Lead Risk Screening Questionnaire



Instructions

All children between the ages of 6 and 72 months, enrolled in the Mississippi Medicaid Program, must be screened at each well-child visit using this Lead Risk Screening Questionnaire.

- If responses to all questions are "NO", re-evaluate at the next well-child visit or more often if necessary.
- If any response is "YES" or "DON'T KNOW" a blood lead test must be obtained.

Note: Any child identified with a capillary lead level of $\geq 3.5 \mu g/dL$, <u>must</u> receive a confirmatory venous test.

Benefi	ciary Name:	DOB:	
Provider's Name: Administered by:		Date:	
Questions		YES, or DON'T KNOW	NO
1.	Was your home built before 1978?		
2.	Does the child spend at least six hours a week in a house, childcare facility or other building that was built before 1978?		
3.	Has the child recently visited or arrived from a foreign country?		
4.	Is the child frequently exposed to an adult that has a hobby, or works in a profession that could expose the adult to lead? Examples include: Shooting firearms during target practice, making pottery/ceramics, applying glaze or pigments containing lead, making fishing weights or bullets, home repair/renovation/painting (if built before 1978), jewelry making/repairing, paintim or sanding on industrial equipment and steel structures (e.g., bridges and water towers), refinishing furniture, work with stained glass, metal work/welder, plumber, Automative repair shop or salvage/junkyard, chemical refining, ammunition manufacturer, recycling materials (e.g., stripping electronics), fabrication of artistic or individual products (e.g., mixing or applying leaded ceramic glaze, glasswork, or stained-glass windows), industrial mineral processing activities, such as mining, extraction, or smelting, glass/plastic/rubber product manufacturing, farm/migrant farm work, regularly uses insecticides, recycling facility work, shipbreaking (also known as ship scraping, ship disposal, or ship recycling).		
Ę	5. Have you observed the child mouthing or touching painted surfaces (such as windowsills, doors, and door frames), keys, electrical cords, jewelry, ceramics (such as figurines), vinyl (plastic) mini-blinds, exterior painted surfaces, and bare soil?	h	
e	 Does the child's family use lead crystal or imported candy, spices, cookware, pottery or ceramic ware for food or drink, health remedies or cosmetics for religious or ceremonial purposes? Examples include: Traditional medicines such as greta, azarcón, ruedo, kurm, kum, kajal, maria luiso, alarcón, ligo, litargino, jin bu huan, po ying tan, ghasard, payloo-ah, bo-ying compound, or ayurvedic Cosmetics such as kohl, surma, and sindoor 		
7	7. Does the child play with or around old toys (heirloom toys) or touch old painted/stained furniture or leather/vinyl furniture?		
8	B. Does the child live near or frequently visit a location within a city block of an active lead smelter, battery recycling plant, firing range, auto salvage yard, mine chemical plant, waste incinerator, utility plant, ore and metals processing plant or heavy traveled road where soil and dust maybe contaminated with lead?		
ç	Has anyone in the household been diagnosed with an elevated lead level or displayed symptoms of development delay?		
1	0. Does the child live at or frequently visit a location that uses water from a private well?		

Report any blood lead level of $\geq 3.5 \mu g/dL$ or greater to the MS Department of Health Lead Poisoning Prevention and Healthy Homes Program using the Lead Levels Reporting Form (ms.gov).

Additional information regarding Lead testing is available on the Centers for Disease Control and Prevention (CDC) website (<u>https://www.cdc.gov/lead-prevention/testing/index.html</u>).