



Lead Exposure Self Assessment Guide for Adults

Lead poisoning has serious health effects. However, most adults with lead poisoning don't look or feel sick. To find out if you have been exposed to lead, answer the following questions. **See your doctor for a venous blood lead test if you answer yes to any of them.** Call 311 for more information, to find out where to get a blood lead test, or have questions about your exposure to lead.

YES NO QUESTION

_____ _____ 1. Do you work with lead on your job?
Working with products or materials that contain lead, lead alloys, lead-based paints or pigments, and certain glazes and ceramics can expose workers to lead on the job. The following are some jobs that may expose you to lead:

<ul style="list-style-type: none"> • Ammunition or explosives production • Antiques or furniture restoration/repair • Auto repair • Battery manufacturing/recycling • Bridge repair/painting • Cable splicing/production • Ceramics or pottery making • Electronics repair/recycling • Electrical work • General/home construction • Iron or steel structure repair/painting 	<ul style="list-style-type: none"> • Jewelry production • Law enforcement • Lead abatement • Metal recycling • Plumbing repair • Roofing • Shooting range work • Scraping, sanding or using a heat gun to remove old lead-based paint • Smelter work • Stained glass, glass recycling and manufacturing
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_____ _____ 2. Do you have any hobbies that may expose you to lead?
The following are some hobbies that may expose you to lead:

<ul style="list-style-type: none"> • Bronze casting • Casting fishing weights or lead figurines • Ceramics • Copper enameling • Electronics repair • Glassblowing with leaded glass 	<ul style="list-style-type: none"> • Home renovation • Jewelry making • Liquor distillation • Print making and other fine arts • Stained glass work • Target shooting/hunting/casting ammunition
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_____ _____ 3. Do you live with someone who works with lead?

_____ _____ 4. Did you or anyone in your home ever have an elevated blood-lead level?

_____ _____ 5. Are you living in an older home with ongoing renovations that create dust?

_____ _____ 6. Do you use any products from other countries such as imported [herbal medicines](#), health remedies, foods, spices and [cosmetics](#)? For more information visit: <http://www.nyc.gov/html/doh/html/lead/lead-herbalmed.shtml>

_____ _____ 7. Do you use imported ceramic cookware or dinnerware, or leaded crystal?

_____ _____ 8. Do you eat, chew or mouth any non-food items such as clay, soil, crushed pottery or paint chips?

_____ _____ 9. Have you ever had a gun shot injury?

_____ _____ 10. Do you regularly travel outside of the United States to countries where lead poisoning may be common?

_____ _____ 11. Are you a recent immigrant to the United States?