

# CHILDHOOD LEAD RISK QUESTIONS – 12 MONTHS THROUGH 6 YEAR

All children 12 months through 6 years of age must be assessed for lead poisoning

Childs Name \_\_\_\_\_ B.D \_\_\_\_\_ Zip Code \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

To be completed by parent or guardian

Please circle answers

- |   |               |               |               |               |
|---|---------------|---------------|---------------|---------------|
| 1) Is this child eligible for or enrolled in Medicaid, Head Start, All Kids or WIC?   | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 2) Does this child have a sibling with a blood lead level of 10mcg/dl or higher?  | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 3) Has your child ever lived in or regularly visited a house/building daycare, preschool, built before 1978?  | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 4) Does your child live in or regularly visit a house/building built before 1978 with recent renovating?  | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 5) Does your child live with an adult whose job or hobby involves exposure to lead? (see table below)   | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 6) Is this child a refugee or an adoptee from any foreign country?  | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 7) Has your child ever been to Mexico, Central America, South Africa Or any country where exposure to lead from certain items could have occurred (for example, cosmetics, pottery, home remedies?) | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 8) Does your child live near an active lead smelter, battery recycling plant, or any other lead releasing industry?   | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |
| 9) Does this child reside in a high risk zip code area?   | Yes No Unsure | Yes No Unsure | Yes No Unsure | Yes No Unsure |

Office use only/Providers Initials

_____	_____	_____	_____
No Risk <input type="checkbox"/>	No Risk <input type="checkbox"/>	No Risk <input type="checkbox"/>	No Risk <input type="checkbox"/>
√ Lead <input type="checkbox"/>	√ Lead <input type="checkbox"/>	√ Lead <input type="checkbox"/>	√ Lead <input type="checkbox"/>

A blood lead test should be performed on children:

- With a yes or don't know response
- Living in a high risk zip code area

All Medicaid eligible children should have a blood lead level done at 12 and 24 months

**OCCUPATIONS / HOBBIES** -Auto battery or radiator manufacturing/repair, Bridge reconstruction workers, plumbing , Glass manufacturing, , Casting lead figures (toy soldiers etc.), Furniture refinishing, jewelry making, Lead soldering (i.e. electronics), Preparing lead shot, fishing sinkers, Stained glass making,