ΣÁ€Ä ÆÇÉ
 ÅÀÄÅYÀ OµÀ¢ü
zÉÆgÉAiÀÄÀÀÀ ÇÀ€è

10. OµÀ¢üUÀ½À
PÉIÖ gÀÀaAiÀÄÅÄłß
EÆAÇgÀÀvÄÜzÉ

11. OµÀ¢üAiÀÄ
 ÆÅÇÉ
MÀÉiAiÀÄzÀ®è

12. OµÀ¢üUÀ½ÀÅÄß
DUÀÀÜÎ
SzÀÀ ÁÀÀÀÀÀÅÄzzÀÀ
zÀ ΣÁ€AUÉ
OµÀ¢üAiÀÄ EÇÁgÄÄ

Manipur University  Page 141
<table>
<thead>
<tr>
<th><strong>£À£Àß C£ÁgÉÆÃUÀåzÀ ¹Üwi£À£Àß</strong></th>
<th><strong>£À£Àß OµÀ¢üAiÀÄ §UÉÎ £À£Àß UÀAqÀ/ºÉAqÀwUÉ w½czÉ</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. £À£Àß C£ÁgÉÆÃUÀåzÀ ¹Üwi£À£Àß UÀAqÀ/ºÉAqÀwUÉ w½czÉ</td>
<td>2. £À£Àß OµÀ¢üAiÀÄ §UÉÎ £À£Àß UÀAqÀ/ºÉAqÀwUÉ w½czÉ</td>
</tr>
<tr>
<td>3. £À£Àß UÀAqÀ/ºÉAqÀwUÉ £À£Àß C ¤ÉRåzÀ ¹ÜwAiÀÄ §UÉÎ w½czÉ</td>
<td>4. £À£Àß UÀAqÀ/ºÉAqÀwUÉ £À£Àß C ¤ÉRåzÀ ¹ÜwAiÀÄ §UÉÎ w½czÉ</td>
</tr>
<tr>
<td>5. £À£Àß UÀAqÀ/ºÉAqÀwUÉ OµÀ¢ü¬ÄAzÀ §gÀĪÀ EvÀgÀ ¥ÀjuÁªÀÄUÀ¼À PÀÄjvÀÄ w½czÉ.</td>
<td>6. £À£Àß C ¤ÉRåUÉÆAqÀUÀ £À£Àß UÀAqÀ/ºÉAqÀwUÉ K£ÀÄ ¤ÀíÁqÀ¨ÉÄPÉAzÀÄ w½czÉ</td>
</tr>
<tr>
<td></td>
<td>7. £À£Àß ±À±ÀÆæµÉAiÀÄ ¥ÀxÀåzÀ PÀÄjvÀÄ £À£Àß UÀAqÀ/ºÉAqÀw PÀ¼Af AçÀä,ÄÀvÁûgÉ.</td>
</tr>
</tbody>
</table>
8. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß §®è£àß w½¢zÉ. ¹Üwë£àß
9. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß §®è£àß w½¢zÉ. ¹Üwë£àß
10. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
11. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
12. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
13. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
14. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
15. £À£Àß £È£Àß ¹Üw ÏÀ£àß PÀÄíìÀÅÆZÀº£àß w½¢zÉ. ¹Üwë£àß
16. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA}}$

17. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

18. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

19. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

20. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

21. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

22. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

23. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$

24. $\mathbf{\text{UE} \frac{1}{2} \text{EaIAA} = UE}$
<table>
<thead>
<tr>
<th>gEEÆAV, DgÆEAUAã</th>
<th>M¥AAãvÉUA</th>
<th>wÃ°AiÄ½Å«®è</th>
<th>M¥AAã°ÄÀæ</th>
</tr>
</thead>
<tbody>
<tr>
<td>CeüPÁjAiÅA vÆ]Ü</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1) £ÁωÀÄ £À£Àß
   DgÉÆAUÀåzÀ
   PÀÄjvÀÄ PÉ½zÀ
   ¥ÀæwAiÉÆAzÀÀ
   ¥Àæ±ÉBuÀ½UÉ,
   £À£Àß DgÉÆAUÀå
   ,À°ÁAiÅPÀjAzÀ
   GvÀÜgÀ°ÅÀß
   ¥ÀqÉzÀAPÉÆ½ÄÀ°PACK ÉÚÀΣÉ.
   a) ÆÉzÀajAzÀ
   b) zÁcAiÅjAzÀ
   c) OµÀcü vÀdÔjAzÀ

2) £ÁωÀÄ ¥ÀqÉAiÅÀÅ°À
   GvÀÜgAUÀ½É®è
   À°ÉzÀaQÄAiÅÀ
   ¥ÀzÀAUÀ½À°AiÉÄÀ
   EgÀnvÁzÉ.
3) £À£ÀUÉ
   ÆAi À°wUA½ÅÀß
   ÆÀqÅÀ°ÆgÀÀ
   vÀÄÀ°Á
   w½zÀ°ÆgÀmZÀºyÉ.
4) ÔµÀcü
   £À£ÀÅZÉAiÅÀ°è
c) OµÀzsÀ vAdOjAzÀ

10) £À£Àß »A£À zÁR° ÉUÀ¼À
DzsÀgÀzÀ°è
£À£ÀUE OµÀ¢ü
»AqÀ° ÁUÀÄvÀÚzÉ.

