

Childhood Blood Lead Level Case Management Guidelines

Blood lead levels (μg/dL) 0-3.4	 Local health department actions Continue to follow <u>Wisconsin Blood Lead Testing Recommendations</u>. Confirmatory blood lead test not required for blood lead levels below 3.5 μg/dL. If applicable, provide clinical case management per local health department (LHD) policy or consolidated contract (Table A), whichever is more protective. Refer children enrolled in Medicaid to the <u>Lead Safe Homes Program</u>. 	HHLPSS actions (Healthy Homes Lead Poisoning Surveillance System) New clinical case does not open New environmental investigation does not open "New blood lead test" alert sent for open clinical cases	Table A Consolidated contractsEach year local health departments contract with the CLPP Program to provide lead hazard evaluation services to children under age 16. Each LHD follows the Program Quality Criteria for the Childhood Lead Program and negotiates at least one additional objective. Contract objectives are saved
	 Follow recommendations above for 0–3.4 μg/dL. Ensure that the child's provider schedules a confirmatory venous sample, if applicable Provide clinical case management (if applicable) per local health department (LHD) policy or consolidated contract, whichever is more protective. 	 New clinical case opens; "new case" alert sent (capillary or venous samples) 	in the Grants and Contracts (GAC) system and can be accessed by your health officer.
3.5–4.9	 View <u>CDC's Recommended Actions Based on Blood Lead Level</u> for the: Summary of recommendations for follow-up and clinical case management. Recommended schedule for obtaining a confirmatory venous sample. Schedule for follow-up blood lead testing. Document case management activities related to the child in HHLPSS clinical tab, until closure criteria are met as described on Table B (on the next page). 	 "New blood lead test" alert sent for open clinical cases New environmental investigation opens; "new investigation" alert sent (venous samples only) 	Table C Wisconsin Stat. § 254.11 definitions Elevated blood lead level (EBLL): One venous blood lead level greater than or equal to 20 μg/dL
5–45	 Clinical case management and environmental investigations recommended for all cases. Follow recommendations above for 3.5–4.9 μg/dL. Follow LHD consolidated contract objectives found in Grants and Contracts system (GAC). At minimum, children meeting EBLL definition (Table C) require: Clinical case management activities (Table D) completed within 2 weeks. Environmental investigation(s) completed within timeframe indicated in Table E. Required forms uploaded to HHLPSS (Table F). Refer to Children's Wisconsin Lead Poisoning Guidelines (Contact Wisconsin Poison Center for a copy by calling 800–222–1222 or request at <u>Wisconsinpoison.org</u>). Refer to Table B (on the next page) for when to close environmental investigation in HHLPSS. 	• Actions are same as 3.5–4.9	OR Two venous blood lead levels greater than or equal to 15 µg/dL drawn at least 90 days apart Poisoning or lead exposure: Any blood lead level greater than or equal to 3.5 µg/dL
≥ 45	 Follow all recommendations above (3.5–4.9 μg/dL and 5–45 μg/dL). Ensure healthcare provider is consulting with a medical toxicologist to initiate gastrointestinal decontamination or chelation therapy. Ensure hospitalized children are released to a lead-safe environment (refer to Chapter 5 in the <u>Wisconsin Childhood Lead Poisoning Prevention (CLPP) Program Handbook</u>). Consult with Poison Control at 800–222–1222 or <u>Region 5 Pediatric Environmental Health Specialty Units</u> (PESHU). 	 Actions are same as 3.5–4.9 	

Table B

Closure requirements

	Closure requirements				
	Clinical cases	Environmental investigations			
Cli 1. 2.	µg/dL at least 6 months apart	Properties where no investigation is planned because the child associated with the property has a BLL <i>below</i> the EBLL definition (Table A) and <i>below</i> LHD consolidated contract objective:			
	a. Lead hazard remediation work completed and passed clearance b. Source of lead was not lead-based paint	LHD should close the HHLPSS investigation ASAP. HHLPSS will not send new environmental alerts when an investigation is open.			
	and child is no longer exposed c. Child moved to a new property identified as lead safe	Properties associated with a child's BLL <i>meeting</i> the EBLL definition or LHD consolidated contract objective:			
3.	d. No hazards identified	After all identified hazards have been corrected by the property owner, the LHD has successfully cleared the property of any orders, and the LHD has completed			
Cli	inical case does not meet EBLL definition:	and uploaded all required forms into HHLPSS, CLPPP staff at DHS will close the property investigation.			
1. Ot	Follow LHD policy and procedures ther closure reasons:	Other closure reasons*: (do not apply if associated with a child meeting the EBLL definition)			
1. 2.	Unable to locate child or family Family refuses further intervention	 Child never resided at the property Property owner refuses an investigation 			
mo	ote: For children who change jurisdictions, ove to another state, or do not meet any of e criteria above contact the Childhood Lead	 Unable to locate the residents of the property *If a child moves, the BLL at the time they move 			
	isoning Prevention Program at <u>HSLeadPoisoningPrevention@wi.gov</u>	determines if the new address is investigated or can be closed based on the above criteria.			

Table D Case management activities

- ✓ Lead education
- ✓ Lead prevention information
- ✓ Developmental assessment
- ✓ Nutritional counseling
- ✓ Referrals for support as needed
- ✓ History and physical exam

These activities can be done by the public health nurse or primary care provider.

Table E Timeframe for environmental investigation			
Blood Lead Level (μg/dL)	Time between BLL notification and investigation		
3.5–19.9	Within 2 weeks		
20–44.9	Within 1 week		
45–69.9	Within 48 hours		
70 or higher	Within 24 hours		

Table F Required forms			
Case management forms	Environmental investigation forms and templates		
Nursing Case Management Report F-44771A Nursing Case Closure Report F-44771B	Property Investigation Report F-44771CProperty Investigation Closure Report F-44771DScope of Work to Correct Lead HazardsWork Specification Language for Lead Hazard ReductionRisk Assessment ReportLead Work Orders LetterLead Clearance Examination ReportU.S Department of Housing and Urban Development:		
	Resident Questionnaire for Investigations of Children with EBLLs		



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