CT Department of Public Health

Annual Disease Surveillance Report

on

Childhood Lead Poisoning

based on 2012 data

DPH
Keeping Connecticut Healthy
Connecticut Department of Public Health

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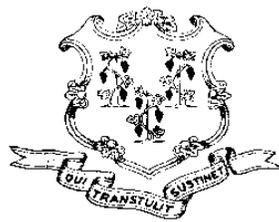
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Childhood Lead Poisoning

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Connecticut Department of Public Health

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ACKNOWLEDGEMENTS

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KEY FINDINGS

The following provides a summary of key findings for lead poisoning disease surveillance conducted by the Lead and Healthy Homes Program during the 2012 calendar year (CY).

- **Statewide Blood Lead Screening/Compliance with Mandatory Blood Lead Screening**
    - 82,536 blood lead tests for children under age of 6 received by the Lead and Healthy Homes program
    - 75,569 children under age of 6 were screened
    - Among the birth cohort 2009 who turned 3 years of age in 2012: 84.6% were screened by age 2 and 97.6% were screened by age 3; 52.5% were screened at age 1 and again at age 2
    - Among the birth cohort 2010 who turned 2 years of age in 2012: 83.0% were screened by age 2

- **Prevalence of Childhood Lead Poisoning**

  Children are considered lead poisoned when diagnosed with a confirmed blood lead level ≥ 5 μg/dL. Among children under 6 years of age who had a confirmed blood lead test:
    - 2,261 (31 per 1,000, i.e. 3.1%) children ≥ 5 μg/dL
    - 196 (3 per 1,000, i.e. 0.3%) children ≥ 15 μg/dL
    - 107 (1 per 1,000, i.e. 0.1%) children ≥ 20 μg/dL

- **Incidence of Childhood Lead Poisoning**

  Number of new cases identified (incidence) among children under 6 years of age who had a confirmed blood lead test:
    - 1647 (23 per 1,000) ≥ 5 μg/dL
    - 152 (2 per 1,000) ≥ 15 μg/dL
    - 91 (1 per 1,000) ≥ 20 μg/dL

- **Race and Ethnicity Associated with Childhood Lead Poisoning**

  Among children under 6 years of age who had a confirmed blood lead test:
    - Blacks (5.9%) were more likely to be lead poisoned at levels ≥ 5 μg/dL than Whites (2.5%), or Asians (2.4%)
    - Hispanics (4.1%) were more likely to be lead poisoned at levels ≥ 5 μg/dL than Non-Hispanics (2.6%)

- **Environmental Lead Hazard Investigations**

  Among the 149 dwelling units for which environmental investigations were completed and reported for poisoned children:
    - 89.9% were identified with environmental lead hazards
    - 73.2% were multiple-unit dwellings
    - 86.6% were identified with paint hazards
    - 57.0% were identified with dust hazards
    - 33.6% were identified with soil hazards
    - 0.0% with a drinking water hazard

UNDERSTANDING THE LEAD DATA

Connecticut General Statutes (CGS) Section 19a-110 -- *Report of lead poisoning, requires laboratory reporting of blood lead tests for all individuals.* Laboratories are required to submit blood lead test reports (i.e., findings ≥10 μg/dL of lead in blood) within 48 hours of receipt of the test result to the Connecticut Department of Public Health (CT DPH) and the local health department serving the town where the person (child) resides. At least monthly, laboratories are also required to submit to the CT DPH a comprehensive report of all blood lead test results for Connecticut residents.

The CT DPH has maintained a blood lead surveillance system since 1994. In 2010, the CT DPH Lead and Healthy Homes program upgraded its blood lead surveillance system to a new, more comprehensive web-based system. The new system has enhanced the ability to merge birth records and comprehensive environmental data with childhood blood lead data. The new surveillance system has had a significant positive impact on the Lead and Healthy Homes program's capability to utilize surveillance data to enhance child case management efforts. The web-based feature of the new system enables secure and remote access by local health department staff. Case management features are built into the system for both child and property case management activities at the local health department level. The new system has been offered to local health departments since May 2011. Sixty-one health departments have adopted the CT DPH surveillance system and utilize it on an ongoing basis.

Important Business Rules:

Lead Screening – A person is considered to have a lead screening if he or she was tested for lead with either a venous or capillary blood draw.

