

### MARYLAND DEPARTMENT OF THE ENVIRONMENT

### Lead Poisoning Prevention Program

### Childhood Blood Lead Surveillance in Maryland

2004 Annual Report

September 2005



#### MARYLAND CHILDHOOD LEAD REGISTRY

#### 2004 ANNUAL SURVEILLANCE REPORT

#### **EXECUTIVE SUMMARY**

The Maryland Department of the Environment's statewide Childhood Lead Registry (CLR) performs childhood blood lead surveillance for Maryland. The CLR receives the reports of all blood lead tests done on Maryland children 0 - 18 years of age, and provides blood lead test results to local health departments as needed for case management and planning.

Since 1995, the registry has released a comprehensive annual report on statewide childhood blood lead testing. This current report presents the childhood blood lead test results for calendar year 2004 (CY 2004). All numbers are based on blood lead testing on children. The CLR does not receive any reports on lead screening based on the lead risk assessment questionnaire.

#### **CY 2004 Surveillance Highlights:**

- Baltimore City had the highest level of lead testing (35.9%), followed by Caroline County (33.4%), and Somerset County (31.6%).
- Because of improvement in address information, the Registry will no longer use provider's zip code address to assign child's county of residence.
- Data management system improved. The Childhood Lead Registry is maintained in the "Systematic Tracking of Elevated Lead Levels and Remediation" (STELLAR) surveillance system, obtained from Centers for Disease Control (CDC) Lead Poisoning Prevention Program. More CLR staff work occurred this year on quality control and assurance activities to improve data quality and timeliness. More than 90% of blood lead tests were reported to registry electronically. Electronic updates are now regularly provided to the Department of Health and Mental Hygiene (DHMH) and local health departments.
- The number of children tested showed a significant increase statewide (from 76,721 to 105,549.
- The number of children with elevated blood leads in 2004 increased, but the rate of EBL continued to decline compared to 2003. The number of children with blood lead levels above 10  $\mu$ g/dL, CDC's level of concern, increased to 1,811 or 1.7 % of children tested statewide from 1,719 but declined on a proportionate basis from 2.2% in 2003. Children with blood lead levels of 20  $\mu$ g/dL and above, or "significant elevations", decreased to 230 from 237 and the percentage decreased to 0.2% from 0.3% of children tested statewide.

#### **OVERVIEW**

#### LEAD POISONING IN MARYLAND

Lead is one of the most significant and widespread environmental hazards for children in Maryland. Children are at the greatest risk from birth to age six while their neurological systems are being developed. Exposure to lead can cause long-term neurological damage that may be associated with learning and behavioral problems and with lowered intelligence.

There has been a steady decline in childhood lead poisoning in Maryland over the past decade at all levels of exposure. The reduction has occurred both statewide (Figure One) and in areas of highest risk such as Baltimore City.

#### Sources of Childhood Lead Exposure

Lead paint dust from deteriorated lead paint or from renovation is the major source of exposure for children in Maryland. According to the US 2000 census, there are about 439,000 residential houses built before 1950 (95% likely to contain lead paint) and 692,000 houses built between 1950-1978 (75% likely to have lead paint.

Water, air, and soil, may provide low-level, "background" exposure, but rarely may cause childhood lead poisoning.

Imported products, parental occupations, hobbies, and imported traditional medicines occasionally may cause lead exposure among children.



Number of Children 0-72 Months Tested for Lead and Number Reported to Have Elevated Blood Lead (EBL\*): 1996-2004

**Figure One** 

\* Blood lead level >=10 µg/dL

Much of the decline in blood lead levels is the result of lead poisoning prevention efforts. Increased enforcement of Maryland's "Reduction of Lead Risk in Housing" law (Table One), increased awareness by parents and property owners of the hazards of lead poisoning, and improved maintenance of rental housing.

