

When a Child Tests Positive for High Levels of Lead

The Chicago Department of Public Health offers case management to patients who test positive for high levels of lead.

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What should families do if their child has high levels of lead in their blood? When a case manager is assigned, CDPH will reach out directly to the family for next steps. If the family has questions, they can call the Lead Poisoning Hotline at (312) 747 LEAD (747-5323).

You can help set expectations for case management & lead inspection

Share the following with your patients and their families:

- The family will be assigned a nurse case manager a nurse case manager will schedule a home visit with the family, conduct a developmental assessment, provide nutritional counseling, and make referrals for additional services as needed.
 - **Promote trust:** reassure the family this inspection is solely to evaluate lead levels to create a lead abatement plan.
- Notification of lead levels the family's case manager will coordinate a home inspection to determine if the home is the source of the lead.
- Completion of a home lead inspection if lead is detected the lead inspector and case manager will notify the property owner and child's family that lead has been found.

- Lead removal the lead inspector will work with a contractor on behalf of your patient and their family to approve a lead removal work plan for the home and property.
- Final inspection once the removal work is complete, the lead inspector will do a follow up inspection to ensure all lead has been removed from the home.

Remember

Parents and guardians may not be familiar with the dangers of lead poisoning and may feel hesitant to open their home to an inspector or case manager.

Reassure them that CDPH's involvement is **ONLY** only to reduce their child's lead level and remove lead hazards.





Anticipated Timeframe for Case Management / Environmental Investigation

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Response Timeframes Based on Lead Levels

CDPH will develop a lead abatement case plan based on the level of lead detected in your pediatric patient's blood. Use the chart to help set appropriate expectations for their parents or guardians.

Blood Lead Level	Assigned a Case Manager Within:	When Action Plan will Occur
0-4 μg/dL	None needed	None needed
5-14 μg/dL	Within 1 Month	Over the course of 3 months
15-19 μg/dL	Within 2 Weeks	Over the course of 2 months
20-29 μg/dL	Within 1–2 Weeks	Over the course of 1 month
30-44 μg/dL	Within 48 Hours	Over the course of 2 weeks
≥45 μg/dL	Within 24 Hours	Over the course of 1 week

Tips for Patients to Limit Lead Exposure & Absorption

As your patients are navigating lead abatement, you can share these tips to help them to reduce *further* lead exposure and absorption. These efforts will not lower lead already present in the body.



Explain that iron deficiency increases their risk for elevated blood lead levels and suggest a multivitamin.



Advise your patients to eat foods high in calcium, iron, and vitamin C for prevention.





