

**SOUTHWEST COMMUNITY HEALTH CENTER
NECESSIDADES IDENTIFICÁVEIS PARA O APRENDIZADO**

**SOUTHWEST COMMUNITY HEALTH CENTER
ASSESSMENT OF LEARNING NEEDS**

Patient/ Nombre _____

Date/ Fecha _____

Date of Birth/ Fecha de Nacimiento _____

Chart #: _____

Respondent & Relationship: _____

- | | | |
|---|---------|----|
| 1. Are you comfortable speaking and understanding English?
Habla y entiende ingles? | Yes/Si | No |
| 2. If not, do you need a translator?
Necessita un traductor? | Yes/Si | No |
| 3. If not English, what language do you speak most often?
Que idioma habla con mas frecuencia? _____ | | |
| 4. Are you comfortable with reading materials in English?
Puede usted leer ingles?
If not English, primary reading language: _____
Si no puede, que idioma lee usted | Yes/Si | No |
| 5. Do you have (or have you had) any known problems
with learning disabilities or emotional barriers?
Ha tenido o' tiene usted problemas de aprendizaje o' problemas emocionales?
Describe/ Explique : _____ | Yes/Si | No |
| 6. Level of education: _____
Grado de educacion | | |
| 7. Do you have trouble seeing?
Padece de problemas de la vista? | Yes/Si | No |
| 8. If yes, do you have glasses or contacts that help you?
Usa gafas o' lentes de contacto?
Comment/ Explique _____ | Yes/Si | No |
| 9. Can you read a label?
Puede leer una etiqueta? | Yes/Si | No |
| 10. Do you have trouble hearing?
Oyes usted bien?
If yes, do you wear a hearing aid?
Usa aparato para oir?
If hearing impaired, do you use:
Si, es sordo,: | Yes/Si | No |
| Lip reading/ Lee los labios | Yes /Si | No |
| ASL | Yes/ Si | No |
| ASL interpreter/Interprete | Yes/ Si | No |
| Family member/Le ayuda algun familiar | Yes/ Si | No |
| 11. Do you have any health needs or preferences that you would
like to share with us that would help your care here?
Tiene usted algun problema que quisiera discutir con nosotros, que pueda facilitar su tratamiento?
Describe/ Explique _____ | Yes/ Si | No |
| 12. Do you have any social, religious, cultural, considerations that you would like to share with us?
Tiene usted alguna pregunta social, religiosa o' cultural que quisiera discutir con nosotros? | | |

Reviewer's Signature

Date