Calendar Year	Number of Certificates
1996	6,349
1997	14,045
1998	11,914
1999	11,320
2000	11,157
2001 <sup>1</sup>	19,349
2002	13,972
2003	12,517
$2004^2$	17,949

 Table One

 Number of Certificates Issued for Pre-1950 Residential Rental Properties

Source: Maryland Department of the Environment, Lead Poisoning Prevention Program, Enforcement Division

- 1. The "Reduction of Lead Risk in Housing" law requires each pre-1950 rental dwelling to be issued a Full Risk Reduction certificate at turnover. In 2001, at least 50% of the owner's affected properties were required to be in compliance with the Full Risk Reduction Standard. 100% compliance is required in 2006.
- 2. Effective October 1, 2004, the law requires rent court Judges and local housing registry officials to not accept cases and applications from pre-1950 rental property owners who can not present lead certificates that indicate that their rental properties are in compliance with the Reduction of Lead Risk in Housing law.

Other factors contributing to the decline of blood lead levels are the movement of families away from older housing into more recently built city or suburban housing (Table Two), and outreach and education to families and health care providers.

I citchi OI vacancy OI nousing Units							
	1	990	2000				
Statewide	Total Units	Percent Vacant	Total Units	Percent Vacant			
1980+	408,082	9.7	727,020	6.6			
1950-1979	1,009,851	6.2	979,083	7.1			
Pre-1950	473,984	8.5	439,180	10.7			
<b>Baltimore City</b>							
1980+	16,171	10.4	21,662	7.7			
1950-1979	105,883	6.5	113,928	13.9			
Pre-1950	181,652	10.3	164,887	15.1			

Table Two Percent Of Vacancy Of Housing Units

Source: US Census Bureau, census of housing and population 1990, 2000.

#### State laws and regulations with impact on childhood lead poisoning

- ✓ Requirements to perform lead hazard reduction at each turnover in rental housing built before 1950. [Environment Article (EA) §6-8]
- ✓ Outreach programs to parents, health care providers, and property owners, especially in at-risk areas. [EA§ 6-8, Health Article §18-106]

Maryland requires that children living in "at-risk" areas be tested at ages one and two years. The State has a targeted testing plan that identifies "at-risk areas." Universal blood lead testing applies to Baltimore City children (Ordinance 20 effective July 2000) and children on Medicaid (required by EPSDT). The percentage of one and two year old children tested increased (Figure 2). The increase in the testing of pre-school aged children can probably be attributed to parents and healthcare providers' response to the school enrollment testing requirement in Health Article 18-106, which became effective for the school year starting September 2003.



Percent of Children One and Two Years Old Tested for Lead vs. Children of

Figure 2

\* Children 0-72 months old with highest blood lead test for each year.

Source: Maryland Department of the Environment, Childhood lead Registry, Statewide data: 1996-2004.

#### **Identifying Children with Lead Exposure**

The critical issue in childhood lead poisoning is early detection. Because there are no specific clinical symptoms, a blood lead test is the most reliable technique to identify children with elevated blood lead levels. If there is any suspicion that a child is exposed to lead, do a blood lead test. Maryland's Lead Poisoning Prevention Program has well-established case management and environmental investigation protocols for follow-up of lead poisoned children. A summary of Maryland's case management protocol is presented in Appendix A. The protocol will change in February 2006 when the Notice of EBL portion of the Reduction of Lead Risk in Housing law drops the level of EBL of venous 15  $\mu$ g/dL to EBL of venous 10  $\mu$ g/dL.

#### **Blood Lead Laboratory Reporting Requirement** The amended law and regulations<sup>\*</sup> of 2001 and 2002 require that: 1-Following child's demographic data should be included in each blood lead test reported: Date of Birth • Sex Address • Test date • Sample type • Blood lead level • 2- Blood lead results $\geq 20 \ \mu g/dL$ to be reported (fax) within 24 hours after result is known. All other results are to be reported every two weeks. 3- Reporting format should comply with the format designed and provided by the Registry. 4- Data should be provided electronically. \* EA 6-303, Blood lead test reporting (COMAR 26.02.01, Blood lead test reporting)

