

CHILDHOOD LEAD POISONING PREVENTION BRANCH

Standard of Care on Screening for Childhood Lead Poisoning

State regulations impose specific responsibilities on doctors, nurse practitioners, and physician assistants doing periodic health care assessments on children between the ages of 6 months and 6 years. This is a brief summary of health care providers' responsibilities. These regulations apply to all physicians, nurse practitioners, and physician assistants, not just Medi-Cal or Child Health and Disability Prevention (CHDP) providers.

Anticipatory Guidance: Required for all children at each periodic assessment from 6 months to 6 years.

Health care providers who perform periodic health assessments for children are required to inform parents and guardians about:

- The risks and effects of childhood lead exposure.
- The requirement that children in Medi-Cal should be blood lead tested.
- The requirement that children not in Medi-Cal who are at high risk of lead exposure should also be blood lead tested.



Screen (Blood lead test)	All children in publicly supported programs such as Medi-Cal, Women, Infants and Children (WIC), and CHDP at both 12 months and 24 months of age.
Assess	<p>If child is not in a publicly supported program, at both 12 months and 24 months of age:</p> <p><i>Ask: "Does your child live in, or spend a lot of time in, a place built before 1978 that has peeling or chipped paint or that has been recently remodeled?"</i></p> <p>>> Blood lead test if the answer is "yes" or "don't know." <<</p>

If either of these mandates is missed, catch-up is required:

For children in publicly supported programs:

- If a blood lead test was not performed at *12 months of age*, catch-up testing is mandated for children *between 12 and 24 months of age*.
- If a blood lead test was not performed at *24 months of age or later*, catch-up testing is mandated for children *between 24 and 72 months of age*.

For children not in publicly supported programs:

- If an assessment was not performed at *12 months of age*, an assessment (followed by a blood lead test, if found to be at risk) is mandated for children *between 12 and 24 months of age*.
- If an assessment was not performed at *24 months of age or later*, an assessment (followed by a blood lead test, if found to be at risk) is mandated for children *between 24 and 72 months of age*.

Other indications for a blood lead test *

- Suspected lead exposure (possible sources of lead)(PDF)
- Parental request
- Recent immigrant from country with high levels of environmental lead
- Change in circumstance has put child at risk of lead exposure
**not in regulations, but should also be considered*

Why Assess and Screen (test)?

- Low levels of lead exposure have lasting neurodevelopmental effects.
- Screening may help prevent further exposure.
- Early lead exposure can have long term health consequences: cardiovascular, cerebrovascular, endocrine, renal.
- Providers expressing concern and educating families regarding potential risk factors will have a major impact on preventing lead exposure.
- Since lead exposure at low levels may not cause overt symptoms, at-risk children may not be identified and therefore would not receive appropriate treatment or environmental investigation
- **State requirement**

If you have any comments or questions, please contact your local Childhood Lead Poisoning Prevention Program or contact the Childhood Lead Poisoning Prevention Branch directly at (510) 620-5600. You may also use our provider email at CLPPB_provider_outreach@cdph.ca.gov.

Read the entire code of regulations.

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