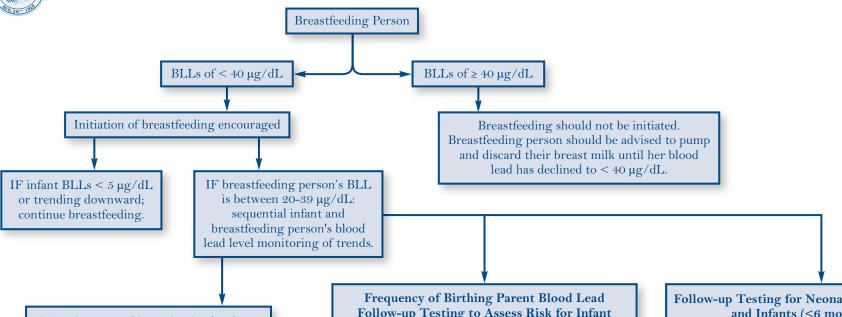
IDPH Breastfeeding and Lead Algorithm



IF environmental investigation has been conducted with no external source of lead identified and the infant's BLL is rising; check with Poison Control Center, or other lead expert to discuss consideration of temporary interruption of breastfeeding until breastfeeding person's blood lead level declines.

Frequency of Birthing Parent Blood Lead
Follow-up Testing to Assess Risk for Infant
Lead Exposure from Birthing Parent

Venous Blood Lead Level (µg\dL)	Follow-up testing Schedule
5 – 19	Every 3 months, unless infant blood lead levels are rising or fail to decline.
20 - 39	2 weeks postpartum and then at 1– to 3–month intervals depending on direction/magnitude of trend in infant BLLs.
≥ 40	Within 24 hours postpartum and then at frequent intervals depending on clinical interventions and trend in BLLs.
	Consultation with a clinician experienced in the management of lead poisoning is advised.

Follow-up Testing for	Neonates	(<1 mor	nth of age)
and Infants (<6 months	of age	

	Venous Blood Lead Level (μg\dL)	Perform Follow-up Testing
	5 - 24	Within 1 month (at first newborn visit)
	25 – 39	 Within 2 weeks. Consultation with a clinician experienced in the management of children with BLLs in this range is strongly advised.
	≥ 40	 Within 24 hours, then frequent intervals depending on clinical intervention and trend blood lead levels Prompt consultation with a clinician experienced in management of children with BLLs in this range is strongly advised.

