

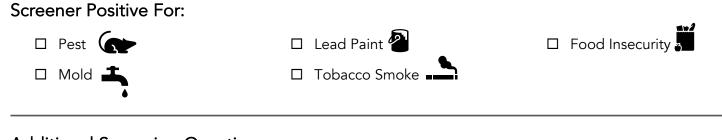
Pediatric Social & Environmental Health Screener

What is your child's zip code(s)?	
What type of housing does your child live in?	
Owned apartment or house	□ Shelter
Rented apartment or house	□ Homeless
□ Rented room(s)	□ Other:
□ Group home	Prefer not to answer

Thinking of where your child lives, are there any of these **common problems in the home?**

	Mice or Rats	Yes	No	ļ	Unsure
	Cockroaches	Yes	No	ļ	Unsure
±,	Water Leaks/Damage or Mold	Yes	No	No Unsure	
P	Paint Chipping/Peeling or Renovations	Yes	No	l	Unsure
P	Was your house/building built befo r	re 1978 ?	Yes	No	Unsure
<u> </u>	Does anyone in the home smoke or	vape?	Yes	No	Unsure
ŭ.	Are you ever worried that your food out before you are able to buy more		Yes	No	Unsure
	Does trouble with transportation even difficult for you to get to appointment meetings, work, or get things needed daily living?	its,	Yes	No	Unsure

Provider Use Only



Additional Screening Questions

Positive Pest How often do you see mice and/or cockroaches in your home? a. Daily b. Weekly c. Monthly d. Yearly e. Refused
Where in the home do you see mice and/or cockroaches? a. Kitchen b. Child's Bedroom c. Other d. Refused
Positive Pest, Water Leaks and/or Mold Do you have maintenance issues in your home such as cracks, or holes in the walls? a. Yes. b. No c. Unsure d. Refused Do you have maintenance issues in your home such as water leaks or broken pipes? a. Yes. b. No c. Unsure d. Refused Renters: If yes, have you filed a maintenance complaint with your landlord? a. Yes. b. No c. Unsure d. Refused
Positive Paint Chipping/Renovations or <1978
p unseling red on what we talked about today, your child may benefit from resources on reducing exposure to

(insert names of positive screens). The resources we have include helpful tips on how to reduce exposure around the home, local community organizations that help families deal with these issues, and links to more information.

Which resources would you like today?



🗆 Lead Paint 省	
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Tobacco Smoke

