

BE PREPARED GUIDE

Could there be more to your ongoing respiratory symptoms? Start the conversation about bronchiectasis.

Bronchiectasis (brong-kee-ek-tuh-suhs), or BE, is a disease where your airways become permanently widened, making it harder for you to clear mucus and bacteria. It's possible that you have bronchiectasis if you're on treatment for a lung disease but still struggling with:



Heavy mucus



Chronic cough



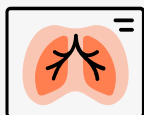
Multiple flares



Repeated lung infections

Could it be bronchiectasis? Ask yourself:

	YES	NO
1. Do you have a history of other lung conditions?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you experience a lot of mucus, or is your mucus yellow, green, or bloody?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you noticed your respiratory symptoms getting worse over time, despite treatment?	<input type="checkbox"/>	<input type="checkbox"/>
4. In the past year, have you had 2 or more lung infections or flares that needed antibiotics, or have you been given antibiotics several times for your lung symptoms?	<input type="checkbox"/>	<input type="checkbox"/>
5. Were you diagnosed with COPD but never smoked?	<input type="checkbox"/>	<input type="checkbox"/>



Take your answers to your doctor to start a discussion about whether you may have bronchiectasis.

Ask about getting a CT scan today.

A CT scan is a test used to diagnose BE because it can reveal widening of the bronchi, a sign that other tests like an X-ray might miss. Whether you're talking with your pulmonologist or primary care doctor about getting a CT scan, the questions below can help start the conversation:

1. Why are my symptoms not getting better despite the treatment I take for my existing respiratory condition? (Check all that apply.)

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Cough that won't go away | <input type="checkbox"/> Heavy mucus |
| <input type="checkbox"/> Repeated lung infections | <input type="checkbox"/> Fatigue |
| <input type="checkbox"/> Anything else? | |

2. Should I be concerned that I continue to have flare-ups?

3. I have seen a change in the mucus produced when I cough. Should I be concerned? (For example: if you've had more mucus than usual, your mucus is a yellow or green color, or there is blood in the mucus.)

4. What can I do if my symptoms are impacting my day-to-day activities? (For example: trouble sleeping, trouble walking up and down stairs, unable to do activities you once did, missing work.)

5. As someone with COPD who is a non-smoker (if that applies to you), could my symptoms be caused by something else, like bronchiectasis?

6. Are there other tests, like a CT scan, that I should get to determine if I have bronchiectasis?



Bronchiectasis is treated differently than other lung conditions. Ask your pulmonologist about a CT scan to determine if you have bronchiectasis. The sooner bronchiectasis is identified, the sooner your doctor can create a treatment plan to help reduce the risk of worsening lung damage.

Learn more at SuspectBronchiectasis.com

CT=computed tomography.

These are sample questions to help get the conversation started between you and your doctor. This is not, nor is it intended to be, a medical evaluation, examination, advice, consultation, diagnosis, or treatment. Always consult your doctor for all medical- and health-related matters.