



Pre-Visit Questionnaire Three Year Visit

What would you like to talk about today?

Do you have any concerns, questions, or problems that you would like to discuss today? _____

Questions about your child.

Have any of your child's relatives developed new medical problems since your last visit?
 Yes No Unsure If yes, please explain: _____

Hearing
 Do you have any concerns about how your child speaks? Yes No Unsure
 Do you have any concerns about how your child hears? Yes No Unsure

LEAD
 Does your child have a sibling or playmate that has had lead poisoning? Yes No Unsure
 Does your child live in or regularly visit a house or child care facility built before 1978 that is being or has recently been (within the last 6 months) renovated or remodeled? Yes No Unsure
 Does your child live in or regularly visit a house or child care facility built before 1950? Yes No Unsure

Tuberculosis
 Was your child born in a country at high risk for tuberculosis (countries other than the United States, Canada, Australia, New Zealand, or Western Europe)? Yes No Unsure
 Has your child traveled (had contact with resident populations) for longer than 1 week to a country at high risk for tuberculosis? Yes No Unsure
 Has a family member or contact had tuberculosis or a positive tuberculin skin test? Yes No Unsure
 Is your child infected with HIV? Yes No Unsure

Anemia Does your child's diet include iron-rich foods such as meat, eggs, iron-fortified cereals, or beans? Yes No Unsure

Have there been any major changes in your family lately? No Yes
 Move Separation Divorce Death in the family Job change Other _____
 Does your child live with anyone who uses tobacco or spend time in any place where people smoke? Yes No
 Does your child have any special health care needs? Yes No If yes, please explain: _____

List your child's current medications and doses: Include any herbs, vitamins or supplements: _____

What is the best way to contact you (please circle): home phone / cell phone / work phone: _____
 Would you like to share your email address? _____