Regulatory Changes
Commissioner Letter

Providers enrolled in NYSIIS

- Provider Organizations
  - American Academy of Pediatrics
  - American Academy of Family Physicians
- Regional Lead Resource Centers
- Posted on NYSDOH website: www.health.ny.gov/lead
Information Shared with Health Care Providers

- September 2019 – Released new guidance
  - “Guidelines for Health Care Providers for the Prevention, Identification, and Management of Lead Exposure in Children” (Full Guidelines and Quick Reference Guide)

- September to October 2019 – Released new educational materials and provider tools

- October to December 2019 – NYSDOH presentation series

- Ongoing efforts in parallel to increase public awareness
Provider Lecture Series

Metropolitan / Hudson Valley Region
- The Children’s Hospital at Montefiore

Central / Eastern Regions
- SUNY Upstate Medical University
- Albany Medical College

Western Region
- Kaleida Health / Oishei Children’s Hospital
- University of Rochester Medical Center
Quick Reference Guide: Management of Children According to Blood Lead Level (BLL)

Note: On May 17, 2017 the U.S. Food and Drug Administration advised that Megelain Diagnostics' LeadCare® analyzers should no longer be used with venous blood samples (https://www.fda.gov/news-events/press-announcements/advisory-panel-recommends-withdrawal-megelain-diagnostic-leadcare-analyzers). All confirmatory and follow-up venous samples must be analyzed by a New York State approved lab for toxicology blood lead comprehensive testing. 1

- The higher the blood lead level, the more urgent the need for confirmatory venous testing and timely follow-up testing.
- If repeated attempts to obtain a venous confirmatory sample are unsuccessful, a second capillary sample may be used to guide follow-up actions to avoid significant delays in management. However, as capillary samples can yield false results, false positive venous confirmatory sample should still be pursued.

<table>
<thead>
<tr>
<th>BLL (µg/dL)</th>
<th>Capillary Sample with a Venous Sample Follow-Up Venous Testing Schedule</th>
<th>Management of Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;0 5/10 15</td>
<td>No confirmatory test. Average BLL. Allows for a child’s age 1-5 years at 0.8 µg/dL.</td>
<td>No action. Refer to Management course.</td>
</tr>
</tbody>
</table>
| 10-19 | Venous test as soon as possible but no later than 3 months. | Test all children at age 1 year and again at age 2 years, regardless of risk level. At child’s 10th birthday, perform a lead exposure Risk Assessment (PA) and at every visit until child is 1 year, and tests again for lead risk is found.
Provide anticipatory guidance 2 to parent or guardian regarding levels of lead exposure and ways to prevent exposure. |
| 20-29 | Venous test as soon as possible but no later than 3 months. | Every 1-3 months until BLLs are confirmed to be <1 µg/dL, based on two tests at least 3 months apart. Proceed as above for <1 µg/dL. |
| 30-39 | Venous test as soon as possible but no later than 3 months. | Every 1-3 months until BLLs are confirmed to be <5 µg/dL, based on two tests at least 3 months apart. Proceed as above for <5 µg/dL. |
| 40-49 | Venous test as soon as possible but no later than 1 week. | Consult with a Regional Lead Resource Center 2 for guidance on a follow-up venous testing schedule until the child is 2-3 years old. Proceed as above for <3-4 µg/dL. |
| 50-69 | Venous test as soon as possible but no later than 48 hours. | All activities above AND: Consult with a Regional Lead Resource Center 2. |}

Clinical Lead Risk Assessment Questions for All Children Less than 8 Years

1. Does your child live or regularly visit a building with potential lead exposure, such as peeling or chipping paint, recent or ongoing renovation or remodeling, or high level of litter in the drinking water? 2
2. Are your child’s dwellings built before 1978? Have they been lead-based painted? 3
3. Does your child regularly attend daycare, preschool, school, homes of babysitters, or relatives? 4
4. Do you have any children or teenagers in your household 5 years of age or younger? 4
5. Does your child often frequent locations where children play outdoors such as schools, playgrounds, any public places, or parks? 4

**Clinical Lead Risk Assessment**

**Current Risk Factors:**
- Symptoms of lead exposure: previous blood lead test results, history of lead poisoning, dietary history, environment, county at risk, education status, and location of residence.
- Family history, recent moves, education level, and social security numbers.
- Medical history, previous lead exposure, and other blood test results.