In calendar year 2004, 105,549 children 0-72 months were tested for lead exposure statewide. Table Three provides a summary of statewide statistics of blood lead testing in 2004, and Table Four provides the breakdown of blood lead testing and the status of lead poisoning by jurisdiction in 2004 Table Four-A provides numbers of children by age groups of 0-35 months and 36-72 months. Table Five shows summary results for 9 years at the State, Baltimore City and Counties levels.

	i Statistical Report			
Item	Number	Percent (%)		
Number to tests	130,117			
Number of children	105,549	100.0		
Age				
Under One	10,981	10.4		
One Year	33,011	31.3		
Two Years	23,732	22.5		
Three Years	13,450	12.7		
Four Years	14,409	13.7		
Five Years	9,966	9.4		
Age Unknown <sup>3</sup>	0	0.0		
Highest Blood Lead Level (µg/dL)				
0-4	93,401	88.5		
5-9	10,337	9.8		
10-14	1,210	1.1		
15-19	356	0.3		
20-24	127	0.2		
>=25	118	0.1		
Mean BLL (Geometric mean)	2.03			
Blood Specimen				
Capillary	14,274	13.5		
Venous	82,019	77.7		
Undetermined <sup>4</sup>	9,256	8.8		

Table ThreeCalendar Year (CY) 2004 Statistical Report<sup>1</sup>

1. For detailed analysis and breakdown of numbers refer to Supplementary Data Tables 1-5.

2. The 130,117 tests were from 124,168 children 0-18 years, of whom 105,549 were 0-72 months old. Data in this statistical table is based on children 0-72 months.

3. Reports with missing or wrong date of birth are assumed to be from children under six years of age.

4. In supplemental data tables blood tests with sample type unknown were counted as capillary.

Table Four
Maryland Department of the Environment
Lead Poisoning Prevention Program: Childhood Lead Registry

	Population	0		Children wi	th Elevated	Childre	n with
	of Ĉhildren	Children	Tested <sup>3</sup>	Blood Le	ad Level <sup>4</sup>	Lead Poi	isoning <sup>5</sup>
County <sup>1</sup>	0-72 Months <sup>2</sup>	Number	Percent	Number	Percent	Number	Percent
Allegany	4,747	1,329	28.0	24	1.8	3	0.2
Anne Arundel	41,895	6,806	16.2	27	0.4	6	0.1
Baltimore	57,205	14,947	26.1	108	0.7	10	0.1
Baltimore City	52,796	18,970	35.9	1,183	6.2	147	0.8
Calvert	6,504	838	12.9	0	0.0	0	0.0
Caroline	2,379	794	33.4	17	2.1	1	0.1
Carroll	12,938	1,323	10.2	13	1.0	1	0.1
Cecil	7,548	1,073	14.2	6	0.6	0	0.0
Charles	11,019	2,040	18.5	9	0.4	1	0.0
Dorchester	2,106	629	29.9	17	2.7	1	0.2
Frederick	17,865	2,796	15.7	22	0.8	2	0.1
Garrett	2,323	563	24.2	7	1.2	3	0.5
Harford	20,032	3,170	15.8	24	0.8	3	0.1
Howard	23,278	2,338	10.0	13	0.6	1	0.0
Kent	1,144	208	18.2	6	2.9	4	1.9
Montgomery	75,867	15,934	21.0	81	0.5	12	0.1
Prince George's	73,498	19,785	26.9	87	0.4	16	0.1
Queen Anne's	3,312	453	13.7	4	0.9	0	0.0
Saint Mary's	8,006	1,390	17.4	2	0.1	0	0.0
Somerset	1,508	477	31.6	10	2.1	3	0.6
Talbot	2,244	488	21.7	6	1.2	0	0.0
Washington	10,252	3,029	29.5	39	1.3	10	0.3
Wicomico	6,736	1,917	28.5	40	2.1	4	0.2
Worcester	2,904	675	23.2	11	1.6	2	0.3
County Unknown		3,577		55		0	
Total	448,106	105,549	23.6	1,811	1.7	230	0.2

