

Tennessee Childhood Lead Poisoning Prevention Program: Lead Risk Questionnaire

- If parent answers "Yes" or "Don't Know," test the child immediately.
- Children with TennCare are required to be tested at 12 and 24 months of age.
- Children with TennCare < 6 years old who do not have a documented blood lead level are required to be tested.
- You may administer a blood lead test instead of using the questionnaire.
- For more information, contact the Tennessee Childhood Lead Poisoning Prevention Program at : 615-532-8462 or 855-202-1357.

Patient's Name: _____ DOB: _____ TennCare (Yes/No): _____
 Provider's Name: _____ Administered by: _____ Date: _____
 How many years/months has the child lived at the current address? _____
 How long was the child at his or her previous address (and where was it)? _____
 What is the source of drinking water for the family? City/Municipal water system _____ Well _____ Bottle _____

Questions:

YES or DON'T KNOW NO

- | | | | | | | | | | | | | | | | | | |
|--|-------------------------------|-----------------------|------------------|----------------------------------|-------------------------|-----------------|----------------------------|-----------------------|----------------|--------------------------------------|------------------------|----------|---|-------------------------|--|---|--|
| <ol style="list-style-type: none"> Does your child live in or regularly visit a house built before 1978?
(This could include a day care center, home of a baby sitter, or a relative) Does your child have a family member or a playmate that has or did have lead poisoning? Is your child a newly arrived refugee or foreign adoptee? Does your child live within 80 feet (or 1 block) of a heavily traveled road or street? Does your child eat or chew on non-food items like paint chips or dirt? Does your child have low iron? Does your child live near or visit with someone who lives near a lead smelter, battery recycling plant or other industry that could release lead? Does your family use products from other countries such as pottery, health remedies, spices, food, or cosmetics?
<i>Examples:</i> <ul style="list-style-type: none"> •Traditional medicines such as Azarcon, Greta, or pay-loo-ah •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. Does your child frequently come in contact with an adult whose job or hobby may have to do with lead?
<i>Examples:</i> <table border="0"> <tr> <td>•House construction or repair</td> <td>•Chemical preparation</td> <td>•Radiator repair</td> </tr> <tr> <td>•Battery manufacturing or repair</td> <td>•Valve and pipe fitting</td> <td>•Pottery making</td> </tr> <tr> <td>•Burning lead-painted wood</td> <td>•Brass/copper foundry</td> <td>•Lead smelting</td> </tr> <tr> <td>•Automotive repair shop or junk yard</td> <td>•Refinishing Furniture</td> <td>•Welding</td> </tr> <tr> <td>•Going to a firing range or reloading bullets</td> <td>•Making fishing weights</td> <td></td> </tr> </table> | •House construction or repair | •Chemical preparation | •Radiator repair | •Battery manufacturing or repair | •Valve and pipe fitting | •Pottery making | •Burning lead-painted wood | •Brass/copper foundry | •Lead smelting | •Automotive repair shop or junk yard | •Refinishing Furniture | •Welding | •Going to a firing range or reloading bullets | •Making fishing weights | | <div style="border: 2px solid red; padding: 5px;"> <input type="checkbox"/>
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| •Burning lead-painted wood | •Brass/copper foundry | •Lead smelting | | | | | | | | | | | | | | | |
| •Automotive repair shop or junk yard | •Refinishing Furniture | •Welding | | | | | | | | | | | | | | | |
| •Going to a firing range or reloading bullets | •Making fishing weights | | | | | | | | | | | | | | | | |

If any boxes are marked, test immediately

Additional question. Consider testing if parent answers "Yes".

- 1) Does your child attend a school in which elevated lead levels were detected in the drinking water? Yes ___ No ___ I don't know ___

Comments: _____