

POLICY:

All infants, age six (6) months and older, and children will be provided a lead screening (questionnaire); when necessary, a referral will be sent to the healthcare provider.

PROCEDURE:

A. Lead Screening – On the Crossroads Dietary Assessment Screen

1. Infants, age six (6) months and older
 - a. At the one (1) year certification appointment, between twelve (12) and thirteen (13) months of age, the Nutritionist/Nutrition Associate (CPA) must complete the **Lead Screening Question** on the **Crossroads Dietary Assessment Screen** with the parent, guardian or caretaker: “Has your infant/child had a blood test for lead within the past 12 months?”
 - i. Utilize medical documentation (electronic or hard copy) from the healthcare provider, when available.
 - b. If the parent, guardian or caretaker answers “no” or “unknown”, a referral to the healthcare provider is required.
 - i. Document the referral on the **Crossroads Referral Program Screen**.
 - ii. The Nutritionist/Nutrition Associate (CPA) will follow-up on the referral at the infant/child’s mid-certification follow-up appointment.
2. Child:
 - a. At every child certification appointment (age 2 – 5 years old), the Nutritionist/Nutrition Associate (CPA) must complete the **Lead Screening Question** on the **Crossroads Dietary Assessment Screen** with the parent, guardian or caretaker: “Has your infant/child had a blood test for lead within the past 12 months?”
 - i. Utilize medical documentation (electronic or hard copy) from the healthcare provider, when available.
 - b. If the parent, guardian or caretaker answers “no” or “unknown”, a referral to the healthcare provider is required.
 - i. Document the referral on the **Crossroads Referral Program Screen**.
 - ii. The Nutritionist/Nutrition Associate (CPA) will follow-up on the referral at the child’s mid-certification follow-up appointment.

B. Nutrition Education and Counseling

2.21 Lead Screening and Referral **Effective Date: 11/21/2022**

1. Encourage all participants, including women participants, to speak with their healthcare provider about getting a lead test, especially if they reside in an area with a known lead issue.
2. Encourage the WIC food package which provides key nutrients that contribute to decreased lead absorption.
 - a. Calcium – milk, yogurt and cheese
 - b. Vitamin C – fresh, frozen and/or canned: citrus, strawberries, broccoli, brussels sprouts, potatoes and peppers.
 - c. Vitamin D – egg yolks, some fortified cereals
 - d. Vitamin E – spinach, broccoli, butternut squash
 - e. Zinc – whole grains, milk, yogurt, cheese
 - f. Iron – beans (dried or canned), WIC cereals, spinach, tuna
3. Offer a lead safety pamphlet or at a minimum summarize the information in the pamphlet.

REFERENCES:

1. WIC Final Policy Memorandum 2001- 1, WIC Allowable Costs – Clarification of WIC's FY 2001, Appropriations Act Provision Regarding Blood Lead Screening
2. Revised/Reissued Policy Memorandum 93-3A, WIC's Role in Screening for Childhood Lead Poisoning
3. CDC Lead Poisoning Prevention Program
4. West Virginia Childhood Lead Poisoning Prevention Program