Blood Lead Testing of Children 0-72 Months by Jurisdiction in 2004

1. County assignment in the order of priority is based on child's census tract, and child's zip code address.

2. Adapted from US Census Bureau age-sex population projection at the state level for 2004.

3. Blood lead reports with missing or wrong date of birth were assumed to be from children under six (6) years of age with exact age unknown

4. Any blood lead level  $\geq 10 \ \mu g/dL$ .

5. Defined as a venous blood lead level  $\geq 20 \ \mu g/dL$ .

# Table Four-AMaryland Department of the EnvironmentLead Poisoning Prevention Program: Childhood Lead RegistryBlood lead Testing of Children 0-72 Months by Jurisdiction in 2004

	Population	Children Tested		Children with Elevated Blood Lead Level		Children with Lead Poisoning	
Age Group	of Children	Number	Percent	Number	Percent	Number	Percent
Allegany County							
0-35 Months	2,443	1,025	42.0	20	2.0	3	0.3
36-72 Months	2,304	304	13.2	4	1.3	0	0.0
Total	4,747	1,329	28.0	24	1.8	3	0.2
Anne Arundel Co	intv						
0-35 Months	21 420	4 934	23.0	16	03	3	0.1
36-72 Months	20,475	1,931	91	11	0.5	3	0.1
Total	41 895	6 806	16.2	27	0.0	6	0.2
Total	41,075	0,000	10.2	21	0.4	0	0.1
Baltimore County							
0-35 Months	29,020	9,797	33.8	75	0.8	6	0.1
36-72 Months	28,185	5,150	18.3	33	0.6	4	0.1
Total	57,205	14,947	26.1	108	0.7	10	0.1
Baltimore City							
0-35 Months	27 351	12 190	44 6	714	59	89	07
36-72 Months	25 445	6 780	26.6	469	69	58	0.9
Total	52,796	18 970	35.9	1 183	6.2	147	0.8
	52,770	10,970	5517	1,100	0.2	117	0.0
Calvert County							
0-35 Months	3,186	670	21.0	0	0.0	0	0.0
36-72 Months	3,318	168	5.1	0	0.0	0	0.0
Total	6,504	838	12.9	0	0.0	0	0.0
Caroline County							
0-35 Months	1,122	577	51.4	12	2.1	0	0.0
36-72 Months	1,257	217	17.3	5	2.3	1	0.5
Total	2,379	794	33.4	17	2.1	1	0.1
Carroll County							
0-35 Months	6,324	888	14.0	9	1.0	1	0.1
36-72 Months	6,614	435	6.6	4	0.9	0	0.0
Total	12,938	1,323	10.2	13	1.0	1	0.1

## **Table Four-A** Maryland Department of the Environment Lead Poisoning Prevention Program: Childhood Lead Registry Blood lead Testing of Children 0-72 Months by Jurisdiction in 2004

	Population	Children	Tested	Children with Blood Lead	hildren with Elevated Blood Lead Level		Children with Lead Poisoning	
Age Group	of Children	Number	Percent	Number	Percent	Number	Percent	
Cecil County								
0-35 Months	3,790	682	18.0	5	0.7	0	0.0	
36-72 Months	3,758	391	10.4	1	0.3	0	0.0	
Total	7,548	1,073	14.2	6	0.6	0	0.0	
Charles County								
0-35 Months	5 401	1.374	25.0	7	0.5	1	0.1	
36-72 Months	5 528	666	12.0	2	0.3	0	0.0	
Total	11 019	2,040	12.0	9	0.4	1	0.0	
	11,017	,	10.5					
Dorchester Count	у							
0-35 Months	1,057	385	36.4	8	2.1	1	0.3	
36-72 Months	1,049	244	23.3	9	3.7	0	0.0	
Total	2,106	629	29.9	17	2.7	1	0.2	
Eradarial County								
0-35 Months	9.016	1 829	20.5	15	0.8	1	0.1	
36-72 Months	8,916	967	20.5	7	0.0	1	0.1	
Total	8,949 17 865	2,796	10.8	2.2	0.7	2	0.1	
	17,805	2,720	13.7		0.0	2	0.1	
Garrett County								
0-35 Months	1,164	344	29.6	5	1.5	2	0.6	
36-72 Months	1,159	219	18.9	2	0.9	1	0.5	
Total	2,323	563	24.2	7	1.2	3	0.5	
Harford County								
0-35 Months	9 980	1,947	19.5	20	1.0	3	0.2	
36-72 Months	10.052	1,223	12.2	4	0.3	0	0.0	
Total	20.032	3,170	15.8	24	0.8	3	0.1	
	20,002		1010					
Howard County								
0-35 Months	11,458	1,536	13.4	10	0.7	0	0.0	
36-72 Months	11,820	802	6.8	3	0.4	1	0.1	
Total	23,278	2,338	10.0	13	0.6	1	0.0	

