Child’s Name:

Child’s Age:

**Childhood Lead Risk Assesment Questionnaire Only 6 Monts to 6 Years Old**

1. Is this child eligible for or enrolled in Medicaid, Head Start, All Kids or WIC?

Yes No Don’t Know

1. Does this child have a sibling with a blood lead level of 10mcg/dL or higher?

Yes No Don’t Know

1. Does this child live in or regularly visit a home built before 1978?

Yes No Don’t Know

1. In the past year, has this child been exposed to repairs, repainting or renovations of a home built before 1978?

Yes No Don’t Know

1. Is this child a refugee or an adoptee from any foreign country?

Yes No Don’t Know

1. Has this Child ever been to Mexico, Central or South America, Asia countries (i.e., China or India), or any country where exposure to lead from certain items could have occurred (for example, cosmetics, home remedies, folk medicines or glazed pottery?)

Yes No Don’t Know

1. Does this child live with someone who has a job or a hobby that may involve lead (i.e., Jewelry making, building, renovations or repair, bridge construction, plumbing, furniture refinishing or work with automobile batteries or radiators, lead solders, leaded glasses, lead shots, bullets, or lead fishing sinkers?)

Yes No Don’t Know

1. At any time has this child lived near a factory where lead is used (for example, a lead smelter or paint factory?)

Yes No Don’t Know

1. Does this child reside in a high-risk Zip code area?

Yes No Don’t Know

**Childhood TB Risk Assesment Questionnaire 6 Months to 21 Years**

1. Had contact with a person with confirmed or suspected infectious tuberculosis?

Yes No Don’t Know

1. Had radiographic or clinical finding suggesting tuberculosis?

Yes No Don’t Know

1. Immigrated from endemic countries (Asia, Middle East, Africa or Latin America)?

Yes No Don’t Know

1. Travel history to endemic countries and/or significant contact with indigenous person from such countries?

Yes No Don’t Know

1. Infected with HIV or living in household with HIV infected person(s)?

Yes No Don’t Know

1. Exposed to following: homeless, nursing home residents, institutionalized adolescents or adults, users of illicit drugs, incarcerated adolescents or adults, migrant farm workers?

Yes No Don’t Know