



## **Iowa Lead Poisoning Risk Questionnaire and Blood Lead Testing Guidelines** ***Recommendations for testing children under 6 years in age.***

The following recommendations for blood lead testing and use of the lead poisoning risk questionnaire are a collaborative effort of the Childhood Lead Advisory Workgroup (CLAW) on Blood Lead Testing Policy and Training. This workgroup is comprised of pediatricians and primary care providers, public health officials, University of Iowa Healthcare, Iowa Poison Control Center, University of Iowa Institute of Public Health Research and Policy, and the Iowa Department of Health and Human Services (HHS).

Lead exposure is dangerous and can seriously harm a child's health. CDC states that no level of lead in a child's system is safe. Only a blood lead test can tell if a child has an abnormal exposure to lead. Children with elevated test results require additional testing and follow-up to decrease further exposure and limit damage to the long-term health of the child. Exposure risks change over time as a toddler becomes more active.

While lead paint is a common exposure source of lead for mobile babies and toddlers because of high hand to mouth activity, older children may still be exposed to consumer products, may have spent time in a foreign country, may engage in or be exposed to certain hobbies and may show evidence of PICA.

### **Blood Lead Testing**

Primary care providers should test children for elevated blood lead levels according to federal, local, and state requirements. Federal Medicaid requirements mandate all children enrolled in Medicaid, regardless of whether coverage is funded through Title XIX or XXI, are required to receive blood lead tests at ages 12 months and 24 months. Iowa Health and Human Services, Division of Public Health, Childhood Lead Poisoning Prevention Program recommends testing of all children, including non-Medicaid children at 12 months and 24 months. For all other visits and ages beginning at 6 months up to 6 years in age, please reference the Lead Poisoning Risk Questionnaire.

### **Lead Poisoning Risk Questionnaire**

Complete the lead poisoning risk questionnaire to assess the risk of lead exposure for all children under 6 years in age during all provider and clinic health care visits beginning at 6 months:

- If responses to all the questions are **"NO,"** screen at every well child visit in case there have been changes to the child's environment or more often if deemed necessary.
- If any response is **"YES"** or **"DON'T KNOW,"** obtain a blood lead test and provide information about risks of lead and benefits of nutrition, hygiene, and cleanliness.

**For more information, contact the**  
**Iowa Childhood Lead Poisoning Prevention Program at 800-972-2026**



## Iowa Childhood Lead Poisoning Risk Questionnaire

Name of patient: \_\_\_\_\_ DOB: \_\_\_\_\_

Date: \_\_\_\_\_ Address: \_\_\_\_\_

### PERFORM RISK QUESTIONNAIRE FOR CHILDREN 6 MONTHS TO 6 YEARS AT WELL VISITS

#### A blood lead test is recommended for all children at 12 and 24 months.

If there are 'yes' or 'don't know' responses on the questionnaire:

- Provide education about risks of lead and benefits of nutrition, hygiene and cleanliness
- Perform a blood lead test.

If responses to all the questions are 'no':

- Re-evaluate at every well child visit or more often if deemed necessary

Questions	Yes or Don't Know	No
1. Since the last lead screening, has your child lived in or spent time in a home, childcare or other building built before 1978?	<input type="checkbox"/>	<input type="checkbox"/>
2. Since the last lead screening, has your child lived in or visited a home, childcare or other building with ongoing renovation, repairs or remodeling?	<input type="checkbox"/>	<input type="checkbox"/>
3. Since the last lead screening, has your family used products from other countries such as pottery, health remedies, spices, or food? <i>Examples:</i> <ul style="list-style-type: none"><li>• Traditional medicines such as Ayurvedic, greta, azarcón, alarcón, alkoohl, bali goli, coral, ghasard, liga, pay-loo-ah, and rueda</li><li>• Cosmetics such as kohl, surma, and sindor</li><li>• Imported or glazed pottery, imported candy, and imported nutritional products</li><li>• Foods and spices (especially turmeric, chili, paprika and cumin) imported from outside the U.S. or purchased from international specialty food stores</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does your child eat or chew on non-food things like paint chips, dirt, jewelry, keys, window frames or other metal or painted objects?	<input type="checkbox"/>	<input type="checkbox"/>
5. Since the last blood lead screening, has your child lived in or spent time in a foreign country?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your child come in contact with an adult whose job or hobby involves lead exposure? <i>Examples:</i> <ul style="list-style-type: none"><li>• Building repair, renovation or painting</li><li>• Fishing (making lead sinkers)</li><li>• Manufacturing (auto or industrial equipment parts, or batteries)</li><li>• Antique furniture (refinishing)</li><li>• Metal repair or recycling (scrap metal, electronics, vehicle radiators)</li><li>• Pottery making or glazing</li><li>• Metal Welding</li><li>• Firearms [target practice, indoor/outdoor shooting ranges, ammunition (making, casting or reloading)]</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your child have a family member or friend who has or recently had an elevated blood lead level?	<input type="checkbox"/>	<input type="checkbox"/>

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"Blood lead concentrations of children who live in lead contaminated environments typically increase rapidly between 6 and 12 months of age, peak between 18 and 36 months of age, and then gradually decrease."  
– American Academy of Pediatrics