Lead Poisoning - For the purposes of this report, children who were diagnosed with a blood lead level of ≥5 μg/dL are considered to be lead poisoned although the threshold for case definition was ≥10 μg/dL in 2012. In 2013, the Connecticut DPH lowered the case management action level to correspond with the Centers for Disease Control and Prevention (CDC) reference value of 5 μg/dL (2012, June 7. CDC Response to Advisory Committee on Childhood Lead Poisoning Prevention Recommendations in "*Low Level Lead Exposure Harms Children: A Renewed Call of Primary Prevention*" retrieved October 31, 2012 from http://www.cdc.gov/nceh/lead/acclpp/cdc_response_lead_exposure_recs.pdf). Even blood lead levels as low as 5 μg/dL have been shown to affect IQ, ability to pay attention, and academic achievement. This new reference value is based on the children ages 1-5 years who are in the highest 2.5% of children when tested for lead in their blood by CDC's National Health and Nutrition Examination Survey (NHANES). Prior to May 2013, lead poisoning was defined in Connecticut as a blood lead level of ≥10 μg/dL (i.e. "level of concern"). All previous CT DPH published lead poisoning statistics are based on the former "level of concern".

Children who had a blood sample collected for a lead screening in 2012 are included in this report regardless of whether the test was analyzed in 2012.

When a child had more than one lead screening in CY 2012, the child was only counted once and the highest confirmed lead result was used. If the child had multiple lead screenings while living in more than one town in CY 2012, the statistics regarding the child were applied to the town where the child lived when tested with the highest confirmed lead result.

A confirmed test result is defined as one of the following:

1) A venous blood draw
2) A capillary blood draw with a result of <5 μg/dL
3) The second of two capillary blood draws, if both screenings results were $\geq$5μg/dL and the blood tests were drawn within 12 weeks of one another

Part I. BLOOD LEAD SCREENING

Blood Lead Screening in 2012

Connecticut law mandates that medical providers must conduct annual lead screening (i.e., blood lead testing) for each child 9 to 35 months of age, effective January 1, 2009. Furthermore, the law requires that any child between 36-72 months of age who has not been previously tested must also be tested by his or her medical provider, regardless of risk.

During calendar year (CY) 2012:

- The Lead and Healthy Homes program received 82,536 blood lead tests for children under age of six
- 75,569 children under six years of age were tested for lead poisoning
- 54,524 (67.8%) children between 9 months and 2 years old were tested for lead poisoning

Statewide Screening

Figure 1. Number of children under 6 years of age who had a lead screening, by calendar year – Connecticut 1995-2012
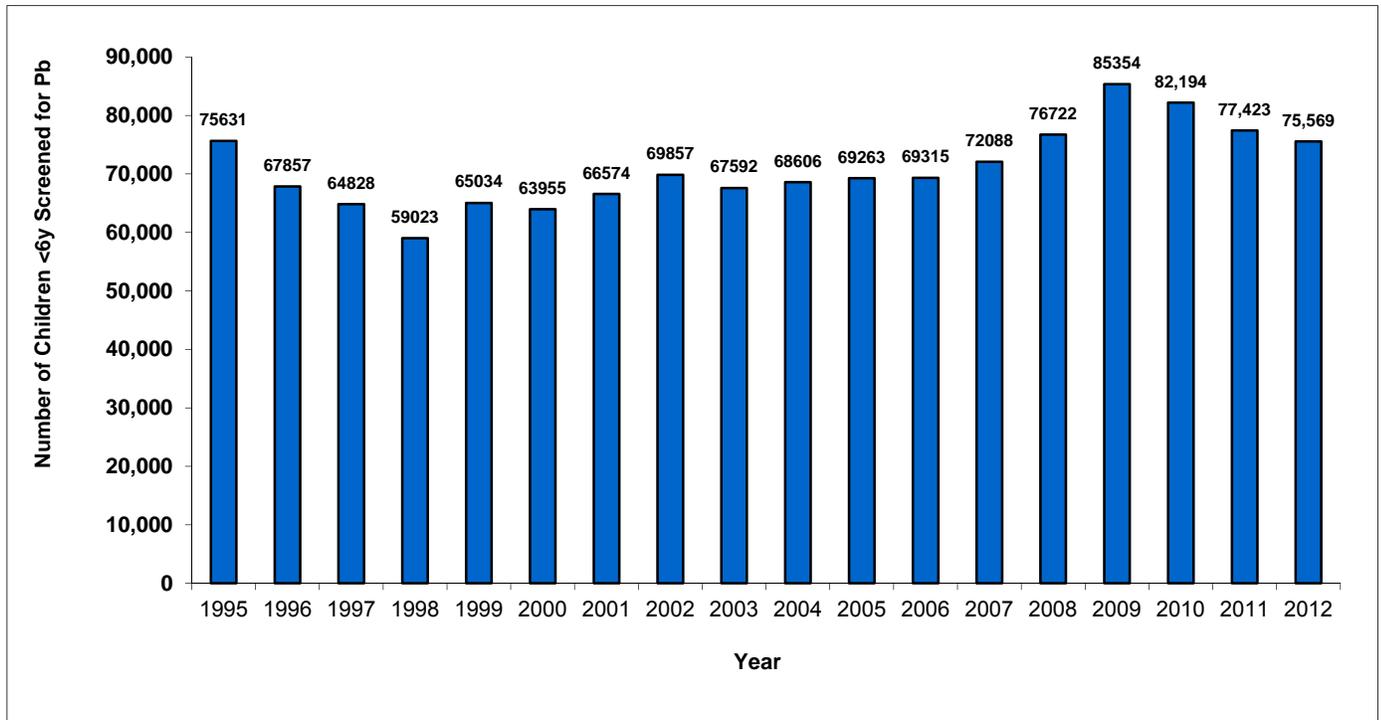
In CY 2012, 75,569 children under six years of age were tested for lead at least one time. The demographic characteristics for these children are reported in Table 1.