## **Table Four-A** Maryland Department of the Environment Lead Poisoning Prevention Program: Childhood Lead Registry Blood lead Testing of Children 0-72 Months by Jurisdiction in 2004

	Population	Children Tested		Children with Blood Lead	hildren with Elevated Blood Lead Level		Children with Lead Poisoning	
Age Group	of Children	Number	Percent	Number	Percent	Number	Percent	
Kent County								
0-35 Months	595	170	28.6	6	3.5	4	2.4	
36-72 Months	549	38	6.9	0	0.0	0	0.0	
Total	1,144	208	18.2	6	2.9	4	1.9	
Montgomery Cou	ntv							
0-35 Months	38 826	9,917	25.5	44	0.4	8	0.1	
36-72 Months	37,041	6,017	16.2	37	0.6	4	0.1	
Total	75.867	15,934	21.0	81	0.5	12	0.1	
	,							
Prince George's C	ounty							
0-35 Months	37,162	11,550	31.1	54	0.5	13	0.1	
36-72 Months	36,336	8,235	22.7	33	0.4	3	0.0	
Total	73,498	19,785	26.9	87	0.4	16	0.1	
Queen Anne's Cou	untu							
Queen Anne s Cor 0-35 Months	1 (50	333	20.1	3	0.9	0	0.0	
36-72 Months	1,039	120	20.1	1	0.9	0	0.0	
Total	1,035	453	7.5 13.7	4	0.9	0	0.0	
	5,512	100	15.7		0.7	0	010	
Saint Mary's Cour	nty							
0-35 Months	4,005	1,088	27.2	2	0.2	0	0.0	
36-72 Months	4,001	302	7.5	0	0.0	0	0.0	
Total	8,006	1,390	17.4	2	0.1	0	0.0	
Somerset County								
0-35 Months	757	340	44.0	5	1.5	2	0.6	
36-72 Months	751	137	18.2	5	3.6	1	0.7	
Total	1 508	477	31.6	10	2.1	3	0.6	
	1,500		51.0					
Talbot County								
0-35 Months	1,081	371	34.3	4	1.1	0	0.0	
36-72 Months	1,163	117	10.1	2	1.7	0	0.0	
Total	2,244	488	21.7	6	1.2	0	0.0	

