

**DEPARTMENT OF COMMUNITY HEALTH**  
**BUREAU OF COMMUNITY LIVING, CHILDREN AND FAMILIES**  
**BLOOD LEAD ANALYSIS REPORTING**

(By authority conferred on the department of community health by 1978 PA 368, MCL 333.5111, 333.5474(1)(c), and 333.20531, 1978 PA 312, MCL 325.78, and Executive Reorganization Order No. 1996-1, MCL 330.3101)

**R 325.9081 Definitions.**

Rule 1. (1) As used in these rules:

(a) "Blood lead analysis report form" means the form used to report the required reportable information for blood that has been analyzed for lead.

(b) "Agency" means the community public health agency.

(c) "Physician/provider" means a licensed professional who provides health care services and who is authorized to request the analysis of blood specimens. For this purpose, provider may also mean the local health department.

(2) The term "local health department," as defined in Act No. 368 of the Public Acts of 1978, as amended, being §333.1101 et seq. of the Michigan Compiled Laws, has the same meaning when used in these rules.

History: 1997 AACCS.

**R 325.9082 Reportable information.**

Rule 2. (1) Reportable information is specifically related to blood samples submitted to clinical laboratories for lead analysis.

(2) Upon initiating a request for blood lead analysis, the physician/provider ordering the blood lead analysis shall complete the client information (section I) and the physician/provider information (section II) of a blood lead analysis report form designated by the agency or shall complete another similar form that ensures the inclusion of the same required data and shall provide all of the following information:

(a) All of the following information with respect to the individual tested:

(i) Name.

(ii) Sex

(iii) Racial/ethnic group.

(iv) Birthdate.

(v) Address, including county.

(vi) Telephone number.

(vii) Social security number and Medicaid number, if applicable.

(viii) If the individual is a minor, the name of a parent or guardian and social security number of the parent or guardian.

(ix) If the individual is an adult, the name of his or her employer.

(b) The date of the sample collection.

(c) The type of sample (capillary or venous).

(3) The blood lead analysis report form or a document with the same data shall be submitted with the sample for analysis to a clinical laboratory that performs blood lead analysis.

(4) Upon receipt of the blood sample for lead analysis, the clinical laboratory shall complete the laboratory information (section III) and provide all of the information required and/or submitted by the physician/provider and the following:

(a) The name, address, and phone number of the laboratory.

(b) The date of analysis.

(c) The results of the blood lead analysis in micrograms of lead per deciliter of whole blood rounded to the nearest whole number.

History: 1997 AACCS.

### **R 325.9083 Reporting responsibilities.**

Rule 3. (1) All clinical laboratories doing business in this state that analyze blood samples for lead shall report all blood lead results, rounded to the nearest whole number, for adults and children to the Community Public Health Agency, Childhood Lead Poisoning Prevention Program (CPHA/CLPPP), 3423 N.M.L. King Jr. Blvd., Lansing , MI 48909. Reports shall be made within 5 working days after test completion.

(2) Nothing in this rule shall be construed to relieve a laboratory from reporting results of a blood lead analysis to the physician or other health care provider who ordered the test or to any other entity as required by state, federal, or local statutes or regulations or in accordance with accepted standard of practice, except that reporting in compliance with this rule satisfies the blood lead reporting requirements of Act No. 368 of the Public Acts of 1978, as amended, being §333.1101 et seq. of the Michigan Compiled Laws.

History: 1997 AACCS.

### **R 325.9084 Electronic communications.**

Rule 4. (1) A clinical laboratory shall submit the data required in R 325.9083 electronically to the agency.

(2) For electronic reporting, upon mutual agreement between the reporting laboratory and the agency, the reporting shall utilize the data format specifications provided by the agency.

History: 1997 AACCS; 2006 AACCS.

### **R 325.9085 Quality assurance.**

Rule 5. For purposes of assuring the quality of submitted data, each reporting entity shall allow the agency to inspect copies of the medical records that will be submitted by the reporting entity to verify the accuracy of the submitted data. Only the portion of the medical record that pertains to the blood lead testing shall be submitted.

The copies of the medical records shall not be recopied by the agency and shall be kept in a locked file cabinet when not being used. After verification of submitted data, the agency shall promptly destroy the copies of the medical records.

History: 1997 AACCS.

**R 325.9086 Confidentiality of reports.**

Rule 6. (1) Except as provided in subrule (2) of this rule, the agency shall maintain the confidentiality of all reports of blood lead tests submitted to the agency and shall not release reports or information that may be used to directly link the information to a particular individual.

(2) The agency may release reports or information, otherwise protected under subrule (1) of this rule under 1 of the following conditions:

(a) If the agency has received written consent from the individual, or from the individual's parent or legal guardian, requesting the release of information.

(b) If necessary for law enforcement investigation or prosecution of a property manager, housing commission, or owner of a rental unit under 2004 PA 434, MCL 333.5475a.

(c) If the director of the department determines that release is crucial to protect the public health against imminent threat or danger.

(3) Medical and epidemiological information that is released to a legislative body shall not contain information that identifies a specific individual. Aggregate epidemiological information concerning the public health that is released to the public for informational purposes

only shall not contain information that identifies a specific individual.

History: 1997 AACCS; 2006 AACCS.

**R 325.9087 Blood lead analysis report form.**

Rule 7. The blood lead analysis report form reads as follows:

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH  
BLOOD LEAD ANALYSIS REPORT  
DATA/INFORMATION REQUIRED BY ADMINISTRATIVE RULES R 325.9082  
and R 325.9083

I. CLIENT INFORMATION

Last Name	First Name	M.I.	Birth Date

\_\_\_\_\_  
Mailing Address                      City                      State                      Zip Code                      County

\_\_\_\_\_  
Area Code and Phone Number                      Client's Social Security Number

\_\_\_\_\_  
If Client is an adult, list Employer                      If an adult, list Occupation

\_\_\_\_\_  
Medicaid Number

- |          |                   |
|----------|-------------------|
| Sex      | Race Ethnic Group |
| • Male   | • White           |
| • Female | • Black           |
|          | • Hispanic        |
|          | • Native American |
|          | • Middle Eastern  |
|          | • Asian/Pacific   |

Sample Collection Date \_\_\_\_\_

Type of Sample  
• Capillary • Venous

\_\_\_\_\_  
Parent/Guardian SS Number

\_\_\_\_\_  
Parent/Guardian Name

## II. PHYSICIAN/PROVIDER INFORMATION

Mail Report to:

Physician/Provider

\_\_\_\_\_  
Mailing Address                      City                      State                      Zip Code