11) £À£Àß DgÉÆÀUÀå
CçüPÁj £À£Àß£ÀÄß
ºÉaìÀAQÜPÀgÁV
UÉgÀ«,ÁÀwÜ®è.

12) £À£Àß DgÉÆÀUÀå
CçüPÁj
OµÀzsÀgÀ£ÀÄß
§zÀ°,ÁÀvÀ®
EgÀÀvÀÜgÉ.

13) £À£Àß
ÁÀxÀåòPÉÌ
»@PÀzÀ DºÁgÀ
ÉÀ«,Á@Á
DgÉÆÀUÀå CçüPÁj
ºÉÀ¼ÀÁvÀÜgÉ.

14) DgÉÆÀUÀå
ÁAgÀPÀëuÁ
«sÀUÀzÀ «¢ü
«zsÀ€ÀUÀ¼ÀÁ
vÀÀ°Á
dn®ÁAzÀÄÝ.

CAPAUÀ¼ÀÁ :
ನಿಮ್ಮ ಸುತ್ತಲು ಕಾರ್ಯ ಅದೇರು.

1. ಕೊರಿನ್ನು ಎನ್ನುವಿನ ಕಾರ್ಯ.
   ▼ ▼ ▼ ▼ ▼
   □ 1 □ 1 □ 1 □ 1 □ 1

2. ಉಂಟಾಗಿರುವ ರುಚಿಯ ಕ್ಷೇತ್ರ. ನಮೂ ಅದೇರು ಎಂದು ಕ್ರಮವೇಳೆ ಅದೇರು?
   ▼ ▼ ▼ ▼ ▼
   □ 1 □ 1 □ 1 □ 1 □ 1
3. ಎರಡು ಅಥವಾ ಹೆಚ್ಚಿನ ಸಮಯದಲ್ಲಿ, ನಮೂನೆಯಲ್ಲಿ ಹೊರಹೊರ ಮರಾಟವಾದ ಹುದ್ದೆಗಳು? ಕೆಲವು ಅನೇಕ?

   - ಮನುಷ್ಯ ದೇಹದ ಲಕ್ಷಣಗಳಿಗೆ, ಕಳೆದ ಸಂಪ್ರದಾಯ,
     ಹೊರಹೊರವಾದ, ಹುದ್ದೆಗಳು.
     ಹೊರಹೊರವಾದ ಹುದ್ದೆಗಳು................................. 1 ........................ 2 .................. 3
   - ನಮೂನೆಯಲ್ಲಿ ಹೊರಹೊರಗೆ, ಕಳೆದ ಸಂಪ್ರದಾಯ,
     ಹುದ್ದೆಗಳು. ಹೊರಹೊರವಾದ,
     ಹೊರಹೊರವಾದ ಹುದ್ದೆಗಳು................................. 1 ........................ 2 .................. 3
   - ಹೊರಹೊರವಾದ ಹುದ್ದೆಗಳು. ಹೊರಹೊರವಾದ,
     ಹೊರಹೊರವಾದ, ಹುದ್ದೆಗಳು.
     ಹೊರಹೊರವಾದ ಹೊರಹೊರವಾದ......................... 1 ........................ 2 .................. 3
   - ಹೊರಹೊರವಾದ ಹೊರಹೊರ. ಹುದ್ದೆಗಳು.
     ಹೊರಹೊರ. ಹೊರಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ, ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ. ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ................................. 1 ........................ 2 .................. 3
   - ಹೊರ................................. 1 ........................ 2 .................. 3

SF-36* Health Survey © 2004 Health Assessment Lab, Medical Outcomes Trust and Quality Metric Incorporated. All rights reserved.
SF-36® is a registered trademark of Medical Outcomes Trust.
(IQOLA SF-36 v2 Standard, India (Kannada))
4. "ಕಾಡು ಅಡುಗೆ, ಆಡುತ್ತಿರುವ ಸಂದರ್ಭದಲ್ಲಿ ಇತರ ಅಂಗದ ಸೈಬೀರ್ಯಾದ ನಾಸಿ ಇರುವರು ಎಂದರೂ, ಎಂದರೂ ಅಡುಗೆ ಮಾಡುವುದಕ್ಕೆ ತುದಿಯಲ್ಲಿ ಸೊಪ್ಪಟ್ಟಿದಾಗ ವಿಸ್ತೃತಿಯಲ್ಲಿಯಾಗುತ್ತದೆ?"