Table 1. Demographics of children under 6 years of age who had a lead screening – Connecticut CY 2012 (N=75,569)

Demographics	Number	Percent
Age		
0-8 months	544	0.7%
9-11 months	5,398	7.1%
12-23 months	25,785	34.1%
24-35 months	23,341	30.9%
36-47 months	8,898	11.8%
48-59 months	77,24	10.2%
60-71 months	3879	5.1%
Gender		
Male	37,149	49.2%
Female	35,394	46.8%
Unknown	3,026	4.0%
Race		
White	44,219	58.5%
Black	10,270	13.6%
Asian	3,093	4.1%
Native American	287	0.4%
Hawaiian or Pacific Islander	9	<0.1%
Other	896	1.2%
Unknown	16,795	22.2%
Ethnicity		
Hispanic	18,660	24.7%
Non-Hispanic	41,596	55.0%
Unknown	15,313	20.3%

Figure 2. Percentage of children 1-2 years of age who had a lead screening – Connecticut 1996-2012
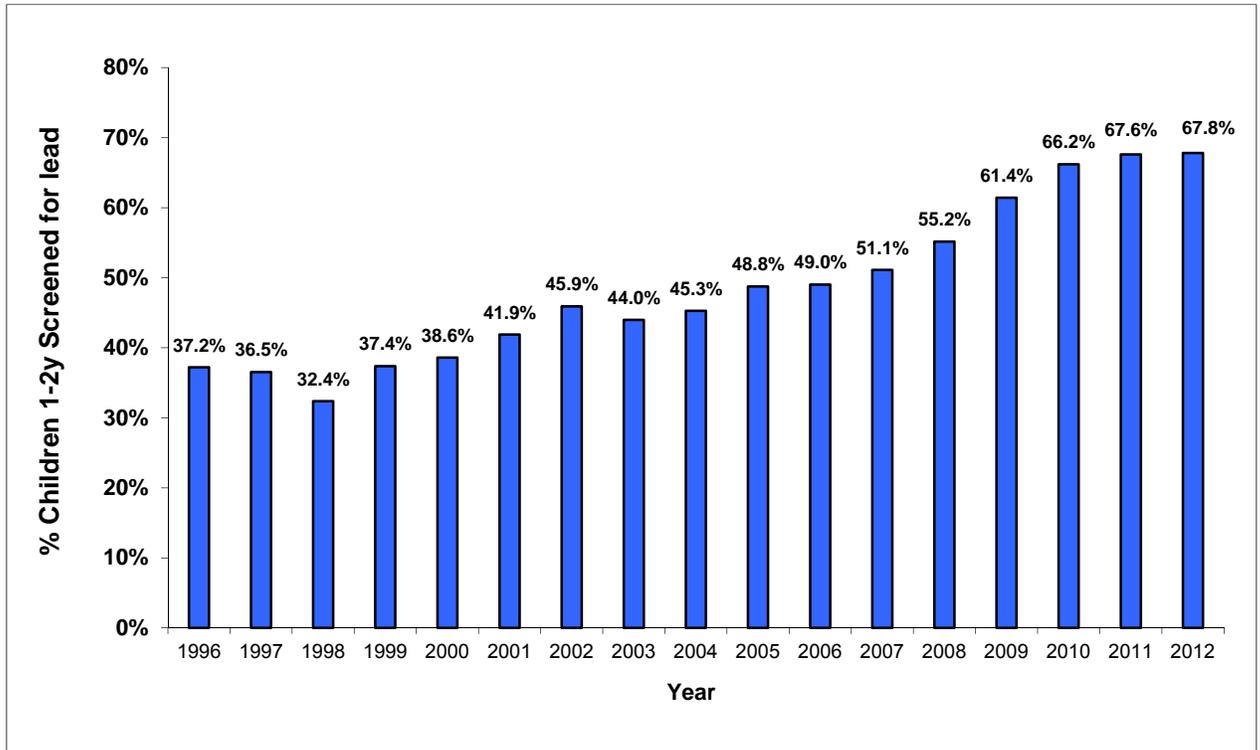
In CY 2012, 54,524 (67.8%) children between 9 months and 2 years of age were tested for lead poisoning. There is no significant change in the screening rate from 2011 to 2012. Starting with the 2011 report, the CT DPH modified how screening rates were evaluated for one and two year olds. State law requires medical providers to test children between 9 to 24 months of age. As such, the CT DPH included the 9 months to 11 months test results to the analysis. In prior reports, children between 9-11 months of age were not counted.

