

### Ability Self-Assessment

Question	Yes	No
Do you know the location of all fire alarms and extinguishers?	<input type="checkbox"/>	<input type="checkbox"/>
Are you able to activate the fire alarms?	<input type="checkbox"/>	<input type="checkbox"/>
Can you operate a fire extinguisher?	<input type="checkbox"/>	<input type="checkbox"/>
Have you practiced?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know the location of ALL exits?	<input type="checkbox"/>	<input type="checkbox"/>
Have you evaluated your ability to use them?	<input type="checkbox"/>	<input type="checkbox"/>
Have you determined how you may be of assistance to others in an emergency? (i.e. guiding people to and through darkened spaces and exits if you have no or low vision, offering calming and emotional support, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Have you anticipated how you will function if your service animal becomes confused, panicked, frightened or disoriented? A harness leash, pad protectors (for hot asphalt, hot metal stairs, broken glass) are important items for managing a nervous or upset animal. Be prepared to use alternative ways to negotiate your environment (i.e. sighted guides, members of your personal support network who can offer emotional support).	<input type="checkbox"/>	<input type="checkbox"/>
Do you keep critical carry-with-you supplies?	<input type="checkbox"/>	<input type="checkbox"/>
Essential medication?	<input type="checkbox"/>	<input type="checkbox"/>
Small flashlight?	<input type="checkbox"/>	<input type="checkbox"/>
Fully charged portable devices and extra batteries, such as a cell phone? Many people used cell phones and two-way pagers on 9/11/01 to alert authorities or to call loved ones.	<input type="checkbox"/>	<input type="checkbox"/>
Paper and pencil?	<input type="checkbox"/>	<input type="checkbox"/>
Customized, pre-printed message?	<input type="checkbox"/>	<input type="checkbox"/>
Emergency health information? It should communicate to rescuers what they need to know if they find you unconscious or incoherent or if they need to quickly help evacuate you (list of current medications, allergies, special equipment, names, addresses, and telephone numbers of doctors, pharmacies, family members, friends, and any other important information).	<input type="checkbox"/>	<input type="checkbox"/>