<table>
<thead>
<tr>
<th>ಅಂಗ</th>
<th>ಕಾಡು</th>
<th>ಆಡುತ್ತಿರುವ</th>
<th>ಸಂದರ್ಭದಲ್ಲಿ</th>
<th>ಇತರ</th>
<th>ಅಂಗದ</th>
<th>ಸೈಬೀರ್ಯಾದ</th>
<th>ನಾಸಿ</th>
<th>ಇರುವರು</th>
<th>ಎಂದರೂ</th>
<th>ಅಡುಗೆ ಮಾಡುವುದಕ್ಕೆ</th>
<th>ತುದಿಯಲ್ಲಿ</th>
<th>ಸೊಪ್ಪಟ್ಟಿದಾಗ</th>
<th>ವಿಸ್ತೃತಿಯಲ್ಲಿ</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
</tr>
</tbody>
</table>

5. "ಕಾಡು ಅಡುಗೆ, ಆಡುತ್ತಿರುವ ಸಂದರ್ಭದಲ್ಲಿ (ಅದೊಂದು ಕಾಡು ಅಡುಗೆಯನ್ನು ಮಾಡುವುದಕ್ಕೆ ತುದಿಯಲ್ಲಿ ಸೊಪ್ಪಟ್ಟಿದಾಗ ವಿಸ್ತೃತಿಯಲ್ಲಿ) ಸಂದರ್ಭದಲ್ಲಿ ಇತರ ಅಂಗದ ಸೈಬೀರ್ಯಾದ ನಾಸಿ ಇರುವರು ಎಂದರೂ, ಎಂದರೂ ಅಡುಗೆ ಮಾಡುವುದಕ್ಕೆ ತುದಿಯಲ್ಲಿ ಸೊಪ್ಪಟ್ಟಿದಾಗ ವಿಸ್ತೃತಿಯಲ್ಲಿ?"

<table>
<thead>
<tr>
<th>ಅಂಗ</th>
<th>ಕಾಡು</th>
<th>ಆಡುತ್ತಿರುವ</th>
<th>ಸಂದರ್ಭದಲ್ಲಿ</th>
<th>ಇತರ</th>
<th>ಅಂಗದ</th>
<th>ಸೈಬೀರ್ಯಾದ</th>
<th>ನಾಸಿ</th>
<th>ಇರುವರು</th>
<th>ಎಂದರೂ</th>
<th>ಅಡುಗೆ ಮಾಡುವುದಕ್ಕೆ</th>
<th>ತುದಿಯಲ್ಲಿ</th>
<th>ಸೊಪ್ಪಟ್ಟಿದಾಗ</th>
<th>ವಿಸ್ತೃತಿಯಲ್ಲಿ</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
<td>▼</td>
</tr>
</tbody>
</table>

SF-36â€”Health Survey © 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric Incorporated. All rights reserved.
SF-36® is a registered trademark of Medical Outcomes Trust.
(IQOLA SF-36v2 Standard, India (Kannada))
6. ಅನುಭವ ಮತ್ತು ಅಗ್ಗಿಸಿರಿ. ನಿತ್ಯ ಪೀಠ ಅಭಿಮುಖಕ್ಕೆ ಅದ್ದೇವರು ವಿದ್ಯಾನುದ್ಯಾನದಲ್ಲಿ ಅನುಭವಿಸಿದ್ದಾರೆ. ನಾಮಕ್ರಮದಲ್ಲಿ ಅನುಭವವನ್ನು ಅನುಭವಿಸುವ ಕಾರ್ಯಗಳು ಎಂದರೆ? 

    ಉಚ್ಚಪ್ರಮರಿಸಲಾಗಿದೆ    ಉಚ್ಚ ಪೊರೆಯಾಗಿದೆ    ಪ್ರಮರಿಸಲಾಗಿದೆ    ಸರಳ     ಮಂದ

    ☐ 1    ☐ 2    ☐ 3    ☐ 4    ☐ 5

7. ಅನುಭವದ ರೂಪದಲ್ಲಿ ಅತ್ಯಂತ ಅನುಭವವಾಗಿದೆ ಎಂದರೆ? 