By Town Screening

A map illustrating screening rates, by town, for children between 9 months and 2 years old is shown on the next page (Map 1). For detailed information on screening by town for children between 9 months and 2 years of age, see Appendix Table1.

Map 1.

By Town Blood Lead Screening Rate
Children 9 Months to 2 Years Old, Connecticut 2012

State Average: 67.8%

Screening Rate

- 30-49%
- 50-69%
- 70-89%
- 90-100%
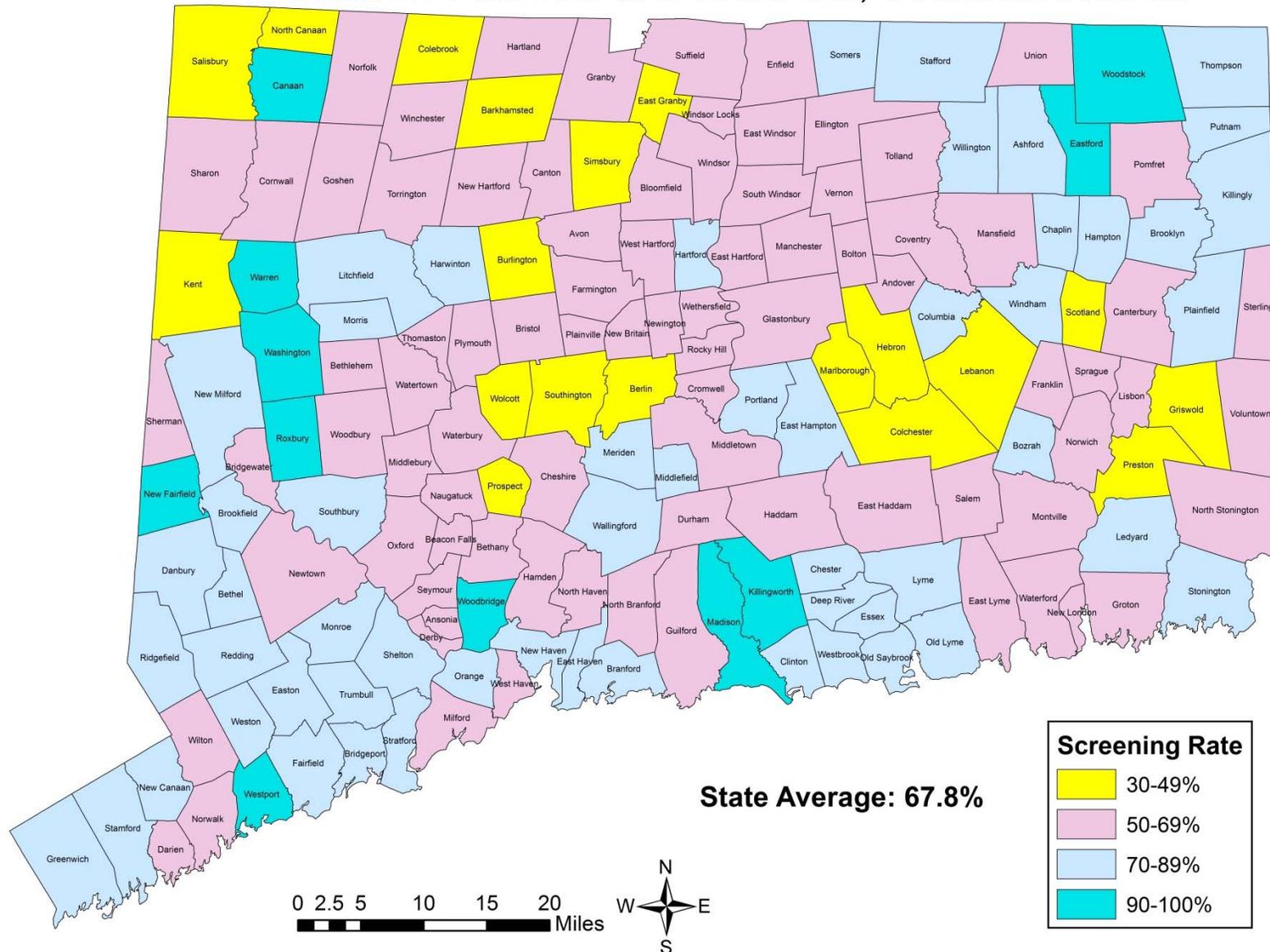
Compliance with Blood Lead Testing Requirements:

Screening rates among birth cohorts who turned 2 years old, 3 years old, and 6 years old in 2012

Starting January 1, 2009, it became mandatory that all healthcare providers in Connecticut conduct annual blood lead testing for children between 9 to 35 months of age. Compliance with the law is assessed by measuring the proportion of children born in Connecticut during a given year who have had at least one blood lead test by age two or three, and at least one more blood lead test by age three.

The entire 2009 birth cohort reached three years of age (36 months) in 2012. As such, this is the second year that the Department of Public Health Lead and Healthy Homes Program is able to evaluate the effectiveness of universal screening laws (i.e., mandated blood lead testing) for children under the age of three.

The analysis uses the total number of children who received a lead test while residing in Connecticut regardless of where the child was born, divided by the total number of births in the given year from the vital registry. The numerator includes all children born in the given year who had a lead test associated with a Connecticut address regardless of the child's birth state. This method accounts for population relocation. This method is adopted by the CDC's National Environmental Public Health Tracking (EPHT) Program to assess lead screening in young children among the grantee states. One unknown weakness in this method of calculation is that it may overestimate the screening rate[*], especially for smaller geographic areas.

$$\text{Screening rate} = \frac{\text{Children born in the given year who received a blood lead tests reported with a CT address}}{\text{\# of live births in a given year in CT}}$$

[*] CDC EPHT program conducted screening rate analyses at county level and the results indicated some counties had screening rates over 100%. CDC explains this by stating, "There are several reasons why the number of children tested in a county may be higher than the number of children born in a county. Using the number of children born in a county doesn't account for children who move into a county before being tested."

Blood Lead Testing By Birth Cohort:

summary statistics for children up to three years of age

2010 Birth Cohort (turned 2 year old in 2012)

Assessment of first required screening

Among children born in 2010,

- 17.7% were tested before age 1 (defined as under 12 months)
- 68.7% were tested at age 1 (defined as 12 months to 23 months)
- 83.0% were tested by age 2 (defined as under 24 months)

2009 Birth Cohort (turned 3 years old in 2012)

Assessment of required first, second, and annual screening

The 2009 birth cohort provides us with an opportunity to evaluate medical provider compliance with required blood lead testing for children between 9 to 35 months.

Among children born in 2009,

- 18.6% were tested before age 1 (defined as under 12 months)
- 69.6% were tested at age 1 (defined as 12 months to 23 months)
- 65.5% Tested at age 2 (defined as 24 to 35 months)
- 84.6% were tested by age 2 (defined as under 24 months)
- 97.6% were tested by age 3 (defined as under 36 months)
- 52.5% were screened at age 1[‡] and again at age 2

Please refer to the illustrated graph, shown on the next page (Figures 3.1 and 3.2) which describes testing behaviors of medical providers for the 2009 birth cohort.

