

CDPHE Childhood Blood Lead Retesting and Case Management Chart

Blood Lead Level (ug/dL)	Retesting schedule	Family Educational Follow-up	Child Medical Follow-up	Environmental Follow-up/Home Investigation
<10	Consider more frequent retesting if child is under 24 months and BLL \geq 5 ug/dL; or pica behavior (see MMWR report, CDC 2007)	Anticipatory guidance		
10-14	Within 3 months	<ul style="list-style-type: none"> • Lead education and exposure prevention guidance • Nutrition evaluation/ counseling • Coordinate with WIC if eligible • Referral to early enrichment programs if at risk for developmental/ behavioral deficits 	<ul style="list-style-type: none"> • Ensure adequate nutritional intake, especially concerning intake of calcium, iron, and vitamin C. • Test all siblings under age 6 years 	
15-19	Within 1-3 months	<ul style="list-style-type: none"> • Same as above • Lead exposure history • Emphasize importance of timely re-screening 	<ul style="list-style-type: none"> • Same as above • Treat as 20-44 ug/dL category if persistent or increasing BLL in this range. 	<ul style="list-style-type: none"> • Environmental investigation should be performed if child has persistent BLLs in this range (i.e., if two venous tests within 3 months of 15-19 ug/dL, treat as per 20-44 category); or if BLL increases.
20-44	Within 1 month <ul style="list-style-type: none"> ○ Collect confirmatory test within 1 week to 1 month (the higher the BLL screening test, the more urgent the need for a confirmatory test) ○ Schedule follow-up test within 2 weeks at high end of range 	<ul style="list-style-type: none"> • Same as above 	<ul style="list-style-type: none"> • Same as above • Test for Hgb or Hct (iron status; FEP, ZPP) • Call the Rocky Mountain Poison & Drug Center for consultation services/ medical treatment at 303-739-1123 or 800-332-3073 • Refer for full behavioral history/ monitoring (neuro-developmental and psychosocial status) 	<ul style="list-style-type: none"> • Conduct a full environmental investigation.
45-69	Within 48 hours or less	<ul style="list-style-type: none"> • Same as above 	<ul style="list-style-type: none"> • Same as above • Retest 45-59 ug/dL in 48 hours & 60-69 ug/dL in 24 hours • Complete neurological exam • Probable chelation 	<ul style="list-style-type: none"> • Same as above
70 and above	Treat as medical emergency	<ul style="list-style-type: none"> • Same as above 	<ul style="list-style-type: none"> • Immediately hospitalize, retest, and chelate. • Refer as above 	<ul style="list-style-type: none"> • Same as above

Re-screening guidelines adapted by the Colorado Department of Public Health and Environment (CDPHE) based on: *Managing Elevated Blood Lead Levels Among Young Children: Recommendations from the Advisory Committee on Childhood Lead Poisoning Prevention*; Centers for Disease Control and Prevention. Atlanta, GA; CDC 2002; http://www.cdc.gov/nceh/lead/casemanagement/casemanage_main.htm and, MMWR; Vol. 56, No. RR-8, *Interpreting and Managing Blood Lead Levels < 10 ug/dL in Children and Reducing Childhood Exposures to Lead: Recommendations of CDC's Advisory Committee on Childhood Lead Poisoning Prevention* (CDC, 2007); <http://www.cdc.gov/MMWR/preview/mmwrhtml/rr5608a1.htm>. Guidelines are applicable to all children ages 6 to 72 months.

All screening blood lead tests (capillary tests) should be confirmed by a venous test to determine appropriate case management steps.

Contact CDPHE at 303-692-2700 or 1-800-886-7689.

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