



## What you need to know about...

### Diagnosing Chronic Obstructive Pulmonary Disease (COPD)

#### Do you think you might have COPD?

If yes, a clinical diagnosis of COPD should be considered if you experience shortness of breath, a chronic cough or sputum production, and/or have a history of smoking, exposure to occupational dust and chemicals, or smoke from fuels used for in-home cooking and heating.

#### How is COPD diagnosed?

Your physician will begin by obtaining a **detailed medical history**. This may include:

- Pattern of symptom development and their impact on your life
- Exposure to risk factors such as smoking and occupational exposures
- Family history of COPD or other chronic respiratory diseases
- Past medical history, including asthma, childhood respiratory infections, past respiratory hospitalizations, and current medical problems
- Possibility for reducing risk factors such as smoking cessation

Your physician will perform a **physical examination** to assess for:

- Breathing pattern and respiratory rate
- Ankle or lower leg swelling
- Breath (lung) sounds
- Heart sounds
- Bluish coloring of the lips or nail beds



Your physician will also order **Spirometry with reversibility testing**—a pulmonary function test (PFT) that should be performed on all individuals who may have COPD. This test measures airflow limitation and is necessary to make a confident diagnosis of COPD.



**Additional tests** your physician may order:

- Chest X-ray



- Computerized Tomography (CT scan)



- Full pulmonary function test with DLCO



- Arterial Blood Gas (ABG)
- Alpha-1 Antitrypsin Deficiency Screening