[‡] Including children 9 to 11 months old

Figure 3.1. Screening rate by age at blood lead testing among birth cohort 2009
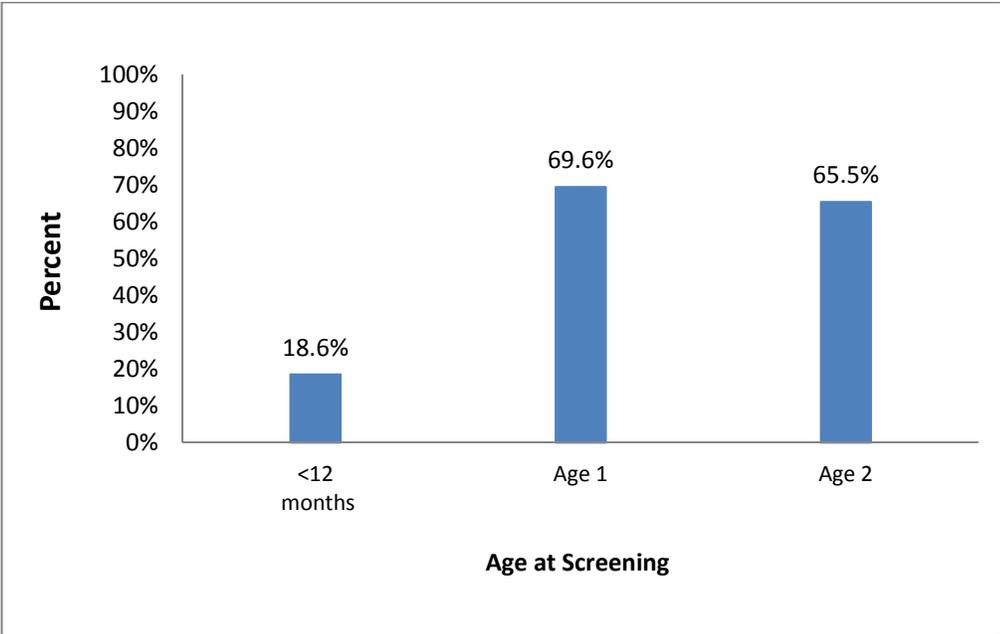
Figure 3.2. Percentage screened for lead at least once by age and annually under age three among birth cohort 2009
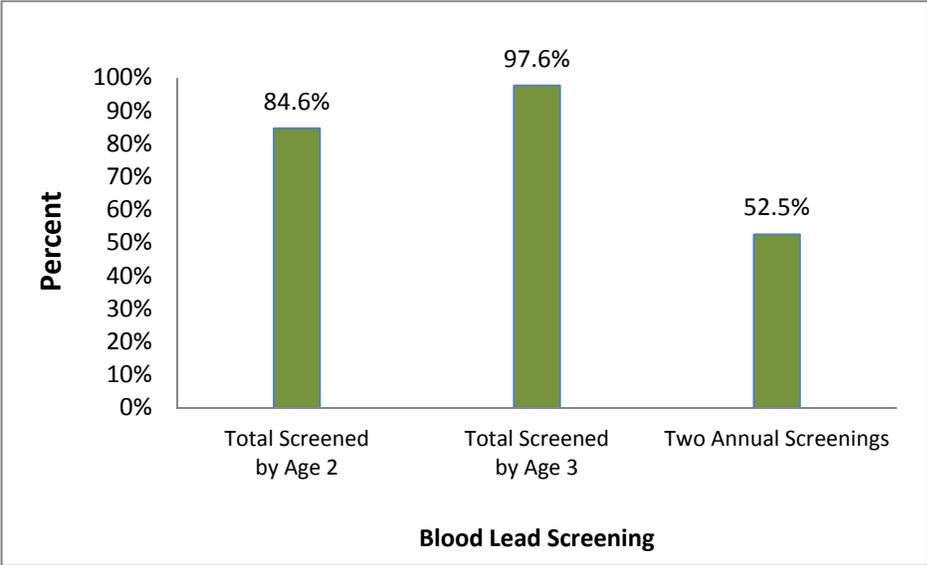
Figures 3.1 and 3.2. illustrate the data for the 2009 birth cohort described on the prior page of this report. The 2009 birth cohort provides an opportunity to evaluate medical provider compliance with required blood lead testing for children between 9 to 35 months of age. The data indicate that healthcare providers are screening children for lead at least once by age three. However, efforts need to be made to remind healthcare providers of the requirement to test children under the age of three annually; 97.6% of children are tested for lead by age three at least one time, but only 52.5% are tested the required two times before turning three years of age.

A map (Map 2.) illustrating by town screening rates for the 2009 birth cohort is shown on next page. Looking more closely at lead screening rates by towns provides the Lead and Healthy Homes Program with the opportunity to evaluate healthcare provider practices in specific geographic areas. The program uses the data to inform and focus outreach efforts in collaboration with local health departments and district departments of health.

