



LEAD / TB RISK ASSESSMENT

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Lead Risk Assessment

(Check all that apply)

- Home or daycare built before 1970? Before 1950? Has chipping / peeling paint?
- Child eats dirt, clay, or paint chips? Likes to suck on windowsills or blinds?
- Child's friends, playmates, or neighbors have high lead levels?
- Parent's job / hobby involves lead exposure? Folk remedy with lead (Azarcon)?
- None of the above

TB Risk Assessment

(Check if your child has close contact with an adult who . . .)

- Is homeless or living in a shelter?
- Is living or working in a prison?
- Is living or working in a nursing home?
- Has TB, HIV, AIDS, or abuses drugs?
- Immigrated from Central or S. America, Haiti, Russia, E. Europe, India, or SE Asia?
- Is a healthcare worker? If yes, are they screened regularly?
- None of the above