

Prenatal Risk Assessment for Lead

✓ **If yes to questions 1-7, blood lead testing is recommended.**

YES NO

1. Do you or others who live with you work with lead at your job?
(see list below of jobs that may have lead exposure)

| | | | | | |
|---|---|--|---|---|---|
| Ammunition/explosives production | Bridge, tunnel and elevated highway/subway construction | Glass recycling, stained glass and glass manufacturing | Manufacturing and installation of plumbing components | Occupations using firearms | Rubber manufacturing |
| Automotive repair shops | Cable/wire stripping, splicing or production | Lead abatement | Manufacturing of industrial machinery and equipment | Plastics manufacturing | Sandblasting, sanding, scraping, burning or disturbing lead paint |
| Battery manufacturing and recycling | Ceramic manufacturing | Lead production or smelting | Metal scrap yards and other recycling operations | Pottery making | Use of lead based paints |
| Brass, bronze, copper or lead foundries | Firing range work | Machining or grinding lead alloys | Motor vehicle parts and accessories | Production and use of chemical preparations | Welding or torch-cutting painted metal |

2. Do you or others who live with you have any hobbies or activities that involve lead?
(see list below of activities that may have lead exposure)

| | | | | |
|---|---|---------------------------------|---------------------------------|-----------------------------|
| Making stained glass or painting on stained glass | Making pottery and ceramic ware with lead glazes and paints | Jewelry making with lead solder | Glassblowing with leaded glass | Hunting and target shooting |
| Copper enameling | Casting ammunition, fishing weights or lead figurines | Electronics with lead solder | Printmaking and other fine arts | |
| Bronze casting | Collecting, painting or playing games with lead figurines | Furniture refinishing | Liquor distillation | |

3. Do you have children in your home with lead poisoning?
4. Do you have a history of lead poisoning?
5. Have you in the past five years, or are you currently, fixing a home built before 1978 for your job, hobby, or personal use?
6. Sometimes pregnant women have the urge to eat things which are not food, such as clay, soil, plaster or paint chips. Do you ever eat or chew on non-food items?
7. Were you born or have you spent any time outside of the United States?

✓ **If yes to questions 8-11, risk reduction counseling/education is recommended.**

YES NO

8. To your knowledge, has your home been tested for lead in the water, and if so, were you told that the level was high (≥ 15 parts per billion)?
9. Do you use any traditional folk remedies or cosmetics that are not sold in a regular drug store or are homemade, which may contain lead?
For example: kohl, kajal, surma, greta, azarcon, bali goli, pay-loo-ah and ghazard
10. Do you use homemade pottery or leaded crystal for eating or drinking?
11. Do you live in, or regularly visit, a house built before 1978 that either has chipped or peeling paint, or has been remodeled or renovated in the past five years?