Map 2

Percent Tested for Lead by Age 2, Connecticut Birth Cohort 2009

State Average: 84.6%

Percent Screened

(yellow)	<50%
(pink)	50-69%
(light blue)	70-89%
(blue)	90-100%
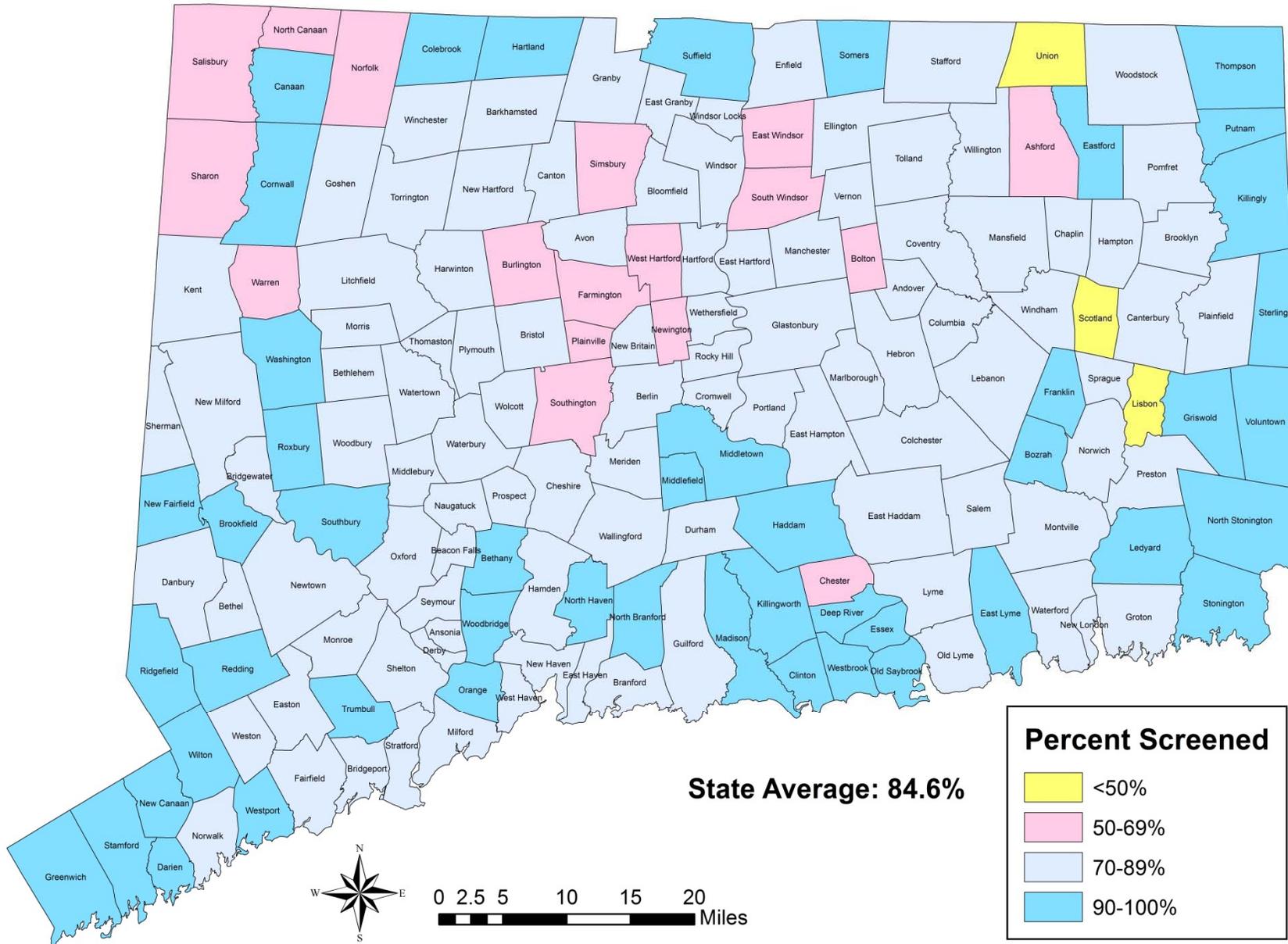
Figure 4. At least one screening by second birthday (0 to 23 months), birth cohort 2005 to 2010
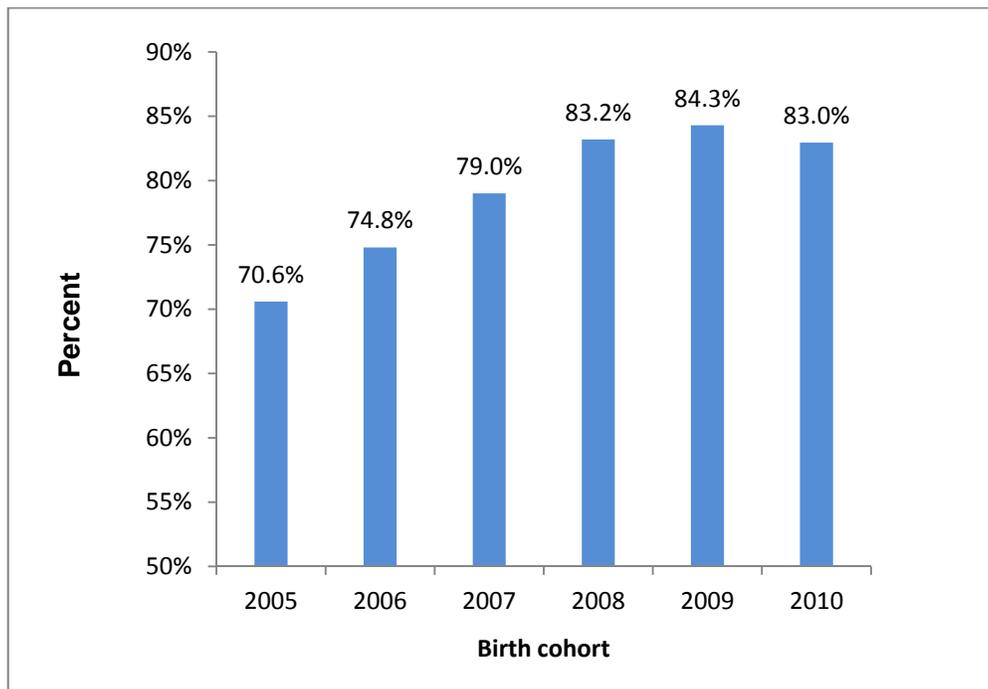
Another method for evaluating the effectiveness of mandatory screening for young children is to compare blood lead testing rates between birth cohorts. Since every child should be tested annually between 9-35 months of age, then minimally, every child should have had at least one blood lead test by age two. Figure 4 illustrates the percentage of children who were tested for lead by their healthcare providers at least one time before turning two years old. A trend of increasing screening by second birthday across birth cohorts from cohort 2005 to cohort 2009 is observed. However, the screening rate decreased slightly among the 2010 birth cohort (illustrated by Figure 4 above).

