1) Did you learn anything about breast health today that you did not know before? Please select only one answer.
- [ ] Yes
- [ ] No
- [ ] Not Sure

2) Will you share the breast health information you received today with a family member or friend? Please select only one answer.
- [ ] Yes
- [ ] No
- [ ] Not Sure

3) What are the two most common things that increase your chances of getting breast cancer?
1. ________________________________
2. ________________________________

4) Please name at least two differences in how breast cancer affects Black and African American women as compared to white women?
1. ________________________________
2. ________________________________
3. ________________________________

5) At what age should women at average risk for breast cancer begin to get clinical breast exams? Please select only one answer.
- [ ] 20 years old
- [ ] 30 years old
- [ ] 40 years old
- [ ] 65 years old

6) At what age should women at average risk for breast cancer begin to get annual mammograms? Please select only one answer.
- [ ] 20 years old
- [ ] 30 years old
- [ ] 40 years old
- [ ] 65 years old

7) If you are a woman, will you talk to your doctor about what breast cancer screening tests are right for you? Please select only one answer.
- [ ] Yes
- [ ] No
- [ ] Not Sure
- [ ] Not a woman

7a) If you are a woman, do you plan to schedule a breast cancer screening tests in the future? Please select only one answer.
- [ ] Yes, a clinical breast exam
- [ ] Yes, a mammogram
- [ ] Yes, both a clinical breast exam and a mammogram
- [ ] Yes, but not sure which type
- [ ] No, I do not plan to schedule a screening
- [ ] Not a woman

*Please, continue on page 2.*
8) Will you visit a health care provider if you notice any of the following changes in your breasts?
   • Lump, hard knot, or thickening inside the breast or underarm area
   • Swelling, warmth, redness or darkening of the breast
   • Change in size or shape of the breast
   • Dimpling or puckering of the skin
   • Itchy, scaly sore or rash on the nipple
   • Pulling in of your nipple or other parts of the breast
   • Nipple discharge that starts suddenly
   • New pain in one spot that doesn’t go away

Please select only one answer.

☐ Yes
☐ No
☐ Not Sure

9) What steps do you plan to take in the future that may reduce your risk of breast cancer?
   Please check all that apply.

☐ Maintain or add exercise into my routine
☐ Achieve or maintain a healthy weight
☐ Avoid or limit alcohol
☐ Breastfeed future babies
☐ Avoid or limit menopausal hormonal medications

10) How do you describe your race/ethnicity?
    ☐ Black or African American
    ☐ Caribbean
    ☐ African
    ☐ Black Hispanic
    ☐ Other:___________________________

11) What is your gender? Please select only one answer.
    ☐ Female
    ☐ Male
    ☐ Other:___________________________

12) What is your age? Please select only one answer.
    ☐ Under 20 years old
    ☐ 20-39 years old
    ☐ 40-49 years old
    ☐ 50-64 years old
    ☐ 65 years or older

13) Do you have health insurance? Please select only one answer.
    ☐ Yes
    ☐ No
    ☐ Not Sure

Thank you for your participation!
Remember to sign up for your screening reminder at komen.org/reminder.