



National Black Church Initiative

P.O. Box 65177
Washington, DC 20035
202-744-0184
dcbci2002@yahoo.com
www.naltblackchurch.com

Pre-Test:

1. How old are you?
 - Under 35
 - 35-49
 - 50-59
 - 60-69
 - 70+

2. Why are you interested in this COPD program? (Select as many as apply)
 - To learn more about COPD
 - To get more information about COPD for yourself
 - To get more information about COPD for someone else
 - I'm not interested
 - Other (please specify) _____

3. What kind of disease is COPD?
 - Liver disease
 - Lung disease
 - Kidney disease
 - Heart disease
 - None of these

4. What disease(s) does COPD include?
 - Chronic bronchitis
 - Emphysema
 - All of the above
 - None of these
 - Don't know

5. What are common symptoms of COPD? (Select as many as apply)
 - Coughing
 - Hand tremors
 - Neck spasms
 - Shortness of breath
 - Frequent urination
 - Wheezing
 - None of these
 - Don't know

6. What are common risk factors for COPD? (Select as many as apply)



- Drinking alcohol
- Exercising
- Smoking
- None of these

7. There is a cure for COPD. True False Don't know

8. Nine out of 10 COPD-related deaths are from smoking. True False Don't know

9. COPD gets worse over time. True False Don't know

10. Approximately 10 million Americans have COPD. True False Don't know

11. Would you like to learn more about COPD?

- Yes
- No
- Not sure

12. Do you plan on attending the COPD Health Education Seminars?

- Yes
- No
- Not sure

#