

PRACTICAL PEARLS: Lead Poisoning

INTRODUCTION	<ul style="list-style-type: none">• CDC Advisory Committee on Childhood Lead Poisoning Prevention changed the definition of an elevated lead level to 5 mcg/dL in 2012• http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf
INITIAL EVALUATION AND MANAGEMENT BY PRIMARY CARE	<ul style="list-style-type: none">• If a lead level is >5 mcg/dL, parents should be contacted.• Potential lead hazards should be discussed. Precautions such as frequent hand washing, wet mopping and wet dusting should be reviewed.• If the level is <10 mcg/dL, then repeat in 3 months.• If the level is > 10 mcg/dL, then repeat in 2 months.• Resource for parents: http://www.cdc.gov/nceh/lead/ACCLPP/blood_lead_levels.htm
WHEN TO REFER	<ul style="list-style-type: none">• Consider referral if the lead level is >10 mcg/dL• Consider referral if the level continues to remain >5 mcg/dL despite your interventions• Significant parental anxiety
HOW TO REFER	<ul style="list-style-type: none">• Baystate Pediatric Environmental Health Clinic 413-794-2515.
WHAT TO EXPECT FROM BAYSTATE CHILDREN'S HOSPITAL VISIT	<ul style="list-style-type: none">• We will identify the lead hazards, educate about the potential effects of lead and manage the case until the lead drops <5 mcg/dL.

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