## Table Four-A Maryland Department of the Environment Lead Poisoning Prevention Program: Childhood Lead Registry

Blood lead Testing of Children 0-72 Months by Jurisdiction in 2004

				Children wit	h Elevated	Childre	en with	
	Population	Children	Tested	Blood Lea	d Level	Lead Po	Lead Poisoning	
Age Group	of Children	Number	Percent	Number	Percent	Number	Percent	
Washington Coun	ty							
0-35 Months	5,239	1,699	32.4	23	1.4	6	0.4	
36-72 Months	5,013	1,330	26.5	16	1.2	4	0.3	
Total	10,252	3,029	29.5	39	1.3	10	0.3	
Wicomico County	,							
0-35 Months	3,449	1,306	37.9	22	1.7	1	0.1	
36-72 Months	3,287	611	18.6	18	2.9	3	0.5	
Total	6,736	1,917	28.5	40	2.1	4	0.2	
Worcester County								
0-35 Months	1,521	439	28.9	4	0.9	0	0.0	
36-72 Months	1,383	236	17.1	7	3.0	2	0.8	
Total	2,904	675	23.2	11	1.6	2	0.3	
County Unknown								
0-35 Months		2,333		33		0		
36-72 Months		1,244		22		0		
Total		3,577		55		0		
Statewide								
0-35 Months	227,016	67,724	29.8	1,116	1.6	144	0.2	
36-72 Months	221,090	37,825	17.1	695	1.8	86	0.2	
Total	448,106	105,549	23.6	1,811	1.7	230	0.2	

1. Population of children was adapted from US Census Bureau age-sex population projection at the state level for 2004.

2. Blood lead reports with missing or wrong date of birth were assumed to be from children under six (6) years of age with exact age unknown.

3. Elevated blood lead level defined as any blood lead level  $\geq 10 \ \mu g/dL$ .

4. Lead Poisoning defined as a venous blood lead level  $\geq 20 \ \mu g/dL$ .

5. County assignment was in the order of child's census tract, and zip code address.

Calendar		Population	Blood Lead	d Tests	Tests Elevated Blood Lead		Lead Poisoning –	
Year		of Children	Number	Percent	Number	Percent	Number	Percent
1996								
	City	60,834	29,630	48.7	7,816	26.4	1,646	5.6
	Counties	369,538	27,006	7.3	1,264	4.7	160	0.6
	Unknown		3,110		804		24	
	Total	430,372	59,746	13.9	9,884	16.5	1,830	3.1
1007								
1777	City	58 262	21 423	36.8	5 083	27.0	1030	18
	Counties	362 935	21,425 44 546	12.3	1654	27.9	202	4.0
	Unknown	502,755	1 1/0	12.5	1054	5.7	202	0.5
	Total	121 107	67 118	15.9	7 763	11.6	1233	1.8
1000	Total	421,177	07,110	15.7	7,705	11.0	1255	1.0
1998	<u> </u>	56 750	17 752	21.2	2 0 4 0	22.2	660	2.0
	City	56,759	17,753	31.3	3,949	22.2	669	3.8
	Counties	359,726	40,164	11.1	1,082	2.7	103	0.3
	Unknown	116 105	668		37	0.7	0	1.0
	Total	416,485	58,585	14.1	5,068	8.7	772	1.3
1999								
	City	55,401	17,414	31.4	2,902	16.7	446	2.6
	Counties	363,511	43,524	12.0	925	2.1	102	0.2
	Unknown		591		77		7	
	Total	418,912	61,529	14.7	3,904	6.4	555	0.9
2000								
	City	50,380	18,033	36.8	2,198	12.2	266	1.5
	Counties	377,559	51.210	13.6	847	1.7	85	0.2
	Unknown	,	5,273		357		2	
	Total	427,939	74,516	17.4	3,402	4.6	353	0.5
2001								
2001	City	53 149	21 231	40.0	2 027	95	230	11
	Counties	387 289	55 470	14.3	814	1.5	58	0.1
	Unknown	307,207	23, <del>4</del> 70 41	14.5	0	1.5	0	0.1
	Total	431 438	76 742	17.8	2 841	37	288	0.4
2002	Total	151,150	70,712	17.0	2,011	5.7	200	0.1
2002	C'	50 744	16 505	21.5	1 550	0.4	102	1 1
	City	52,744	16,595	31.5	1,558	9.4	183	1.1
	Counties	384,073	62,822	16.4	/3/	1.2	//	0.1
	Unknown Tatal	126 917	90	10.0	2 207	2.0	200	0.2
	Total	430,817	79,507	18.2	2,297	2.9	260	0.5
2003								
	City	51,892	18,242	35.2	1,166	6.4	160	0.9
	Counties	386,076	58,470	15.1	552	0.9	77	0.1
	Unknown		9		1		0	
	Total	437,968	76,721	17.5	1,719	2.2	237	0.3
2004								
	City	52,796	18,970	35.9	1183	6.2	147	0.8
	Counties	395,310	83,002	21.0	573	0.7	83	0.1
	Unknown		3,577		55			
	Total	448,106	105,549	23.6	1,811	1.7	230	0.2

