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Lead, Elevated Blood Levels 2016 Case Definition | CDC  
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Lead, Elevated Blood Levels  
2016 Case Definition  
Lead, Elevated Blood Levels  
2016 Case Definition  
NOTE:  
A surveillance case definition is a set of uniform criteria used to define a disease for public health surveillance. Surveillance case definitions enable public health officials to classify and count cases consistently across reporting jurisdictions. Surveillance case definitions are not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient’s health needs.  
CSTE Position Statement(s)  
15-EH-01  
Subtype(s)  
Lead, elevated blood levels, children (<16 Years)  
Lead, elevated blood levels, adult (≥16 Years)  
Subtype(s) Case Definition  
Expand All  
Lead, elevated blood levels, children (<16 Years)  
Laboratory Criteria For Diagnosis  
Blood lead concentration, as determined by a Clinical Laboratory Improvement Amendments (CLIA)-certified facility, of ≥5  
µg  
/dL (0.24  
µmol  
/L) in a child (person <16 years of age).  
Criteria to Distinguish a New Case from an Existing Case  
Counted once per year, regardless of number of elevated blood lead levels in the same year.  
Case Classification  
Confirmed  
One venous blood specimen with elevated lead concentration, or two capillary blood specimens, drawn within 12 weeks of each other, both with elevated lead concentration.  
Unconfirmed  
A single capillary or unknown blood specimen with elevated lead concentration or two capillary blood specimens, drawn greater than 12 weeks apart, both with elevated lead concentration.  
Case Classification Comments  
Elevated blood lead levels, as defined above, should be used as standard criteria for case classification for the purposes of surveillance but may not correspond to action levels determined by individual public health programs or by providers with respect to patient care.  
Elevated BLL classification does not use any case classification categories other than “confirmed” and “unconfirmed”. The “unconfirmed” category identifies tested children with a potentially elevated BLL but where testing was inadequate to make that determination.  
Lead, elevated blood levels, adult (≥16 Years)  
Laboratory Criteria For Diagnosis  
Blood lead concentration on a venous blood specimen, as determined by a Clinical Laboratory Improvement Amendments (CLIA)-certified facility, of ≥5  
µg  
/dL (0.24  
µmol  
/L) in an adult (person ≥16 years of age).  
Criteria to Distinguish a New Case from an Existing Case  
When an adult has multiple blood lead tests in a given year, only the highest blood lead level for that adult in that year is counted. A new case is an adult whose highest BLL was ≥5  
µg  
/dL in the current calendar year, but who was not in the State lead registry in the immediately preceding calendar year with a BLL ≥5  
µg  
/dL.  
Case Classification  
Confirmed  
One venous blood specimen with elevated lead concentration.  
Case Classification Comments  
Elevated blood lead levels, as defined above, should be used as standard criteria for case classification for the purposes of surveillance but may not correspond to action levels determined by individual public health programs or by providers with respect to patient care. Note: For medical management guidelines for lead-exposed adults please see guidelines from the Council of State and Territorial Epidemiologists (CSTE) (9) and the Association of Occupational and Environmental Clinics (AOEC) (10).  
Laboratories should report ALL BLLs to public health authorities. Health care providers should report elevated blood lead levels.  
Related Case Definition(s)  
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NNDSS receives and shares case data from state, local, and territorial health departments to help public health monitor, control, and prevent serious diseases.  
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