**Previous Risk Factors:**
- Age and condition of home and other places where lead exposure occurs (play area, presence of lead painting on window frames, furniture, toys, or trampolines).
- Presence of children, family history, education level, and social security numbers.
- Medical history, previous lead exposure, and other blood test results.

**Physical Environment:**
- Presence of lead decoration, lead-based paint, and lead-based materials.
- Presence of lead-based paint, lead-based materials, and lead-based decorative objects.
- Presence of lead-based paint, lead-based materials, and lead-based decorative objects.

**Nourishment:**
- Presence of lead-based paint, lead-based materials, and lead-based decorative objects.
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**Developmental Assessment:**
- Presence of lead-based paint, lead-based materials, and lead-based decorative objects.
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**Laboratory Tests:**
- Presence of lead-based paint, lead-based materials, and lead-based decorative objects.
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**References:**
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1. Lead exposure risk assessment guidelines are available at the Centers for Disease Control and Prevention website (https://www.cdc.gov/nceh). 2. A lead exposure Risk Assessment (PA) is a tool for identifying children who may be at risk for lead exposure. These may include: tests, test results, children’s ages, associated with a lead exposure Risk Assessment (PA) and at every visit until child is 1 year, and tests again for lead risk is found. 3. A lead exposure Risk Assessment (PA) is a tool for identifying children who may be at risk for lead exposure. These may include: tests, test results, children’s ages, associated with a lead exposure Risk Assessment (PA) and at every visit until child is 1 year, and tests again for lead risk is found. 4. National Childhood Lead Poisoning Prevention Program (https://www.cdc.gov/nceh). 5. A lead exposure Risk Assessment (PA) is a tool for identifying children who may be at risk for lead exposure. These may include: tests, test results, children’s ages, associated with a lead exposure Risk Assessment (PA) and at every visit until child is 1 year, and tests again for lead risk is found.
New Resources for Providers and Patients
Does your child need a lead test?

1. Does your child live in or regularly visit a building built before 1978 with potential lead exposures, such as peeling or chipping paint, recent or ongoing renovation or remodeling, or high levels of lead in the drinking water?  
   - YES  
   - NO  
   - NOT SURE

2. Has your child spent any time outside the United States in the past year?  
   - YES  
   - NO  
   - NOT SURE

3. Does your child live or play with a child who has an elevated blood lead level?  
   - YES  
   - NO  
   - NOT SURE

4. Does your child have developmental disabilities, put nonfood items in their mouth, or peel or disturb painted surfaces?  
   - YES  
   - NO  
   - NOT SURE

5. Does your child have frequent contact with an adult who may bring home traces of lead from a job or hobby such as: house painting, plumbing, renovation, construction, auto repair, welding, electronics repair, battery recycling, lead smelting, jewelry, stained glass or pottery making, fishing (weights, "sinkers"), firearms, or collecting lead or pewter figurines?  
   - YES  
   - NO  
   - NOT SURE

6. Does your family use traditional medicines, health remedies, cosmetics, powders, spices, or food from other countries?  
   - YES  
   - NO  
   - NOT SURE

7. Does your family cook, store, or serve food in crystal, pewter, or pottery from other countries?  
   - YES  
   - NO  
   - NOT SURE

8. Did your child miss a lead test? New York State requires all children be tested for lead at age 1 and again at age 2.  
   - YES  
   - NO  
   - NOT SURE

If you answered "YES" or "NOT SURE" to any of these questions, your child may need a blood lead test.

Lead is a concern, especially for children under age 6. It's important for you and your health care provider to know your child's blood lead level.

www.health.ny.gov/leadTestKids
What Your Child’s Blood Lead Test Means

The blood lead test tells you how much lead is in your child’s blood. Lead can harm a child’s growth, behavior, and ability to learn. The lower the test result, the better.

Most lead poisoning occurs when children lick, swallow, or breathe in dust from old lead paint. Most homes built before 1978 have old lead paint, often under newer paint. If paint peels, cracks, or is worn down, the chips and dust from the old lead paint can spread onto floors, windowills, and all around your home. Lead paint dust can then get onto children’s hands and toys, and into their mouths.

