

# Informed Consent

Did the subject sign the COPDGene Informed Consent?  Yes  
 No

Did the subject do the verbal informed consent for the Pre-Visit Questionnaire?  Yes  
 No

Did the subject give verbal informed consent for the phone only questionnaire?  Yes  
 No

If no, this subject is not consented. Stop the visit. Have the subject sign the informed consent form.

If yes, on what date did the subject consent?

\_\_\_\_\_ (mm/dd/yyyy)

Did you verify the subject's identity with drivers license or identification card?  Driver's license  
 Identification card

Did you verify the subject's social security number?  Yes  
 No

Did you discuss LFU and remind the subject about the 6 month surveys? Also be sure to try to obtain an email address on all COPDGene subjects for completion of the survey via the web (by the subject).  Yes  
 No

Did you obtain phone number and permanent address?  Yes  
 No

Did you obtain two secondary contacts: phone number, email, address?  Yes  
 No

## Other Studies: Previous or Concurrent

Is the subject currently participating in any other observational studies (without medication provided)?  Yes  
 No

If so, what is the name(s) of the study

\_\_\_\_\_

Is the subject currently participating in any studies where they have been provided with medications for COPD?  Yes  
 No

If yes, what is the name(s) of the study

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