    ಉಚ್ಚಪ್ರಮರಿಸಲಾಗಿದೆ    ಉಚ್ಚ ಪೊರೆಯಾಗಿದೆ    ಪ್ರಮರಿಸಲಾಗಿದೆ    ಸರಳ     ಮಂದ

    ☐ 1    ☐ 2    ☐ 3    ☐ 4    ☐ 5

8. ಅನುಭವವನ್ನು ಮತ್ತು ಅತ್ಯಂತ ಅತ್ಯಂತ ಅನುಭವವಾಗಿದೆ ಎಂದರೆ? (ಕಾರ್ಯಗಳಿಗೆ ಸಹಾಯದ ಹಾಗೂ ಸುತ್ತಿಗಳು)

    ಉಚ್ಚಪ್ರಮರಿಸಲಾಗಿದೆ    ಉಚ್ಚ ಪೊರೆಯಾಗಿದೆ    ಪ್ರಮರಿಸಲಾಗಿದೆ    ಸರಳ     ಮಂದ

    ☐ 1    ☐ 2    ☐ 3    ☐ 4    ☐ 5

SF-36v2 Health Survey © 2004 Health Assessment Lab, Medical Outcomes Trust and QualityMetric incorporated. All rights reserved.
SF-36 is a registered trademark of Medical Outcomes Trust.
(IQOLA SF-36v2 Standard, India [Kannada])
9. ಈ ಕಲ್ಸಿ ವೃತ್ತಿಯುದ್ದೆ ಎದುರಿಸುವ ಕೋರ್ತಿ ಕಣ್ಣಿಗೆ ಸಾಮಕ್ಷಿಕ ಸ್ಥಳದಲ್ಲೇ ಕೂಡಿದರೆ ಕಣ್ಣಿಗಿಗೆ ಆರೋಗ್ಯ ಕೂಟ ಕುಟುಂಬ ಮೂಲಕ ಕೆಲಸಿದರು, ಕಣ್ಣಿಗೆ ಕೂಡಿದರೆ ಕಣ್ಣಿಗೆ ಆರೋಗ್ಯ ಸಾಮಕ್ಷಿಕ ಸ್ಥಳದಲ್ಲೇ ಕೂಡಿದರು. ಕಣ್ಣಿಗೆ ಕೂಡಿದರೆ ಕಣ್ಣಿಗೆ ಆರೋಗ್ಯ ಕೂಟ ಕುಟುಂಬಕ್ಕೆ ಆ ವೋಟನೆ

<table>
<thead>
<tr>
<th>ವಿಷಯ</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10. ಉತ್ತಮ ಅಧ್ಯಯನ ಮತ್ತು ನಿರ್ಧರಿಸಿದ ಪ್ರಮಾಣಗಳು ಮತ್ತು ಮಾನಸಿಕ ವಿಶಾಲ ವಿಶ್ಲೇಷಣೆಯನ್ನು ಮೇರೆದಿದ್ದರು, ಕಣ್ಣಿಗೆ ಕೂಡಿದರೆ ಕಣ್ಣಿಗೆ ಆರೋಗ್ಯ ಕೂಟ ಕುಟುಂಬ ಕೂಡಿದರು (ಪ್ರಮಾಣಗಳಿಗೆ ಮಾನಸಿಕ ವಿಶಾಲ ವಿಶ್ಲೇಷಣೆಯನ್ನು, ಮತ್ತು ವಿಶ್ಲೇಷಣೆಯನ್ನು, ವೋಟನೆ)

<table>
<thead>
<tr>
<th>ವಿಷಯ</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ಕಣ್ಣಿಗೆ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
11. ನಿಮ್ಮ ಹೃದಯದವರ್ಧನೆ, ಹೃದಯದ ಅರ್ಹಾರೆ ಎಳೆ ವಿಧಾನವಿದೆ? 

- ಹಾಗೆ ಕರೆಯಬೇಕೆಂದರೆ 
  ನಿಶ್ಚಿತಂದರಿಂದ ಹೃದಯದವರ್ಧನೆ...........□ 1  □  2 □ 3 □ 4 □ 5

- ಹಾಗೆ ಹೃದಯದವರ್ಧನೆ, ಅನುಭವಗಳಿಗೆ 
  ಕೆಲಸುವಿದೆ...........□ 1  □  2 □ 3 □ 4 □ 5

- ಹಾಗೆ ಹೃದಯದವರ್ಧನೆ, ಹಾಗೆ 
  ನಿಶ್ಚಿತಂದರಿಂದದಿಕ್ಕಿದೆ...........□ 1  □  2 □ 3 □ 4 □ 5

