

Childhood Lead Poisoning

You are the first line of defense
Make sure to order a Lead test

A blood lead test is the only sure way to identify a child with elevated blood lead levels.

The Centers for Disease Control and Prevention recommends blood lead testing at

12 and 24 months OR at least once before age 6

It is important to accompany diagnostic tests with education for patients on ways to reduce their children's risk for lead poisoning.



What we know — Blood Lead Level (BLL) Response Actions

There is no safe level or threshold for lead exposure

Lower levels of exposure present no obvious symptoms

Exposure may be a result of:

- Deteriorating paint from home built before 1978
- Family hobbies or occupations
- Everyday products manufactured with lead

Lead exposure may cause

- Brain and nervous system damage
- Reduced IQ
- Behavioral problems
- Learning disabilities
- Slowed growth and development
- Hearing and speech disabilities
- Premature and low birth weights in pregnant women

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https://www.cdc.gov/nceh/lead/acclpp/actions_blls.html

BLL Test Results (µg/dL)	Venous Confirmation Retest Within	Recommended Actions Based on BLL	Venous Retest - After Recommended Actions
<3.5	None	<ul style="list-style-type: none"> • Education on the sources and prevention of lead exposure • Routine assessment focusing on iron and calcium intake • Follow-up blood lead monitoring at recommended intervals¹ 	Retest according to Blood Lead Screening Plan ²
≥3.5 - 9	3 months	<p>Above Actions, plus:</p> <ul style="list-style-type: none"> • Environmental exposure history to identify potential lead sources • Refer to health department for environmental investigation of home • Lab work: iron status, hemoglobin, hematocrit 	3 months for first 2 – 4 tests 6 – 9 months after BLL are declining
	1 month	<ul style="list-style-type: none"> • Discuss child's diet and nutrition with focus on calcium and iron and refer to supportive services if needed (WIC) • Developmental monitoring and referral to support services if needed 	1 – 3 months for first 2 – 4 tests 3 – 6 months after BLL are declining
20 - 44	Within 2 weeks	<p>Above Actions, plus:</p> <ul style="list-style-type: none"> • Complete history and physical exam • Environmental investigation of home and refer for lead hazard reduction program • Consider abdominal x-ray (if lead ingestion is suspected) • Contact Pediatric Environmental Health Specialty Unit (PEHSU) or Nevada Poison Center (1800-222-2222) for guidance 	2 weeks – 1 months for first 2 – 4 tests 1 – 3 months after BLL are declining
≥45	ASAP Within 48 hours	<p>Above Actions, plus:</p> <ul style="list-style-type: none"> • Complete history and physical exam with detailed neurological exam • Perform abdominal X-ray and, if needed, bowel decontamination • Consider hospitalization if lead-safe environment cannot be assured, or source of lead has not been identified and further exposure possible • Commence gastrointestinal decontamination or chelation therapy with consultation from medical toxicologist or pediatrician experienced in treating lead poisoning 	Every 24 hours or as medically indicated

To order educational materials for your office or families contact 702-895-1040 (Southern Nevada) | 775-453-0434 (Northern Nevada) or visit NVCLPPP.org

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