Most children who have had some contact with lead in old paint, soil, plumbing, or another source. This is because New York State requires doctors to test all children with a blood lead test at age 1 year and again at age 2 years. For children up to age 6 years, your doctor or nurse should ask you if every well child visit about ways your child may have had contact with lead. Children who have had contact with lead should be tested.

A test result of 5 µg/dL or greater, using blood from a finger, should be checked again with a second test using blood taken from a venipuncture (in the arm). If the second result is still 5 µg/dL or greater, you should follow the steps below.

**Test Result**

- **0-4**: There is very little lead in your child’s blood.
  - The average lead test result for young children is about 14 micrograms per deciliter (µg/dL).

- **5-14**: Your child’s lead level is high. A result of 5 µg/dL or higher requires action.
  - Your doctor or nurse will talk with you about your child’s diet, growth, and development, and possible sources of lead.
  - Your local health department will talk with you about how to protect your child and will visit your home to help you find sources of lead.
  - Your child should be tested again in 1 to 3 months.

- **15-44**: Your child’s lead level is quite high. You and your doctor should act quickly.
  - Your doctor or nurse will talk with you about your child’s diet, growth, and development, and possible sources of lead.
  - Your local health department will talk with you about how to protect your child and will visit your home to help you find sources of lead.
  - Your child should be tested again in 1 month or sooner depending on the blood lead level and your doctor’s guidance.

- **45 or higher**: Your child needs medical treatment right away.
  - Your doctor or local health department will call you as soon as they get the test result.
  - Your child might have to stay in a hospital, especially if your home has lead.
  - Your local health department will visit your home to help you find sources of lead.
  - Your child should not go back home until the lead sources are removed or fixed.
  - Your child needs to be tested again after treatment.

**Next Steps**

**0-4**
- Wash your child’s hands before eating.
- Wash hands before eating.

**5-14**
- Keep children away from peeling or chipped paint.
- Before making repairs in a home built before 1978, call your local health department to learn how to work safely and keep dust levels down.
- Children and pregnant women should stay away from rooms that contain old paint, such as sanding and scraping. They should stay away until the area is cleaned using wet cleaning methods and a HEPA vacuum (dry-sweeping is not enough).

**15-44**
- Fix peeling lead paint and replace home repairs safely.
- Wash dust off hands, toys, bottles, window, and floors.
- Be careful not to bring lead home on clothes, toys, or jewelry.

**45 or higher**
- Fix peeling lead paint and replace home repairs safely.
- Wash dust off hands, toys, bottles, window, and floors.
- Be careful not to bring lead home on clothes, toys, or jewelry.

**How to Protect Your Child From Lead Poisoning**

- Keep lead out of your food and tap water.
- Serve foods that have calcium, iron, and vitamin C.

Find out more about lead.

www.health.ny.gov/lead

**Child’s Name:** Test Result: µg/dL Date: 

If the test result is not written here, ask your doctor or nurse for it, write it down, and save for your records.

For all test results, follow the advice on the other side to keep your child’s lead level from rising.

Find out more about lead.

www.health.ny.gov/lead
Good Nutrition Helps: Reduce the Effects of Lead!

Lead can harm children’s growth, behavior and ability to learn, and can affect them for life. Lead can also be a problem for adults, especially pregnant women and their babies. However, when there is nutritious food in the body, it is difficult for lead to be absorbed.

**Eat a variety of these nutritious foods**

- **Calcium**
  - Makes it hard for lead to enter the body
  - Dairy products
    - Sweet potatoes
    - Dried fruits
- **Iron**
  - Protects against harmful effects of lead
  - Eggs
  - Peanut butter
  - Whole grain breads and cereals
- **Vitamin C**
  - Helps the body absorb calcium and iron better
  - Peppers
  - Fruits (e.g., strawberries)
  - Tomatoes
  - Almonds

**Some foods are good sources of both calcium and iron**

- Dark green vegetables
- Soy products
- Beans, peas, and lentils
- Almonds

**Did You Know?**

- The most common cause of lead poisoning is dust and chips from old paint. Lead can also be found in some products imported from the Middle East, Latin America, South Asia, and China.