- ಹಾಗೆ ಹೃದಯದವರ್ಧನೆ 
  ಪ್ರತ್ಯೇಕಿಸುವಿದೆ...........□ 1  □  2 □ 3 □ 4 □ 5

ಆ ಹೃದಯದವರ್ಧನೆ, ನಿಶ್ಚಿತಂದರಿಂದ ಹೃದಯದವರ್ಧನೆಯು ಎಳೆ ವಿಧಾನವಿದೆ!
Appendix III: G
Tool Licensure

LICENSE AGREEMENT
License Number: F1-072606-27456

This License Agreement is entered into, by, and between QualityMetric Incorporated (the "Licensor"), 640 George Washington Highway, Lincoln, RI 02965 and Manipal Academy of Higher Education (the "Licensee"), M. Naveenath, Assistant Professor, Manipal College of Nursing, Manipal Academy of Higher Education, Manipal, Udipi District, Karnataka State, India. Pincode: 576104.

Licensor owns or has the exclusive commercial rights to the survey(s) named below. The Licensor is engaged in the business of licensing the rights to use the survey(s), including survey items and responses, scoring algorithms, and normative data (the "Intellectual Property") to organizations wishing to use the Intellectual Property either in conjunction with projects or studies or as part of a product or service offering.

Upon payment of the fees described in the sections below captioned "License Fee" and "Payment Term", this agreement will authorize Licensee to reproduce the survey(s) in the languages indicated below, perform data collection, perform data entry, use the scoring algorithm and normative data published in the manuals, in connection with the study indicated below. Licensor understands Licensee may publish the results for the study indicated below.

Licensee is the only licensed user under this License Agreement, of the survey(s) indicated below (the "Licensed Survey(s)"") in the language(s) indicated below. Licensee may administer an unlimited amount of survey administrations from August 17, 2006 through August 17, 2007 using any language combination of the survey(s) listed below.

• SF-36v2™ Health Surveys
  • India (English) – Standard Recall
  • India (Kannada) – Standard Recall

This license cannot be assigned or transferred, nor can it be used by the Licensee to obtain data to be used in studies other than "A study of the factors influencing drug compliance among population with chronic diseases in selected areas of Udipi district".

This agreement, including the attachment(s), contains the entire understanding of the parties with respect to the subject matter contained herein, and supersedes all prior written or oral communications. This agreement may not be modified or amended except by an instrument in writing signed by both parties.

Trademark and Copyright Reproduction
Licensee agrees to reproduce the appropriate copyright and trademark symbols on all written or displayed versions of the Licensed Survey(s) and/or the results attributed to the Licensed Survey(s), as indicated in the footer of the licensed surveys distributed by QualityMetric Incorporated.

Records and Certification of Statements
Licensee shall maintain accurate records containing information sufficient to verify the completeness and accuracy of the number of survey administrations completed each year. Licensor shall have the right, on reasonable advance notice to the Licensee, during usual business hours, to examine such records for the sole purpose of verifying the completeness and accuracy of the number of survey administrations completed by the Licensor and reasonably acceptable to the Licensee. In the event that such examination shall disclose the survey administration exceeds the maximum number of survey administrations allowed to the Licensee, the Licensee shall immediately pay the Licensor an amount equal to such understated amount and Licensee shall reimburse Licensor for its costs and

December 11, 2006

Customer Initials: [signature] Date Signed: [signature]
LICENSE AGREEMENT
License Number: F1-072606-27456

expenses incurred in conducting, or having conducted, such examination.

Proprietary Rights
The Intellectual Property and any and all copyrights or rights under the trade secret laws of any jurisdiction shall be
and remain at all times the property of the Licensor. The Licensee shall have no rights, title, or interest in the
Intellectual Property except as expressly provided in this Agreement.

Confidentiality
The Licensee acknowledges that the Intellectual Property is a valued asset of the Licensor, that the Intellectual
Property is of great commercial value to the Licensor, and that the value of the Intellectual Property would be
significantly impaired by the unauthorized distribution or use of the Intellectual Property. The Licensee shall protect
the Intellectual Property from unauthorized use by its employees, agents and customers and shall limit the use to
the permission granted to Licensee by this Agreement.

Disclaimer of Warranty
The Licensee understands and acknowledges that a complex and sophisticated product such as the Intellectual
Property is inherently subject to undiscovered defects. The Licensor cannot and does not represent or warrant to
the Licensee that the Intellectual Property is free from such defects, that operation of the Intellectual Property will
be uninterrupted or error-free, or that its results will be effective or suitable with respect to any particular
application. Furthermore, the Licensor does not represent or warrant that the Intellectual Property is capable of
industrial realization or commercial exploitation, the risks of which are being assumed solely by the Licensee. THE
INTELLECTUAL PROPERTY IS LICENSED AS-IS, AND THE LICENSOR DISCLAIMS ANY REPRESENTATIONS OR
WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY REPRESENTATIONS OR
WARRANTIES AS TO MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, RESPECTING ANY OF THE
INTELLECTUAL PROPERTY OR ANY OTHER MATTER RELATED TO THIS AGREEMENT.

