

# Maine CDC Pediatric Blood Lead Testing Guidelines

## Identifying Children with Lead Poisoning



Maine CDC provides services based on venous lead levels  $\geq 3.5$   $\mu\text{g}/\text{dL}$ .

- The initial blood lead screening test may be either a venous or capillary sample.
- An elevated capillary sample ( $\geq 3.5$   $\mu\text{g}/\text{dL}$ ) must be confirmed with a venous sample.

Age	Blood Lead Testing Requirements
1 year (9 to <18 months)	Mandatory under Maine law
2 years (18 to <36 months)	Mandatory under Maine law
3-5 years (36 to 72 months)	<p>For children covered by MaineCare:</p> <ul style="list-style-type: none"> <li>• If not previously tested: Mandatory blood lead test</li> <li>• If previously tested: Recommend blood lead test yearly unless risk assessment questionnaire is negative.</li> </ul> <p>For children not covered by MaineCare:</p> <ul style="list-style-type: none"> <li>• Recommend blood lead test yearly unless risk assessment questionnaire is negative.</li> </ul>

### Risk Assessment Questionnaire – Identifies at-risk children under 6 years of age

If a child's parent or guardian answers 'yes' or 'don't know' to any of the questions below, test the child for lead.

- Does your child spend more than 10 hours per week in any house built before 1950?
- Does your child spend more than 10 hours per week in any house built before 1978 that was renovated or remodeled within the last 6 months?
- Does your child spend time with an adult whose job exposes him/her to lead? (i.e., construction, painting)
- Does your child have a sibling or playmate that has been diagnosed with lead poisoning?

**Test at-risk populations annually through 5 years of age, and as clinically indicated, even if the risk assessment questionnaire is negative.**

At-risk populations:

- Recent immigrants or international adoptees
- Children whose parents immigrated to the U.S.
- Children with pica behavior
- Children with neurodevelopmental disabilities or conditions such as autism that put them at higher risk for hand-to-mouth behavior
- Children entering foster care

### Test all recently arrived refugee children.

- Perform a blood lead test for children 6 months to 16 years upon entry to the U.S.
- Within 3-6 months of initial test, conduct follow-up test for children 6 months to 6 years, regardless of initial test result.
- Consult U.S. CDC Recommendations for Lead Poisoning Prevention in Newly Arrived Refugee Children <https://bit.ly/3RCDr31>

# Recommended Confirmation and Follow-up Schedule

## Clinical Actions for Pediatric Blood Lead Levels $\geq 3.5$ $\mu\text{g}/\text{dL}$



- The pediatric blood lead reference level is 3.5  $\mu\text{g}/\text{dL}$ . Confirm capillary screening test results  $\geq 3.5$   $\mu\text{g}/\text{dL}$  with a venous test.
- The sooner providers confirm capillary blood lead tests with venous specimens, the sooner Maine CDC can initiate services to identify and eliminate the sources of their lead exposure.
- The higher the capillary test result, the more urgent the need for a timely confirmatory venous test.
- Confirmatory testing is not required when an initial screening test is performed using a venous sample.

Capillary Blood Lead Level	Confirm with Venous Test
3.5 - <10 $\mu\text{g}/\text{dL}$	As soon as possible, but no later than 3 months
10 - <20 $\mu\text{g}/\text{dL}$	As soon as possible, but no later than 1 month
20 - <45 $\mu\text{g}/\text{dL}$	As soon as possible, but no later than 2 weeks
$\geq 45$ $\mu\text{g}/\text{dL}$ Urgent Action Needed	Immediately, but no later than 48 hours (place order as STAT)

Venous Blood Lead Level	Follow-up Venous Test Schedule	Recommended Actions Based on Confirmed Venous BLL
3.5 - <10 $\mu\text{g}/\text{dL}$	Within 3 months*	<ul style="list-style-type: none"> <li>• Complete risk assessment questionnaire to identify potential sources of exposure</li> <li>• Educate on key messages (see Quick Guide page)</li> <li>• Inform patient that Maine CDC will be reaching out</li> </ul>
10 - <20 $\mu\text{g}/\text{dL}$	Within 2 months*	<ul style="list-style-type: none"> <li>• Items above plus:</li> <li>• Ensure child does not have iron deficiency</li> <li>• Check child's development to ensure appropriate milestones are being met</li> </ul>
20 - <45 $\mu\text{g}/\text{dL}$	Within 1 month*	<ul style="list-style-type: none"> <li>• Items above plus:</li> <li>• Consider performing an abdominal x-ray to check for lead-based paint chips and other radiopaque foreign bodies</li> </ul>
$\geq 45$ $\mu\text{g}/\text{dL}$ Urgent Action Needed	Immediately (place order as STAT)	<ul style="list-style-type: none"> <li>• Items above plus:</li> <li>• Perform complete history and physical exam including detailed neurological exam</li> <li>• Urgent consult with Northern New England Poison Center: 1-800-222-1222</li> </ul>

\*You may elect to repeat blood lead tests on children with an elevated venous blood lead level within 1 month to ensure that the blood lead level is not rising. Consult U.S. CDC guidelines: <https://bit.ly/3QyeaFZ>