



For office use only
 Medical Practice ID: 7242RM

Reach Out and Read Parent Feedback Survey

- 1) How old is the child who had a check-up today? *Check one answer.*
 6-12 months 1-2 years 3-5 years
- 2) Did the child receive a book during today's visit? *Check one answer.*
 Yes No
- 3) Is this the first time this child has received a book at the doctor's office? *Check one answer.*
 Yes No I don't know
- 4) Did the medical provider talk to you about reading or looking at books with the child?
 Yes No
- 5) About how often do you read or look at books with this child? *Check one answer.*
 Never Several times a year Several times a month Once a week Several times a week Every day

6) Do you think you will try any of these reading activities with this child?

Check one answer for each activity.

	Yes, I will try this.	Maybe, I might try this.	No, I don't think so.	I already do this.
a. Let the child turn the pages.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Make up stories about what is happening in the pictures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Ask the child to tell you what is happening in the pictures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Help the child to identify shapes, colors, numbers, letters, or things in the pictures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Read to the child at least 30 minutes every day – for example: during meals or baths, before naps or bedtime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Take the child to the library.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7) What type of health insurance does this child have? *Check one answer.*
 None Medicaid TRICARE/Military Private Insurance I don't know

8) What is the highest level of education or schooling you have completed? *Check one answer.*
 Less than high school High school/GED Some college/vocational training 4-year college degree or higher

Thank you! We appreciate your input!