Term and Termination
This License Agreement shall be effective from August 17, 2006, the date the Licensee will start reproducing the
Licensed Survey. This License Agreement shall terminate on August 17, 2007, the date the Licensee will score the
last Licensed Survey.

Licensor may terminate this Agreement in the event of a material breach of its terms by Licensee or any of its
agents by written notice delivered at least fifteen (15) days prior to the effective date of the termination.

License Fee
This License ("the License") is royalty free. This License is limited to the number of survey administrations in the
languages indicated on the first page of this License.

Administration Fee
The administration fee for the licensed surveys ("the License") is $100.00.
This License is limited to the languages indicated on the first page of this License.

Payment Terms
Licensee shall pay $100.00 upon execution of this License Agreement, per the enclosed invoice.

December 11, 2006 Customer Initials: M.M. Date Signed: 19.12.06
LICENSE AGREEMENT
License Number: F1-072606-27456

Scoring Manuals
Licensee is required to have purchased or purchase the manuals indicated below for the Licensed Survey(s) indicated on the first page of this License.

- How to Score Version 2 of SF-36® Health Survey

Other Services
In addition to the rights described above, Licensee may access Licensor’s Online Scoring Service for an additional fee.

EXECUTED, as of the date set forth in the paragraph captioned Terms and Termination, by the duly authorized representatives as set forth below. By Executing this License Agreement, the undersigned Licensee represents that it is an organization that will only use the Licensed Survey(s) in the languages indicated on the first page and according to the terms of this License to obtain data for unfunded scholarly research.

Manipal Academy of Higher Education
M. Navaneetha, Assistant Professor
Manipal College of Nursing
Manipal, Udupi District
Karnataka State
India

Signature: M. Navaneetha
Name: M. Navaneetha
Title: Assistant Professor
Date: 19.12.06

December 11, 2006
Customer Initials: M.J. Date Signed: 19.12.06
Page 3 of 3
Appendix IV:A
Udupi district map
Appendix IV:B  Marne map
Appendix IV: C Athrady map
Appendix IV:E Map of Malpe Primary Health Centre Area
Appendix V
Publication

The pilot study is published
Navaneetha M, Bairy K L, Udupa N. Factors influencing drug compliance among population with chronic diseases in selected areas of Udupi district-A Pilot study. Indian Journal of Hospital Pharmacy.2008; XLV: 32-34
Hypertension

Hypertension is an increase of blood pressure above 140/90 mm of Hg. It affects 1 billion people worldwide.

Risk factors

- Family history of hypertension
- Overweight
- Alcohol consumption
- Physical inactivity
- Stress
- Smoking
- Increased intake of salt

Types

- Essential or primary is when no cause is identified
- Secondary is when there is a cause like renal, vascular, hormonal changes, pregnancy, etc.
Management
- Physical Activity-brisk walk
- Healthy diet- Eat fruits, vegetables, grains, fish, reduce salt intake
- Weight reduction-maintain adequate weight
- Weight=Height-100
- Avoid smoking, alcohol consumption

Drug Action

Normal Blood Pressure

Genetic and environmental factors

Increased Blood Pressure

Drugs, Treatment

Increased heart rate - Vasoconstriction - Fluid retention

Dangers of hypertension
- Stroke
- Heart attack
- Congestive heart failure
- Kidney damage
- Impaired vision
Diabetes Mellitus

• It is the body’s inability to breakdown carbohydrates, fats and protein leading to high blood glucose level
• Cells are not able to make use of the glucose.
• It affects above 200 million people worldwide.

Types

• Type-1: Results from the body’s failure to produce insulin. Presently almost all persons with type 1 diabetes must take insulin injections.
• Type-2: Results from insulin resistance, a condition in which cells fail to use insulin properly, sometimes combined with relative insulin deficiency.
• Gestational Diabetes: Pregnant women who have never had diabetes before but who have high blood sugar (glucose) levels during pregnancy are said to have gestational diabetes.

