

SUMMARY CHART LEAD POISONING MANAGEMENT

	CLASS I	CLASS IIA	CLASS IIB	CLASS III	CLASS IV	CLASS V
I. BLOOD LEAD LEVEL (ug/dl)	<10	10-14	15-19	20-44	45-69	>69
II. DIAGNOSTIC EVALUATION						
A. Repeat blood lead test to confirm initial test results	No	Yes - in 3 months. (capillary)	Yes - within 20 days (venous)	Yes - within 5 days (venous)	Yes - within 3 days (venous)	Yes - immediately (venous)
B. Detailed history supplement	No	No	Yes	Yes	Yes	Yes
C. Hemoglobin determination	No	No	Yes	Yes	Yes	Yes
D. Diagnostic referral to Health Unit clinician or other medical provider	No	No	No - after first test. Yes - after the second elevated test in 3 months	Yes - immediately if symptoms present. Otherwise, within 10 days after confirmation	Yes - Immediately if symptoms present. Otherwise within 48 hours after confirmation	Yes - immediately if symptoms present. Otherwise, within 48 hours after confirmation
III. ENVIRONMENTAL EVALUATION						
A. Sanitarian Notification	No	No	No - After first test. Yes - after 2 nd elevated test in 3 months	Yes - immediately if symptoms present. Otherwise, within 10 days after confirmation	Yes - immediately if symptoms present. Otherwise, within 48 hours after confirmation.	Yes - immediately if symptoms present. Otherwise, within 48 hours after confirmation
B. Inspection and form completion	No	No	Yes - within 15 days of second elevated test.	Yes - within 2 days if symptoms present. Otherwise, within 10 days after confirmation.	Yes - within 2 days if symptoms present. Otherwise, within 5 days after confirmation.	Yes - within 2 days if symptoms present. Otherwise, within 2 days after confirmation.
IV. FOLLOW UP						
A. Repeat blood lead and hemoglobin	Yes - if high risk repeat in 6 months. (capillary) If low-risk repeat in 12 months (capillary)	Yes - in 3 months. (capillary)	Yes - 3 months (venous)	Yes - monthly until environmental hazard abated. Then quarterly or per physician's orders	Yes - at least monthly until environmental hazard abated. Then quarterly or per physician's orders.	Yes - at 1 to 2 week intervals until environmental hazard abated. Then at intervals ordered by Physician.
B. Return Appointment:	Based on risk status	3 months	3 months	Physician's discretion	Physician's discretion	Physician's discretion
C. Iron supplement:	Based on EP if known	By diet and oral iron based on EP	Yes - maintenance oral unless EP elevated to >75	Yes	Yes	Yes
D. Nutrition Services (including WIC)	No - unless EP elevated	Yes	Yes	Yes	Yes	Yes
V. SCREENING OF PLAYMATES AND CHILDREN UNDER 6 YEARS IN HOUSEHOLD	No	No	Yes - as soon as possible after second elevated test	Yes - as soon as possible	Yes - immediately	Yes - immediately
VI. SANITARIAN'S HAZARD ABATEMENT PLANNING WITH FAMILY AND LANDLORD	No	No	Yes - after second elevated test	Yes	Yes	Yes
VII. OTHER SERVICES	No	Education on prevention of lead poisoning	Refer to Medical Social Services if indicated	Refer to Medical Social Services	Refer for psychological evaluation if indicated and refer to Medical Social Services	Refer for psychological evaluation if indicated and refer to Medical Social Services