

Pediatric Environmental History (0-18 Years of Age)

The Screening Environmental History

For all of the questions below, most are often asked about the child's primary residence. Although some questions may specify certain locations, one should always consider all places where the child spends time, such as daycare centers, schools, and relative's houses.

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| Where does your child live and spend most of his/her time? | _____ |
| What are the age, condition, and location of your home? | _____ |
| Does anyone in the family smoke? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Do you have a carbon monoxide detector? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Do you have any indoor furry pets? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| What type of heating/air system does your home have? <input type="checkbox"/> Radiator <input type="checkbox"/> Forced air <input type="checkbox"/> Gas stove <input type="checkbox"/> Wood stove <input type="checkbox"/> Other _____ | |
| What is the source of your drinking water? <input type="checkbox"/> Well water <input type="checkbox"/> City water <input type="checkbox"/> Bottled water | |
| Is your child protected from excessive sun exposure? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Is your child exposed to any toxic chemicals of which you are aware? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| What are the occupations of all adults in the household? | _____ |
| Have you tested your home for radon? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| Does your child watch TV, or use a computer or video game system more than two hours a day? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure |
| How many times a week does your child have unstructured, free play outside for at least 60 minutes? | _____ |
| Do you have any other questions or concerns about your child's home environment or symptoms that may be a result of his or her environment? | _____ |

Follow up/Notes

The Screening Environmental History is taken in part from the following sources:

- American Academy of Pediatrics Committee on Environmental Health. Pediatric Environmental Health 2nd ed. Etzel RA, Balk SJ, Eds. Elk Grove Village, IL: American Academy of Pediatrics; 2003. Chapter 4: How to Take an Environmental History.
- Balk SJ. The environmental history: asking the right questions. *Contemp Pediatr*. 1996;13:19-36.
- Frank A, Balk S, Carter W, et al. Case Studies in Environmental Medicine. Agency for Toxic Substances and Disease Registry, Atlanta GA. 1992, rev. 2000. Taking an Exposure History.

This screening environmental history is designed to capture most of the common environmental exposures to children. The screening history can be administered regularly during well-child exams as well as to assess whether an environmental exposure plays a role in a child's symptoms. If a positive response is given to one or more of the screening questions, the primary care provider can consider asking questions on the topic provided in the Additional Categories and Questions to Supplement the Screening Environmental History, accessible at <http://www.neefusa.org/pdf/PEHhistory.pdf>.