



Lead Risk Questionnaire

Purpose: To identify children who need to be tested for lead exposure

Instructions:

- If Yes or Don't Know, test the child immediately
- For more information, contact your county's local health department

Patient's Name: _____ DOB: _____ Medicaid #: _____

Provider's Name: _____ Administered by: _____ Date _____

Questions:

1. Does your child live in or visit a home, day-care or other building built before 1978?
2. Does your child live in or visit a home, day-care or other building with ongoing repairs or remodeling?
3. Does your child eat or chew on non-food things like paint chips or dirt?
4. Does your child have a family member or friend who has or did have an elevated blood lead level?
5. Is your child a newly arrived refugee or foreign adoptee?
6. Does your child come in contact with an adult whose job or hobby involves lead exposure?

Yes or Don't Know No

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
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Examples

- | | | | | | |
|--|--------------------------|---------------------------|--------------------------|-------------------|--------------------------|
| • House construction or repair | <input type="checkbox"/> | • Chemical preparation | <input type="checkbox"/> | • Radiator repair | <input type="checkbox"/> |
| • Battery manufacturing or repair | <input type="checkbox"/> | • Valve and pipe fittings | <input type="checkbox"/> | • Pottery making | <input type="checkbox"/> |
| • Burning lead-painted wood | <input type="checkbox"/> | • Brass/copper foundry | <input type="checkbox"/> | • Lead smelting | <input type="checkbox"/> |
| • Automotive repair shop or junk yard | <input type="checkbox"/> | • Refinishing furniture | <input type="checkbox"/> | • Welding | <input type="checkbox"/> |
| • Going to a firing range or reloading bullets | <input type="checkbox"/> | • Making fishing weights | <input type="checkbox"/> | • Other _____ | <input type="checkbox"/> |

7. Does your family use products from other countries such as pottery, health remedies, spices, or food?

Examples

- Traditional medicines such as Ayurvedic, greta, azarcón, alarcón, alkohl, bali goli, coral, ghasard, liga, pay-loo-ah, and rueda
- Cosmetics such as kohl, surma, and sindor
- Imported or glazed pottery, imported candy, and imported nutritional pills other than vitamins.
- Foods canned or packaged outside the U.S.

* **Elevated blood lead level is ≥ 3.5 $\mu\text{g}/\text{dL}$**

**Test
Immediately**