Clinical manifestation

• Onset is abrupt in type-1 and slowly in type-2
• Polyuria-Excessive urine,
• Polydipsia-Excessive thirst,
• Polyphagia-Excessive eating

Management

• Diet- Dietary control with calorie restriction of carbohydrates and saturated fats
• To maintain ideal body weight
• Exercise-regularly planned, to increase use of carbohydrates and enhance insulin action
Drug Action

Destruction of cells in pancreas

Failure to produce insulin and/or insulin resistance

Insulin or oral anti diabetic drugs

Elevated Blood glucose levels

Dangers

- Eye problems-retinal damage
- Hand and legs become less sensitive to heat and cold
- Kidney damage
- Heart problems

Hyperglycemia

- It is an increase in sugar levels
- The signs and symptoms are: Weight loss, Fatigue, Polyuria, Polydipsia, Polyphagia Blurred vision
Tips

- Know your B.P/sugar levels. Have it checked regularly
- Know what your weight should be. Keep it at that level.
- Do not use too much salt. 5-7g/day
- Do not eat sugar containing foods
- Do not smoke or use tobacco products
- Follow doctor’s advice. Do not become your own doctor.
- Take medicines regularly. Do not stop until doctor advises.
- Take all the medicines given at proper time.
- Do exercise. Walk 4-5 km/day both morning and evening, jogging is not needed
- Discuss your disease with family members, spouse and close friends
- Visit your doctor when you have cough, cold, fever, diarrhea, vomiting, etc. Don’t use drugs from pharmacy.
- Live a normal life
ವೆಲೆ ಕೊಡುವವರು 140/90 mm of Hg. ಎರಡನೇ ಅಂಕವನ್ನು ಎಡಕ್ಕೆ ನಮೂನೆ ಅದರ ಪ್ರತ್ಯೇಕ ವರ್ಗದಲ್ಲೂ 1 ಅಂಕವನ್ನು ಮಾಡುವ ನಮೂನೆ ಅಗತ್ಯ.

ಭಾರತೀಯ ಅಧ್ಯಯನ

- ಪ್ರತ್ಯೇಕವಾಗಿ ಅಡುಗೆ ಸಮತ್ವತ್ತದಲ್ಲಿ.
- ಅವರನ್ನು ಉತ್ತಮ
- ಪ್ರತ್ಯೇಕ ಸ್ವಭಾವ
- ಭೂಮಿಯ ಪ್ರತ್ಯೇಕ
- ಅಡುಗೆ ಸಮತ್ವತ್ತದಲ್ಲಿ.
- ಅಡಿ
- ಪ್ರತ್ಯೇಕ ಸ್ವಭಾವ
- ನೀಡಿದ ಪ್ರತ್ಯೇಕ ರೂಪದಲ್ಲಿ.

ಕಾರ್ಯ

- ಪ್ರತ್ಯೇಕವಾಗಿ ಅಡುಗೆ ಸಮತ್ವತ್ತದಲ್ಲಿ.
- ಪ್ರತ್ಯೇಕವಾಗಿ ಅಡುಗೆ ಸಮತ್ವತ್ತದಲ್ಲಿ.
ಅನೂವಣ ಪಾತ್ರದಲ್ಲಿ

❖ ಮೂಲವಾಗಿ ಹೃದಯಕ್ಕೆ ಗೊಂಡು ನೀರನ್ನು
❖ ಅರ್ಧಮೂಲದಿ ಹೃದಯ ಪಕ್ಷದಲ್ಲಿ ಅಥವಾ ಅನಿಯಂತ್ಯವಾಗಿ ಗೊಂಡು ನೀರನ್ನು,
ಆಧ್ಯಯನಗಳು, ನಿಸರ್ಗವಾಗಿ ಸೇರಿಕೊಂಡು, ಮೂಲವಾಗಿ ಹೃದಯಕ್ಕೆ ಗೊಂಡು ನೀರನ್ನು.
❖ ಹೃದಯರೇಕೆ – ಹೃದಯವು ಅನಿಯಂತ್ಯವಾಗಿ ಗೊಂಡು ನೀರನ್ನು.
❖ ಹೃದಯ ಅಷ್ಟು – 100
❖ ವಿಧೇಯವಾಗಿ, ನಿಸರ್ಗವಾಗಿ ಸೇರಿಕೊಂಡು,

ಶಿಕ್ಷಣಗಾರ ಬೆಳೆಗಾಗಿ

ಎಲ್ಲ ಅನೂವಣಗಳು

❖ ಎಲ್ಲ ಅನೂವಣಗಳು
❖ ಅವೆರೆಯ ನೀರನ್ನು
❖ ಹೃದಯದ ಪಕ್ಷದಲ್ಲಿ
❖ ಹೃದಯದ ಪಕ್ಷದಲ್ಲಿ
❖ ಹೃದಯದ ಪಕ್ಷದಲ್ಲಿ
❖ ಹೃದಯದ ಪಕ್ಷದಲ್ಲಿ

