



## Guide to Fire Safety for Individuals with Autism Spectrum Disorders

It is an unfortunate fact that individuals with autism are at high risk in a situation involving a fire. Children with autism have died in fires when they retreated to a favorite hiding place; others died when they retreated from an approaching firefighter, apparently frightened by the firefighter's appearance (with mask, etc). Some children with autism have escaped a fire, only to die after reentering the dwelling to retrieve a prized object, not mindful of the danger they are placing themselves in by doing so. It is essential that we as parents/care givers preplan for how to ensure our loved one's safety in the event of a fire. Accordingly, the following suggestions are offered:

- Be sure that a smoke detector is placed in or near the person's room, as well as on all levels of the home. Test those smoke detectors frequently to make sure they are in working order.
- Teach your child the basic fire safety tips (stop, drop and roll; touching a door before opening it, etc). This includes picking a gathering spot outside the home.
- It is imperative that one family member be specifically assigned the responsibility to get that person with ASD out of the home and to a place of safety.
- It is critically important that this person also stay with their loved one to ensure that they do not re enter the home to retrieve a favorite object. Remember that the individual with ASD may become overwhelmed with the lights, sirens, frantic activity and excessive stimuli and attempt to flee the situation.
- Be proactive by providing your local fire department with as much information as possible about your loved one. This includes filling out the information sheet on the ASM web site, as well as advising them of the location of the loved one's room and other places they may flee in an emergency situation. Most fire departments would be happy to come to your home so that they can familiarize themselves with these locations.
- Visit the firehouse often, so that your loved one can see a firefighter with all of their protective and firefighting gear, including the oxygen masks, axes and hoses, so that they can grow accustomed to them. Also, acquaint them with medical equipment, such as stethoscopes, blood pressure cuffs, oxygen masks and stretchers, so that they might be prepared in the event of a medical emergency.
- If your loved one is non-verbal, prepare a laminated card containing basic information about your child (including any allergies to medication) in case of a medical emergency.

# Checklist for First Responders/Law Enforcement

*A registry to assist persons at risk*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

## Personal Description:

Date of Birth: \_\_\_\_\_

Race & Sex: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Hair color: \_\_\_\_\_

Eye color: \_\_\_\_\_

Scars or Birthmarks: \_\_\_\_\_

Glasses: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Any co-existing diagnosis: \_\_\_\_\_

Does he/she carry any special identification?

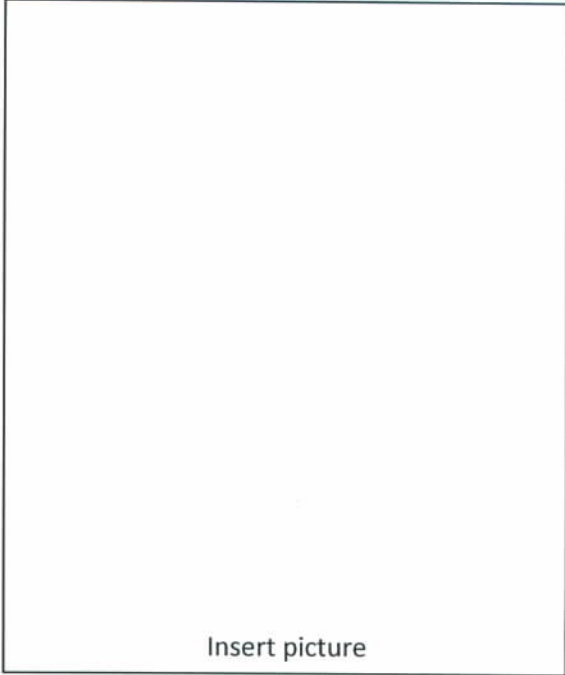
YES

NO

If so, what form and where is it carried?

\_\_\_\_\_

\_\_\_\_\_



### Important Address Information:

Home:
Phone:
School:
Phone:

### Emergency Contacts

At Home: Name	Relationship:
Address:	
Phone Number:	
At School: Name	Relationship:
Address:	
Phone Number:	
Others: Name	Relationship:
Address:	
Phone Number:	

Mental health diagnosis: \_\_\_\_\_

Medical concerns: \_\_\_\_\_

Current medication: \_\_\_\_\_

Any allergies to medication  
List: \_\_\_\_\_

YES	NO
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Does he/she have seizures

YES	NO
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Is he/she verbal or non-verbal

Verbal	Non-Verbal
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Is he/she sensitive to noise?

YES	NO
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Is he/she sensitive to touch?

YES	NO
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Eye contact

Good	Fair	Poor
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Does he/she engage in self-stimming behavior? If so, which one:

Does he/she run away from home or school?

YES	NO
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Where does he/she go?

History of violence against police/parents/others?

Does he/she have any specific fears?

YES	NO
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List any triggers that may upset him/her:

Does he/she perseverate on any particular object or theme?

What are his/her favorite topics of conversation?

Any other pertinent info:

**RELEASE**

I, \_\_\_\_\_ give my permission to my City/Town of \_\_\_\_\_  
to retain and distribute this information to first response/law enforcement personnel for the sole  
purpose of identification and assistance to the person at risk.

Print Name \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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