



NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Dr. Michelle Morse, MD, MPH
Acting Commissioner

Gotham Center
42-09 28th St.
Long Island City, NY 11101

September 12, 2025

Re: Current Guidance for Blood Lead Testing and Management for Pediatric and Adult Patients, including Pregnant People

Dear Colleague,

As a health care provider, you play a key role in preventing, detecting, and managing lead exposure. The blood lead reference value of 3.5 mcg/dL, currently used to identify people with blood lead levels (BLLs) higher than most, is a population-based measurement, not a health-based standard nor a toxicity threshold. No safe level has been identified, and even low BLLs have been shown to affect learning and behavior. **If you identify people with BLLs \geq 3.5 mcg/dL, try to ascertain possible sources of exposure by taking an environmental history, and provide nutritional counseling to help decrease lead absorption.**

BLLs \geq 3.5 mcg/dL are reportable to the New York City (NYC) Health Department within 24 hours. Please draw venous samples for follow-up testing. When a capillary test analyzed in the office is \geq 3.5 mcg/dL, draw a venous sample before the individual leaves your office. **Monitor BLLs until at least one BLL $<$ 3.5 mcg/dL is obtained.**

Information for Pediatric Care Providers

New York State (NYS) requires pediatric care providers to draw BLLs for all children at ages 1 and 2 years and assess risk of lead exposure for children aged 6 months to 6 years at each routine well-child visit. The following resources can help you assess your pediatric patients' risk of lead exposure and manage those who have been exposed:

- [Lead Exposure in Children](#)
- [Recommended Chelation Protocol for Children with BLLs \$\geq\$ 45 \$\mu\$ g/dL](#)

Information for Adult Care Providers, Including Prenatal Care Providers

Prenatal care providers are required to assess all pregnant people for risk of lead exposure at their initial prenatal visit and draw BLLs for those found at risk. Other adults at risk of lead exposure should be tested, especially people who have spent time abroad or who have not otherwise explained anemia, fertility, cognitive, or renal issues. The following resources can help you assess your adult patients' risk of lead exposure, and manage those who have been exposed:

- [Lead Exposure in Pregnancy](#)
- [Lead Exposure in Adults](#)

Data and Exposures Among At-risk Populations

In 2023, an estimated 79% of NYC children turning 3 years old were tested for lead exposure at least once. However, only 50% were tested at both ages 1 and 2 years, as required by NYS law ([2023 Report to the NYC Council](#)). **To increase testing rates of children, the Online Registry (nyc.gov/health/cir) can be used to run coverage reports and recall children due for lead testing.**

Certain populations in NYC are at higher risk of lead exposure. NYC Health Department data reveal that children with South Asian ancestry, whose mothers were born in Pakistan, Afghanistan, and Nepal, have rates of elevated BLLs up to 4 times greater than the citywide rate ([Hore and Sedlar. Pediatrics. 2024](#)). **Exposure sources in people from South Asia often include using cultural products such as imported spices, traditional cosmetics, religious powders, metalware, or health remedies.**

The prevalence of BLLs ≥ 3.5 mcg/dL was also significantly higher in some neighborhoods that have large Orthodox Jewish populations: 4% in children from Borough Park and 6% in children from Greenpoint. In these neighborhoods, lead testing rates by age 3 years, 73% and 79% respectively, were also lower than the citywide average of 80%. These gaps in testing may result in children with lead exposure being unidentified. **Go to the Environment & Health Data Portal ([Lead Exposure in NYC](#)) to see whether your patients are at higher risk depending on the neighborhood where you practice.**

In 2023, 424 individuals of childbearing age were identified with BLLs ≥ 5 mcg/dL. Among those with available birth country data, 84% were foreign-born and, of those individuals, 80% were from just four countries: 53% Mexico, 13% Guatemala, 10% Ecuador, and 4% Bangladesh ([2023 Report to the NYC Council](#)). **Expanding testing coverage to ensure that foreign-born pregnant people from these communities receive timely blood lead testing and care is essential.**

You can call 646-632-6002 and ask for the Care Coordination Unit to report a hospital admission or to discuss a case of lead poisoning. For more information about lead poisoning, visit nyc.gov/lead or call 311 and ask for the Healthy Homes Program.

Thank you for your continuing efforts to help prevent, identify, and manage lead exposure in New York City.

Sincerely,



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Healthy Homes Program
NYC Health Department



Andrew Faciano, MPH
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