**Remember!**

- Children may not look or act sick, but a blood test could show that they have high lead levels.
- New York State requires health care providers to test all children for lead with a blood lead test at age 1 year and again at age 2 years.
- Learn more about how you can protect your family from lead at [www.health.ny.gov/lead](http://www.health.ny.gov/lead) or contact your local health department.

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**Eat a Variety of Nutritious Foods to Help Reduce the Effects of Lead**

- **Iron**
  - Protects against harmful effects of lead
  - Peanut butter
  - Whole grain breads and cereals
- **Calcium**
  - Makes it hard for lead to enter the body
  - Lean meats, fish, and seafood
  - Eggs
  - Dried fruits
- **Vitamin C**
  - Helps the body absorb calcium and iron better
  - Peppers
  - Fruits (e.g., strawberries)
  - Tomatoes
  - Potatoes

- **Some foods are good sources of calcium and iron**
  - Sweet potatoes
  - Dairy products
  - Soy products
  - Beans, peas, and lentils
  - Dark green vegetables

Learn more about how you can protect your family from lead at [www.health.ny.gov/lead](http://www.health.ny.gov/lead) or contact your local health department.
Other Health Care Provider Opportunities

New York State Department of Health CLPPP Grantees 2019-2020

Healthy Neighborhoods Program

First 1000 Days on Medicaid

Prevention Agenda 2019-2024
Media Campaign

- To raise awareness by HCPs and parents about the importance of blood lead testing at both one and two years of age

- Data used to identify counties and municipalities where children were at higher risk of exposure to lead and where no media outreach had been performed

- Combination of posters in bus shelters and laundromats, and social media
Bus Shelter Ads
Laundromat Ad Boards
Social Media

Learn More

@HealthNYGov

Lead can harm your child’s growth, behavior and ability to learn. Talk to their doctor about lead and schedule a blood lead test if needed.

Test for Lead at Ages 1 and 2.

nysdoh

Your baby probably looks and feels healthy, but they could still have been exposed to lead.
Outcome

• 72 bus shelter and 167 laundromat ads delivered over 9,000,000 impressions.

• Social media traffic ads delivered over 800,000 impressions and almost 3,000 clicks to the NYSDOH Lead Poisoning Prevention home page.

• Social media reach ads delivered over 1,600,000 impressions and almost 1,500 clicks to the NYSDOH Lead Poisoning Prevention home page.
Health Care Provider Underperformance Initiatives
Health Care Provider Testing Updates

1 YEAR OLD ANNUAL TESTING RATE BY YEAR

2 YEAR OLD ANNUAL TESTING RATE BY YEAR

As of Jan. 15, 2020
61.74%

As of Jan. 15, 2020
59.43%
Launched October 2019

- Assist all providers in being more aware of their lead testing performance to encourage improvement

- 224 report cards have been generated by providers
Addressing Underperforming Providers

- Letter sent to underperforming health care provider practices in NYS (outside of NYC)
- Information shared with local health departments to aid in their outreach efforts
- Feedback included:
  - Assisting providers with questions about reporting of LeadCareII® results to NYSDOH (20)
  - Assisting providers with NYSIIS functionalities, i.e., generating reports, changing patient status, and updating organization information (13)
2019 Letter

- Data informed by New York State Immunization Information System (NYSIIS) Reports
- Practices testing less than 25% of eligible children
  - 1 year old test: 87 practices
  - 2 year old test: 79 practices
  - 1 and 2 year old test: 461 practices

Lead Testing among NYS Health Care Providers in 2018
1 and 2 year old test
2020 Letters

Lead Testing among NYS Health Care Providers in 2019
1 and 2 year old test

Number of Practices Identified

<table>
<thead>
<tr>
<th>Percentage of Children under 6yo in Practice Tested</th>
<th>Number of Practices Identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - &lt;25%</td>
<td>434</td>
</tr>
<tr>
<td>0 - &lt;25%</td>
<td>741</td>
</tr>
<tr>
<td>50 - &lt;75%</td>
<td>460</td>
</tr>
<tr>
<td>75-100%</td>
<td>83</td>
</tr>
</tbody>
</table>
Next Steps

- Letters anticipated to be sent in late Winter 2020
- Continue to respond to inquiries and track feedback
- Continue to develop guidance and share resources for local health departments and payers to assist providers with testing and reporting barriers
- Perform repeat analysis for 2020
Questions?