

What's New?

Updated Screening and Testing Guidelines

The South Dakota Childhood Lead Poisoning Prevention Program (SD CLPPP) recognizes there is **NO safe level of lead in the blood** and recommends the following:

- Universal testing of children at ages **12 months and 24 months**.
 - Catch-up testing if a child does not have two blood lead tests by age 3 years.
 - Additional targeted testing may be needed for children aged 6 months and then once a year until age 6 based on the risk assessment questions.
-

Risk Assessment Questions

The risk assessment questions below can help identify a possible risk of exposure to lead hazards. If the answer to any question on the Verbal Risk Assessment is **"Yes" or "I don't know"** a **blood lead level test should be performed**.

- Does the child live in or regularly spend time in a home built before 1978? *(This is especially important if there is chipping or peeling paint or if a renovation was completed in the past year.)*
 - Does the child live with a parent or caregiver who works in an occupation with frequent lead exposure? *(Examples include plumbing, construction, auto repair, metal/battery recycling, and welding.)*
 - Does the child have a sibling or playmate with a blood lead level of 3.5 µg/dL or higher? Or has a parent or caregiver expressed concern about lead exposure and requested a lead test?
 - Has the child recently arrived in the U.S. as an immigrant, refugee, or foreign adoptee?
-

Testing Recommendations for Certain Populations

Medicaid: The Centers for Medicare and Medicaid Services (CMS) recommends for Medicaid-enrolled children:

- Blood lead level testing (e.g., capillary or venous) should be performed at ages 12 and 24 months.
- Children 36–72 months who missed recommended testing at a younger age should be tested.

Immigrants, Refugees, and Foreign Adoptees: The Centers for Disease Control and Prevention (CDC) recommends initial and repeat (3-6 months later) blood lead testing for the following:

- All refugee children birth to 16 years old
- All pregnant and lactating women and girls

Timing of Follow-Up Testing

For children identified with lead in blood ($\geq 3.5 \mu\text{g/dL}$), the tables below will help ensure appropriate follow up.

If the capillary blood lead level is $\geq 3.5 \mu\text{g/dL}$, follow the recommended schedule for a confirmatory venous sample

Capillary BLL	Retest Within*
3.5 - 9 $\mu\text{g/dL}$	3 months
10 - 44 $\mu\text{g/dL}$	1 month
45 - 59 $\mu\text{g/dL}$	48 hours
60 - 69 $\mu\text{g/dL}$	24 hours
$\geq 70 \mu\text{g/dL}$	Immediately

If the confirmatory venous sample is $\geq 3.5 \mu\text{g/dL}$, follow the recommended schedule for follow-up testing

Venous BLL	Follow-Up Venous Test Schedule	Long-Term Follow-Up**
3.5 - 9 $\mu\text{g/dL}$	3 months	6-9 months
10- 19 $\mu\text{g/dL}$	Within 3 months	3-6 months
20 - 44 $\mu\text{g/dL}$	2 weeks-1 month	1-3 months
$\geq 45 \mu\text{g/dL}$	Repeat venous blood test immediately	Based on chelation protocol

*The higher the BLL on the screening test, the more urgent the need for confirmatory venous test.

**Health care providers may choose to repeat blood lead tests within a month to ensure that their BLL level is not rising more quickly than anticipated.

South Dakota Lead Poisoning Prevention Contacts

- **Call:** 605-773-3737 for questions regarding elevated blood lead case management.
- **Fax:** 605-773-5509 to send results or submit via Secure website: sd.gov/diseasereport
- **Mail or courier, address to:**
Infectious Disease Surveillance, Department of Health
615 East 4th Street, Pierre, SD 57501; marked "Confidential Disease Report"

Resources

- South Dakota Department of Health: <https://doh.sd.gov/diseases/infectious/Blood-Lead/Resources.aspx>
- CDC: <https://www.cdc.gov/nceh/lead/advisory/acclpp/actions-blls.htm>
- Pediatric Environmental Health Specialty Unit (PEHSU):
<https://www.denverhealth.org/services/community-health/pediatric-environmental-health-specialty-unit>
- South Dakota Poison Center: <https://sdpoison.org/>



STATE EPIDEMIOLOGIST
Epidemiology, Surveillance, and Informatics Center

