		Clinical module									
Functional module		(A) Monitoring		(B) Medication management		(C) Lifestyle modification		(D) Complication prevention		(E) Psychosocial care	
(1)	Log	(A1, Recording parameter (A1, Recording the medical parameter (2, L) E	ring ters. M) ing	(B1, Recording insulin injesite. (B1, recording medication side effects	M) used s and	(C1, Recordin activities diets, weight.	_	(D1, Recordin complica related and appointm with doc	tion- status	(E1, Recording mood.	L)
display			• .	72.10		(C)		D2.10		Œ2	• .
(3) education	General on	(A3, Instruct for monitor		(B3, M) Using medication safely effectively.	and	(C3, Incorpora nutritiona managem and phy- activity lifestyle.	al nent sical	(D3, M) Preventir complica	•	(E3, Address psychose issues.	-
(4) feedbac	Personalized k	(A4, Remind to moni		(B4, Reminder recording medication (B4, Reminder take medication (B4, H) Cli	M) to s.	(C4, Reminde eat heal and be ac (C4, M) s manager decision making.	thily tive. Self-	(D4, Reminde quit smo visit doct (D4, Setting targets, target ale	oking, fors. M)	-	
(5)	Communication	decision making. (5, L) General communication, of through social networking, chat for (5, M) Patient-clinician commun support or consultation.				forums, or	websi	tes.	•		

a. The risk was coded as L, M and H. L- low risk, M-mediate risk, H-high risk.

b. Clinical module was coded as A-E; functional module was coded as 1-5; the crossing functions by clinical module and functional module were coded like A1, A2.