ಅಜ್ಞಾತ ದುರ್ಬಲತೆಗಾರ ಅಸ್ತ್ರಯುಕ್ತ

❖ ಅಜ್ಞಾತ ದುರ್ಬಲತೆಗಾರ
❖ ಮುಂದ್ರಾಪರಿಗೆ
❖ ದುರ್ಬಲತೆಯ ದುರ್ಬಲತೆ ದುರ್ಬಲತೆ
❖ ಭವಿಷ್ಯದ ಭವಿಷ್ಯ ಭವಿಷ್ಯ
❖ ಭವಿಷ್ಯದ ಭವಿಷ್ಯ ಭವಿಷ್ಯ
❖ ಭವಿಷ್ಯದ ಭವಿಷ್ಯ ಭವಿಷ್ಯ
మనము

- మనం ఎంపదుల్లో అంశపడడం కావు. దానిని నాభిత్రానికి లభించడానికి సాధనాంతరికం చేసాలి.
- సాధనాంతరికం పదానికి లభించడానికి సాధనాంతరికం చేసాలి.
- అంశపడడం 200 సాధనాంతరికం చేసాలి అని అంశపడడం కావాలి.

మనమును

1. మనాం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. కాను మన పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.
2. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి.
3. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.

ఆధారం వివరణలు

1. మనాం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. కాను మన పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.
2. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి.
3. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.

మనమును రాశాలేని

- మనం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. కాను మన పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.
- యుగానికి లభించడానికి సాధనాంతరికం చేసాలి. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి.
- సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.

మనమును మనమును కోరించండి

- మనం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. కాను మన పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.
- యుగానికి లభించడానికి సాధనాంతరికం చేసాలి. యుగానికి లభించడానికి సాధనాంతరికం చేసాలి.
- సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి. సమాధానం పోధానికి లభించడానికి సాధనాంతరికం చేసాలి.
मात्रेहरु

- स्त्रीलग्न रासायनिक वर्धन
- स्त्रीलग्न रासायनिक वर्धन
- स्त्रीलग्न रासायनिक वर्धन
- स्त्रीलग्न रासायनिक वर्धन
- स्त्रीलग्न रासायनिक वर्धन

प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या - प्रकुपल वटप्रकृति " निविद्या -
ಲಾಭಗಳು

❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ /ದೊಡ್ಡ ಕಂಡುಬರುತ್ತದೆ ಉತ್ತರದ ಯೋಗ್ಯತೆಯ ಕ್ರೌಣಿತವಾಗಿ.
❖ ಸಾನಿ ತನ್ನ ಸಾಗರ್ವಿಕ ನಿರ್ಮಾಣಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಸಾಕ್ಷ್ಯ ಕಂಡುಬರುತ್ತದೆ ಪ್ರತಿಯಾಗಿ ಕ್ರೌಣಿತವಾಗಿ.
❖ ತನ್ನ ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು (೫-೭ ಚ.ಮೀ /ಕ್ಯೂರಿಕ್ಕಿ)
❖ ಸಾಕ್ಷ್ಯವಾದರೆ ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಮಹಿಳೆಯರ ಸಾಗರ್ವಿಕ ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ.
❖ ಸಾಯಾಂಗಳುಗಳಲ್ಲಿ ಒಂದು ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಸಾಯಾಂಗಳುಗಳು ಸಾಧ್ಯವಾದರೆ ಮಹಿಳೆಯರ ಸಾಗರ್ವಿಕ ಮಾಹಿರರಾಗಿ.
❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ.
❖ ಸಾಯಾಂಗಳುಗಳಲ್ಲಿ ಒಂದು ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಸಾಯಾಂಗಳುಗಳು ಸಾಧ್ಯವಾದರೆ ಮಹಿಳೆಯರ ಸಾಗರ್ವಿಕ ಮಾಹಿರರಾಗಿ.
❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ.
❖ ಸಾಯಾಂಗಳುಗಳಲ್ಲಿ ಒಂದು ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಸಾಯಾಂಗಳುಗಳು ಸಾಧ್ಯವಾದರೆ ಮಹಿಳೆಯರ ಸಾಗರ್ವಿಕ ಮಾಹಿರರಾಗಿ.
❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ.
❖ ಸಾಯಾಂಗಳುಗಳಲ್ಲಿ ಒಂದು ವಿನ್ಯಾಸಕ್ಕೆ ಹೊಂದಿದರು.
❖ ಸಾಯಾಂಗಳುಗಳು ಸಾಧ್ಯವಾದರೆ ಮಹಿಳೆಯರ ಸಾಗರ್ವಿಕ ಮಾಹಿರರಾಗಿ.
❖ ಕಮಾನು ಪ್ರೇಕ್ಷು ಸ್ವಾಯತ್ತ ಕಂಡುಬರುತ್ತದೆ.