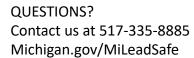
Management of Blood Lead Test Results Guidance for Health Care Providers

Michigan law requires blood lead testing of all young children at 12 months and 24 months and at other ages depending on certain risk factors. See reverse side for more information on the requirements.

Providers may use a capillary or venous sample for initial blood lead screening. False positive results may occur with capillary sample contamination. If capillary test results are equal to or greater than 3.5 micrograms per deciliter, a venous sample must be used to confirm the result without delay. If unable to obtain a timely venous sample, proceed with follow-up actions and continue attempts to confirm.

	Follow-up Testing	Follow-up Actions
BLL < 3.5 μg/dL	As required by universal lead testing law.	 Provide education about nutrition with a focus on iron and calcium intake. Discuss common sources of lead exposure and lead exposure prevention.
BLL 3.5 – 9 μg/dL	Re-test every 3 months until BLL has declined for 2 – 4 tests. Once BLL is declining, venous sample every 6 – 9 months.	 Follow above guidance. Obtain an exposure history to identify potential sources of lead. Assess for iron deficiency with laboratory testing. Perform developmental screening. For children < 3 years, refer to Early On. Consider other children who may be exposed. Encourage family to: Accept nursing case management services offered by the local health department. Apply to the Lead Safe Home Program (URL: bit.ly/ApplyLeadServices) to determine eligibility for environmental investigation and abatement.
BLL 10 – 19 μg/dL	Re-test every 1 – 3 months until BLL has declined for 2 – 4 tests. Once BLL is declining, venous sample every 3 – 6 months.	
BLL 20 – 44 μg/dL	Re-test every 2 – 4-weeks until BLL has declined for 2 – 4 tests. Once BLL is declining, venous sample every 1 – 3 months.	 Follow above guidance. Perform a complete history and physical exam, assessing the child for signs and symptoms related to lead exposure. Consider abdominal x-ray if ingested lead is suspected. Contact Michigan Poison Control (800-222-1222) for guidance.
BLL > 45 μg/dL	Obtain confirmatory venous sample urgently, within 48 hours.	 Follow above guidance. Contact local health department or the Michigan Department of Health and Human Services' Childhood Lead Poisoning Prevention Program with result. Perform a complete history and physical exam including a detailed neurological exam. Family should NOT return to lead-contaminated home. Contact Michigan Poison Control (800-222-1222) for guidance regarding chelation treatment.





Blood Lead Risk Assessment

Michigan's New Blood Lead Testing Requirements

Children must be tested at 12 months and 24 months of age or by 72 months of age (age 6) if there is no record of a previous test.

Children must also be tested:

- At age 4 if they live in one of the 82 cities and townships designated by MDHHS as high risk. The list of high risk jurisdictions can be viewed at <u>bit.ly/LeadHighRisk</u>.
- At least once between their most recent test and age 72 months if they are at high risk because they live in a home:
 - Built before 1978.
 - Where other children with elevated blood lead levels live.
- Within three months of when a physician or parent determines that they are at high risk.

The law states:

- It is the physician's responsibility to test or order the test.
- All elevated blood lead tests
 (≥ 3.5 µg/dL) from capillary
 blood must be confirmed with a
 venous test.
- Testing requirements do not apply if the parent/guardian objects to the test.

The following is a guide to identifying risk factors of lead exposure.



Does the child **live in or regularly visit a home built before 1978**? (Note: renovations can greatly increase risk of lead exposure in homes built before 1978.)



Does the child come in contact with an adult whose **job or hobby involves exposure to lead** (battery manufacturing/recycling, brass/bronze foundries, abrasive blasting outdoor metal structures, renovation of pre-1978 buildings, regular use of firing ranges, bullet reloading or casting, stained glass)?



Does the child live in or regularly visit a home that had a water test with high lead levels?



Does the child's caregiver use home remedies (e.g., ba-baw-san, daw tway, greta, azarcon, balguti kesaria, ghasard) or imported spices that may contain lead?



Does the child have a sibling or friend who has an elevated blood lead level?



Does the child have behaviors suggesting **high risk for lead exposure**, including pica and developmental delays?

To learn more about lead poisoning prevention and blood lead testing, contact the Childhood Lead Poisoning Prevention Program: 517-335-8885 or Michigan.gov/MiLeadSafe.