



LEAD POISONING

Idaho Lead Testing and Follow-up for Immigrants and Refugees

Recommendations for Refugee and Other Newcomer Children, Pregnant and Lactating Women Resettled in the United States

TESTING TABLE	
When	Who
Obtain initial blood lead test result within 90 days of arrival	<ul style="list-style-type: none">• All infants and children ≤ 16 years of age• Adolescents > 16 years of age if high index of suspicion or clinical signs or symptoms of lead exposure are present• All pregnant and lactating women*
Obtain follow-up blood lead test result within 3-6 months after initial test	<ul style="list-style-type: none">• All infants and children ≤ 6 years of age regardless of initial BLL result• Children and adolescents > 7 years of age with initial BLL result ≥ 3.5 µg/dL**• Children and adolescents > 7 years of age with a risk factor (i.e., sibling with EBLL, environmental exposure risk factors) regardless of initial BLL result• Pregnant and lactating women with initial BLL ≥ 3.5 µg/dL**

* All newly arrived pregnant and lactating women should be prescribed a prenatal or multivitamin with adequate iron and calcium. Referral to a healthcare provider with expertise in high-risk lead exposure treatment and management might be indicated for elevated BLLs.

** Obtain confirmatory and follow-up venous testing sooner than 3-6 months if BLLs are significantly elevated. See confirmatory and follow-up testing schedule for details.

Key Points

- Immigrant and refugee children from developing countries are at higher risk of being exposed to lead because of less strict rules protecting children from lead, in their country of origin.
- Consider exposures that might have previously occurred in the child's country of origin and exposures that could be ongoing.
- Consider malnutrition and nutritional deficiencies (iron, calcium, vitamins C & D) that can cause increased lead absorption.
- For refugees, the initial blood lead test should be performed as part of the comprehensive U.S. Domestic Medical Examination within 90 days of arrival. If the blood lead level (BLL) is elevated, providers should follow the confirmatory and follow-up testing schedule.

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- To learn more about potential sources of lead exposure in refugee and other newcomer children, pregnant and lactating women, check out these resources:
- Lead - Immigrant, Refugee, and Migrant Health (CDC): https://www.cdc.gov/immigrant-refugee-health/hcp/domestic-guidance/lead.html?CDC_AAref_Val=https://www.cdc.gov/immigrantrefugeehealth/guidelines/lead-guidelines.html
- Refugees - Childhood Lead Poisoning Prevention (CDC): [Risk Factors and Refugees and Immigrants | Childhood Lead Poisoning Prevention | CDC](#)
- Traditional Sources of Lead Exposures in Immigrant Populations - for Clinicians (NW PEHSU): <https://deohs.washington.edu/pehsu/sites/deohs.washington.edu/pehsu/files/May%202019/immigrant%20lead%20exposures%20CLINICIANS.pdf>
- Traditional Sources of Lead Exposures in Immigrant Populations - for Community Members (NW PEHSU): <https://pehsu.deohs.washington.edu/sites/pehsu/files/May%202019/immigrant%20lead%20exposures%20COMMUNITY%20MEMBERS.pdf>



For additional information contact:

Idaho Department of Health and Welfare

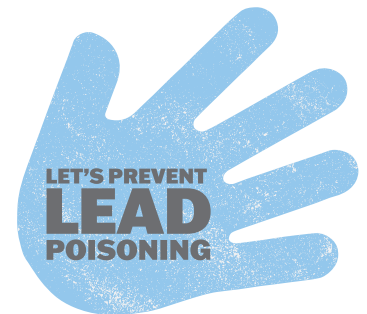
Environmental Health Program

Childhood Lead Poisoning Prevention Program

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phone: 800-455-8647

Website: healthandwelfare.idaho.gov/lead-poisoning



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