## Table 5: Childhood Blood Lead surveillance in Maryland: 1996-2004Children 0-72 Months Old

Blood Lead Level	Local Health Department	Health Care Provider	Statewide Law Enforcement
<9 μg/dL	Anything above zero indicates some exposure or contact with lead. No Community Health Nurse case management services are indicated.	<ul> <li>General education about lead and lead poisoning</li> <li>Risk Assessment Questionnaire at all routine child health visits</li> <li>Repeat blood lead level according to protocol</li> </ul>	Footnote 2
10 – 14 μg/dL	This is the CDC <u>level of concern.</u> Provide education to decrease exposure, including information about Special Loans Housing Program.	<ul> <li>As above plus</li> <li>Educate to decrease exposure</li> <li>Track blood lead levels according to CDC protocol</li> </ul>	
15 – 19 μg/dL	<ul> <li>If capillary test, coordinate with provider and guardian to validate with a venous blood lead test within 1 month.</li> <li>If venous test <ul> <li>Make telephone contact and do home visit within 30 days.</li> </ul> </li> <li>Provide educational materials to family (mail or in person)</li> <li>Send Official Notice of Elevated Blood Lead, when applicable, to Tenant and Rental Property Owner</li> <li>Coordinate with the provider and guardian for follow-up activities, such as housing and follow-up blood tests</li> <li>If two consecutive venous tests between 15-19 μg/dL at least 30 days of each other, treat as next level.</li> </ul>	As above plus • Evaluate for iron deficiency • Take environmental history	As in footnote 2, plus MDE enforcement of Lead Risk in Housing law's subsections on Notice of Elevated Blood Lead
20 – 44 μg/dL	<ul> <li>If capillary test, coordinate validation of level with a venous blood lead level within 1 week If venous test.</li> <li>Contact and make a home visit in coordination with the Environmental Lead Sanitarian who will complete an environmental investigation within 5 working days</li> <li>Discuss with the health care provider possible referral to tertiary care centers specializing in management of childhood lead poisoning</li> <li>Provide appropriate referrals to other agencies (Social Services, Housing, etc.)</li> </ul>	<ul> <li>As above plus</li> <li>Complete medical/nutritional history and physical examination</li> <li>Obtain developmental / psychological evaluation</li> <li>Consider chelation consultation</li> </ul>	As above, plus MDE and local health department enforcement of • Notice of Violations
≥ 45 μg/dL > 70 μg/dL	If capillary, contact provider within 2 working days. Inform provider to mark all specimens STAT (Highest Priority) and request immediate processing and report from laboratory. If venous, contact provider within 1 working day. Home visit within 2 working days. Contact the health care provider within 24 hours. If capillary, confirm the result immediately with a STAT venous test. If venous, verify hospitalization as a medical emergency. Same as above. Home visit within 1 working day.	As above plus <ul> <li>Consult with lead specialist</li> <li>Perform urgent chelation</li> </ul> Hospitalize: Medical emergency:	• Lead Risk in Housing law, subsections on Qualified Offer

## Appendix A<br/>Case Management ProtocolEnvironmental investigations are required at 2 consecutive venous levels of $\geq 15 - 19 \ \mu g/dL$ or 1 venous level at $\geq 20 \ \mu g/dL$

1) Maryland Department of the Environment Protocol, based on Centers for Disease Control and Prevention guidance

2) Environment Article §6-8, "Reduction of Lead Risk in Housing" subsections on Rental Property Registration, Risk Reduction Treatments at Turnover and Notice of Defect are ongoing primary prevention activities not triggered by blood lead levels.