

Healthcare Provider:

- Immediately retest the child if the blood lead test result is invalid due to “Clotted” or “Insufficient Quantity.”
- Follow the flowchart below to determine if or when follow-up testing and medical case management is necessary.

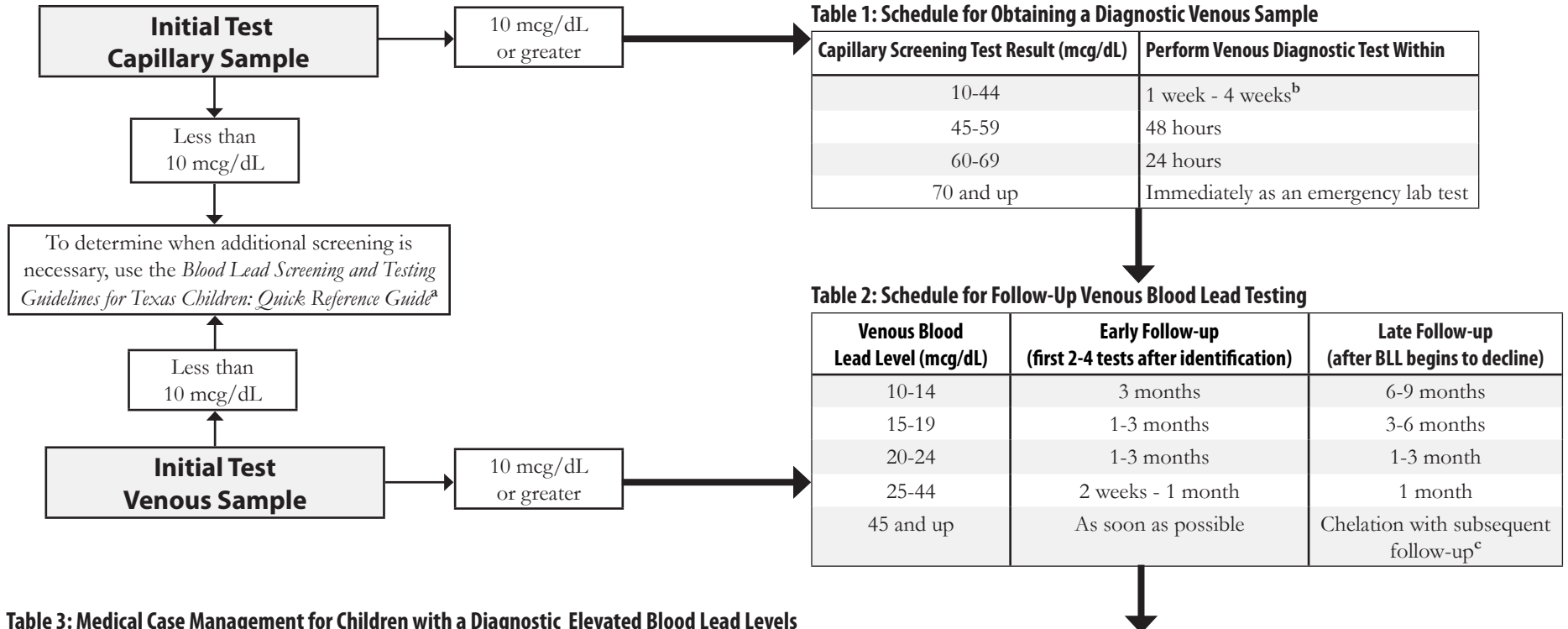


Table 1: Schedule for Obtaining a Diagnostic Venous Sample

Capillary Screening Test Result (mcg/dL)	Perform Venous Diagnostic Test Within
10-44	1 week - 4 weeks ^b
45-59	48 hours
60-69	24 hours
70 and up	Immediately as an emergency lab test

Table 2: Schedule for Follow-Up Venous Blood Lead Testing

Venous Blood Lead Level (mcg/dL)	Early Follow-up (first 2-4 tests after identification)	Late Follow-up (after BLL begins to decline)
10-14	3 months	6-9 months
15-19	1-3 months	3-6 months
20-24	1-3 months	1-3 month
25-44	2 weeks - 1 month	1 month
45 and up	As soon as possible	Chelation with subsequent follow-up ^c

Table 3: Medical Case Management for Children with a Diagnostic Elevated Blood Lead Levels

10-14 mcg/dL	15-19mcg/dL	20-44mcg/dL	45-69mcg/dL	70 or higher mcg/dL
<ol style="list-style-type: none"> Lead Education: Dietary & Environmental Follow-up BLL monitoring Environmental Lead Investigation (ELI) if: <ul style="list-style-type: none"> • A follow-up BLL persists at least 12 weeks after diagnostic venous test 	<ol style="list-style-type: none"> Lead Education: Dietary & Environmental Follow-up BLL monitoring Proceed according to actions for 20-44 mcg/dL if: <ul style="list-style-type: none"> • A follow-up BLL persists at least 12 weeks after diagnostic venous test, or • BLLs increase 	<ol style="list-style-type: none"> Lead Education: Dietary & Environmental Follow-up BLL monitoring Complete history and physical exam Lab work: Hemoglobin or hematocrit; Iron status ELI Lead hazard reduction Neurodevelopmental monitoring Abdominal X-ray (if particulate lead ingestion is suspected) with bowel decontamination if indicated 	<ol style="list-style-type: none"> Lead Education: Dietary & Environmental Follow-up BLL monitoring Complete history and physical exam Complete neurological exam Lab work: Hemoglobin or hematocrit; Iron status; FEP or ZPP Environmental Lead Investigation Lead hazard reduction Neurodevelopmental monitoring Abdominal X-ray with bowel decontamination if indicated Chelation therapy^c 	<ol style="list-style-type: none"> Hospitalize and commence chelation therapy^c Proceed according to actions for 45-69 mcg/dL

^aBlood Lead Screening and Testing Guidelines for Texas Children: Quick Reference Guide. Go to: www.dshs.state.tx.us/lead. ^bThe higher the BLL on the screening test, the more urgent the need for diagnostic testing. ^cHealth care providers should consult with an expert in the management of these lead levels before administering chelation. Chelation therapy should never be administered before a venous diagnostic is obtained. Contact your local Poison Control Center or contact Texas CLPPP for a referral. Tables adapted from Managing Elevated Blood Lead Levels Among Young Children: CDC, March 2002