



Safety Survey
Ages 7 to 9 Years



Name _____ Date _____

Instructions to parents: Please circle the best answer.

Table with 4 columns: Question, Yes, Middle options, No. Contains 20 safety-related questions for children aged 7-9.



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21. Does your child play with darts, bows and arrows, BB guns, cap guns or air rifles?	Frequently	Occasionally	Never
22. Does your child ride a jet ski?	Yes		No
23. Have you taught your child what to do when at home alone?	No	Not sure	Yes
24. Has your child been taught basic first aid and rescue breathing?	No		Yes
25. Does your child babysit younger siblings or other young children?	Yes	Sometimes	No
26. Does your child ever ride in the bed of a pickup?	Often	Sometimes	Never
27. Does your child know how to respond to a dog that turns aggressive?	No	Unsure	Yes

Note: If any of your answers are in the left-hand or middle columns, please pay extra attention to those. They are risk areas that may require a behavior change or special precautions.



Provided by: Oklahoma SAFE KIDS Coalition, a program of the Oklahoma State Department of Health and OU Children’s Physicians (405) 271-5695.

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