

**CRA Exercise 2008 – 09  
Tier Group Screening Form**

**Please answer all 3 questions:**

1. How old are you:
  - 6 months – 2 years old
  - 3 years – 18 years old
  - 19 years – 64 years old
  - 65 years or older
  
2. How is your health? (please check all that apply)
  - Pregnant
  - Medical condition (Asthma; diabetes; heart disease; lung disease; kidney disease; blood disorders; difficulty swallowing because of brain, spinal cord or muscles disease; weak immune system because of disease or medications like steroids or chemotherapy)
  - Health: Not pregnant and no chronic medical conditions.
  
3. Do you live in a household or take care of an infant who is younger than 6 months old?
  - Yes
  - No

Thank you for completing this form.

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**For Clinic Use Only:**

Check only one box. When more than 1 tier group applies, use the highest priority tier group. Example: The following boxes have been checked: “19 – 64 years old”; “pregnant”; and “medical condition”. Use Tier Group 1 because “pregnant” is in a higher Tier Group than “19 – 64 years old” and “medical condition”.

- Tier 1**
  - Pregnant
  - Age 6 months - 2 years
  
- Tier 2**
  - Household contacts of infants < 6 months of age
  - Children 3 – 18 years old **with** a medical condition
  
- Tier 3**
  - Children 3 – 18 years old **and** healthy
  
- Tier 4**
  - Persons 19 – 64 years old **with** a medical condition
  - Persons 65 years and older
  
- Tier 5**
  - Persons 19 – 64 years old **and** healthy