
From: Wells, Eden (DHHS)
Sent: Monday, October 05, 2015 2:38 PM
To: Peeler, Nancy (DHHS)
Cc: Travis, Rashmi (DHHS); Moran, Susan (DHHS); Scott, Robert L. (DHHS); Fink, Brenda (DHHS)
Subject: Re: Flint EBL's

Thanks much- reviewing now

Sent from my iPhone

On Oct 5, 2015, at 1:33 PM, Peeler, Nancy (DHHS) <PeelerN@michigan.gov> wrote:

Attached is our initial response, plus attachments that we referenced in the response. Let us know if you think the attachments are helpful or too much.

Bob is still analyzing data to give specific responses where they were requested. We estimate it will take most of today to assemble that data for you.

Nancy

From: Wells, Eden (DHHS)
Sent: Monday, October 05, 2015 9:01 AM
To: Peeler, Nancy (DHHS)
Cc: Travis, Rashmi (DHHS); Moran, Susan (DHHS)
Subject: FW: Flint EBL's

Good morning, Nancy!

Please respond to me on this with a CC to Rashmi and Sue Moran. I have the heat map from last week, but he wants the numbers as well---

----- Forwarded message -----

From: **Eden Wells** <ewells@umich.edu>
Date: Mon, Oct 5, 2015 at 8:57 AM
Subject: Re: Flint EBL's
To: "Lyon, Nick (DHHS)" <LyonN2@michigan.gov>
Cc: "Moran, Susan (DHHS)" <MoranS@michigan.gov>, "Grijalva, Nancy (DHHS)" <GrijalvaN@michigan.gov>

Good morning,

I will get information right away to CLPP on this- but there are established protocols, and they do involve the primary care provider as well. I have a heat map showing the numbers of children above 5 and 15 by zip, so I know we have those numbers as well. To you shortly,

E

Eden V. Wells, MD, MPH, FACPM
 Clinical Associate Professor, Epidemiology
 Director, Preventive Medicine Residency
 University of Michigan School of Public Health
 1415 Washington Heights,
 Ann Arbor, MI 48109
 Tel: [734-647-5306](tel:734-647-5306)
 Fax: [734-936-2084](tel:734-936-2084)
ewells@umich.edu

On Mon, Oct 5, 2015 at 8:52 AM, Lyon, Nick (DHHS) <LyonN2@michigan.gov> wrote:

So, I have a process question: If a child tests above 5 micg/dl, the suggested protocol is to provide information on how to mitigate lead exposure in the home and do a follow up blood test in the future. Can someone describe the protocols/requirements that are supposed to be followed and who is doing it?

I am also curious to know how we've done with children who have a confirmed elevated blood level. If I look at the zip code data we were using last week, there have been more than 100 children who have tested at 5 or above from 2014 Q3 – 2015 Q2. How many of those children have been retested and what is their result?

I would also like to know summary level data for these zip codes for how many children have tested above .14, and what the follow up rates have been for them as well.

I think this would and should be the next question that we are receiving... You identified the issue, you are suggesting a test, filter, flush approach... what about the kids who tested above the threshold?

Nick

<Blood Lead Level (BLL) Quick Reference for Primary Care Providers.pdf>

<Lead Program Process Map 1.27.15.pptx>

<AAP Medical Management of Childhood Lead Exposure-June-2013.pdf>

<DRAFT Response to N.Lyon 10.5.15.docx>