

Know the 10 Signs of Alzheimer’s Disease: Evaluation

Thank you for participating in the 10 Signs of Alzheimer’s Disease program. As a participant, we value and appreciate your feedback. Please take a moment to answer the following questions.

	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
This program increased my understanding of the 10 signs of Alzheimer’s disease.					
This program taught me how to recognize the difference between typical age-related cognitive decline and disease.					
This program taught me what to do if I recognize the signs of Alzheimer’s disease in myself or a loved one.					
This program increased my understanding of the process involved in getting a diagnosis.					
This program helped me to understand the benefits of early detection of Alzheimer’s disease.					

Please check the signs of Alzheimer’s disease that you were already aware of *before the program*, and those that you are aware of now *after the program*.

	Before	After
Memory loss that disrupts daily life		
Challenges in planning or solving problems		
Difficulty completing familiar tasks		
Confusion with time or place		
Trouble understanding visual images and spatial relationships		
New problems with words in speaking or writing		
Misplacing things and losing the ability to retrace steps		
Decreased or poor judgement		
Withdrawal from work or social activities		
Changes in mood and personality		

Please tell us a little about yourself.

Age:	Gender:	Racial Identity:	Ethnic Identity:
<input type="checkbox"/> 0-18	<input type="checkbox"/> Female	<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Latino/Hispanic
<input type="checkbox"/> 19-34	<input type="checkbox"/> Male	<input type="checkbox"/> Asian	<input type="checkbox"/> Not Latino/Hispanic
<input type="checkbox"/> 35-44		<input type="checkbox"/> Black	
<input type="checkbox"/> 45-54		<input type="checkbox"/> Native Hawaiian/Pacific Islander	
<input type="checkbox"/> 55-64		<input type="checkbox"/> White	
<input type="checkbox"/> 65-74		<input type="checkbox"/> Mixed Race (more than 1 race)	
<input type="checkbox"/> 75-84		Other _____	
<input type="checkbox"/> 85+			

Please share any other comments you may have about this program on the back of this page.

Thank you!