**Blood Lead Screening & Reporting**

**Summary**
Recent attention to cases of children with elevated blood lead levels in Flint, MI, has led to increased interest in identification of lead exposures in children. This health update reviews requirements and recommendations for blood lead testing, as well as requirements for reporting of all blood lead test results of South Carolina residents.

**Key Points**
- All blood lead test results are reportable to DHEC, regardless of age of patient or result of test.
- Blood lead tests performed in medical offices are reportable to DHEC.
- All elevated capillary blood lead test results (≥5 micrograms per deciliter (mcg/dL)) should be confirmed with a venous blood lead test.
- DHEC clinics do not perform blood lead tests.

**Quick Links: This Health Update includes**
- Blood Lead Testing Requirements and Recommendations for Children in South Carolina
- Reporting of Blood Lead Test Results
- Resources for More Information, Forms, etc.

Contact the DHEC Division of Children’s Health Lead Line (1-866-4NO-LEAD) with questions.
Requirements and Recommendations for Blood Lead Testing for Children in South Carolina

- **Medicaid**
  The Medicaid EPSDT Program requires that all enrolled children have a blood lead test at 12 and 24 months of age. Providers have the option of obtaining the first blood lead test at 9 or 12 months of age.
  Medicaid also requires a blood lead test for any child 36 to 72 months of age who has not previously been screened, or who presents with symptoms of possible lead poisoning.

- **Head Start**
  The Head Start program requires a blood lead test for any enrolling child if a record of a prior test is not available.

- **Refugees**
  The CDC recommends blood lead testing of all refugee children 6 months to 16 years of age, as soon as possible after arrival.
  An additional blood lead test on all children aged 6 months to 6 years is recommended within 3-6 months of placement in a permanent residence, regardless of the results of the initial blood lead test.

- **International Adoptees**
  The CDC recommends that all internationally adopted children have a blood lead test during their first medical examination in the U.S., and at both 12 and 24 months of age, if younger than these ages at the time of adoption.

- **Blood Lead Testing of Any Child** is recommended if the well-child history identifies any of the following risks:
  - lives in or regularly spends time in a house built before 1950, or a home built before 1978 that is currently undergoing remodeling, or has undergone remodeling in the past 6 months;
  - lives in or regularly spends time in a home with vinyl mini blinds made before 1997 or not labeled as "lead safe";
  - has a family member or playmate with elevated blood lead levels or a lead poisoning diagnosis;
  - lives with an adult whose job or hobby involves working with lead (such as house painting, welding, auto body work, working with batteries, fishing, stained glass, or ceramics);
  - has pica, especially if observed eating paint chips, or soil/dirt;
  - family reports use of imported remedies or cosmetics known or suspected to contain lead (kohl, azarcón, Greta, etc.)

- **Blood Lead Specimens for children:**
  - Capillary (fingerstick) blood lead testing is acceptable for initial tests, and for follow-up tests if initial blood lead test results were <5 mcg/dL.
  - All follow-up blood lead testing of patients with elevated blood lead levels (EBLLs) at or above 5 mcg/dL should be performed on venous blood.
  - Confirmatory venous blood specimens should be sent for analysis to a reference laboratory.
  - Providers using point-of-care machines to test blood for lead should follow manufacturer’s instructions for repeat testing.
Reporting of Blood Lead Test Results

- **Results of all blood lead tests** in adults and children, regardless of level, are to be reported to DHEC.
  - Results are reportable regardless of the age of the person being tested, the type of test (capillary or venous), where the test was performed (laboratory or point-of-care), or the result obtained.
  - Lead test results other than those performed on blood are not reportable to DHEC.
  - Providers who perform blood lead testing in the medical office using a point-of-care analyzer should assure that all of these results are sent to DHEC.
  - Providers who send blood specimens out for lead testing at reference laboratories do not need to submit these results to DHEC when received.

- **Reports should include:**
  - Identifying/demographic information for the patient, including name, street address (not a post office box), phone, county, date of birth, race/ethnicity, gender
  - Reporting source (lab, medical office, hospital) and person making report
  - Ordering provider, office, phone number
  - Lab/office where test was performed
  - Specimen collection date
  - Specimen source – capillary fingerstick test or venous test
  - Numerical or quantifiable result (e.g., 10.4 mcg/dL, <2.2 mcg/dL, “none detected”), not a descriptor (e.g., low, high)


- **Reports may be submitted via:**
  - Mail: SC DHEC Division of Children’s Health, Lead Program
    2100 Bull Street
    Columbia, SC 29201
  - Fax: 803-898-0577
    It is recommended that an initial test fax be sent prior to sending patient information to DHEC via fax.
  - FTP: Contact the Division of Children’s Health’s Lead Line (1-866-4NO-LEAD) to establish electronic reporting other than HL7.
  - HL7: Contact the Environmental Public Health Tracking Program (803-898-3629) to establish HL7 reporting.

- Additional information on reporting is available from DHEC’s List of Reportable Conditions: [http://www.scdhec.gov/Health/FHPF/ReportDiseasesAdverseEvents/ReportableConditionsInSC/](http://www.scdhec.gov/Health/FHPF/ReportDiseasesAdverseEvents/ReportableConditionsInSC/) or from the Division of Children’s Health Lead Line: 1-866-4NO-LEAD
Resources for Additional Information

SC DHEC

- **Screening Questionnaire for Lead Exposure**:
- **Patient Education Materials**: [http://www.scdhec.gov/Agency/EML/place_order.aspx](http://www.scdhec.gov/Agency/EML/place_order.aspx)
  - Select “Childhood Lead Poisoning Prevention Program” under Program, or type “lead” in Search by Title.
- **Childhood Lead Data and Information**: [http://www.scdhec.gov/HomeAndEnvironment/YourHomeEnvironmentalandSafetyConcerns/Lead/LeadData/minex.htm](http://www.scdhec.gov/HomeAndEnvironment/YourHomeEnvironmentalandSafetyConcerns/Lead/LeadData/minex.htm)

DHEC contact information for reportable diseases and reporting requirements

Reporting of **blood lead test results** is consistent with South Carolina Law requiring the reporting of diseases and conditions to the state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2016 List of Reportable Conditions available at: [http://www.scdhec.gov/Library/CR-009025.pdf](http://www.scdhec.gov/Library/CR-009025.pdf)

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

Contact the DHEC Division of Children’s Health Lead Line (1-866-4NO-LEAD) with questions about this Health Update.

Categories of Health Alert messages:

- **Health Alert**: Conveys the highest level of importance; warrants immediate action or attention.
- **Health Advisory**: Provides important information for a specific incident or situation; may not require immediate action.
- **Health Update**: Provides updated information regarding an incident or situation; unlikely to require immediate action.
- **Info Service**: Provides general information that is not necessarily considered to be of an emergent nature.

Access the Health Alert Network / Sign-up to receive DHEC Health Alerts, Advisories and Updates: [http://www.scdhec.gov/Health/FHPF/HealthAlertsNotifications/](http://www.scdhec.gov/Health/FHPF/HealthAlertsNotifications/) or (803) 898-0431.