Birth Cohort Analysis for Children under Six

Figure 5. Percentage of children who have had at least one screening by 72 months of age, by year of birth – Connecticut 2000-2006
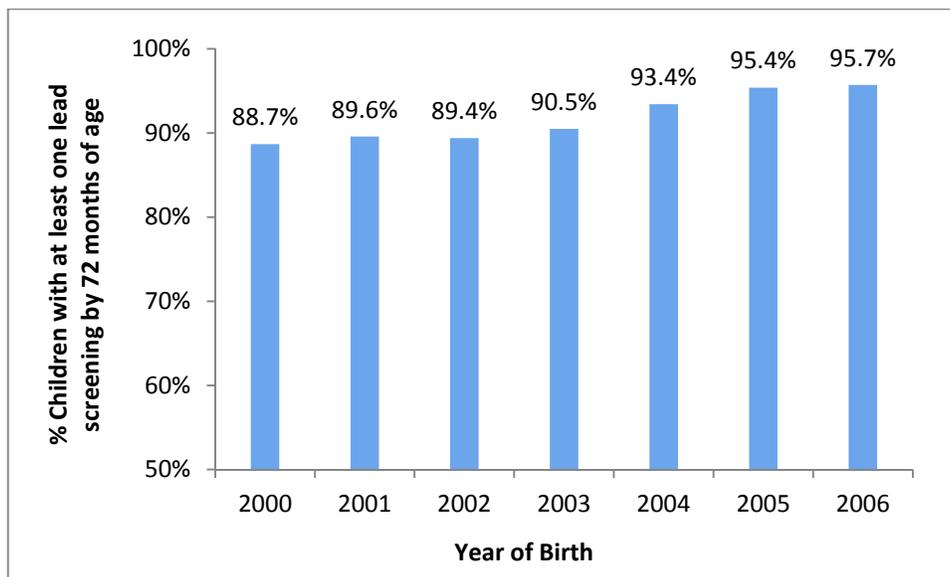
Many children, prior to 2009, were not tested for lead before reaching three years of age. If a healthcare provider determines that a child older than three and under the age of six has never been tested for lead, the provider is then required to test that child. Therefore, an analysis of lead testing for birth cohorts that have reached six years of age by 2012 should also be considered. Figure 5 illustrates that, over time, more children under the age of six are being screened by healthcare providers, indicating that providers are complying with statutory requirements for testing older children who were previously never tested. The increase in blood lead screening among birth cohorts (illustrated by Figure 5 above) is also coupled with a decrease in childhood lead poisoning rates (page 19, Figure 7.) strongly suggesting that mandatory screening laws are an effective tool for reducing both the burden and incidence of childhood lead poisoning in Connecticut.

Among children born in 2006, 95.7% had at least one lead screening by 6 years of age. The screening rate from 2005 birth cohort to birth cohort 2006 was unchanged after steady increases in the past four birth cohorts (2002 to 2005 births).

Part II. PREVALENCE OF CHILDHOOD LEAD POISONING

Prevalence of Childhood Lead Poisoning among Children under Six Years of Age

Starting with this report, prevalence of childhood lead poisoning is defined as the proportion of children under six years of age with a confirmed lead test in CY 2012 whose blood lead levels were ≥5 μg/dL. The previous reference value (formerly called the "level of concern") was 10 μg/dL. A growing body of research identified that blood lead levels below 10 μg/dL can harm children in terms of their IQ, cognitive functions, and academic achievement; the CDC recommended a new "reference value" of 5 μg/dL, for lead poisoning among young children in May 2012. The State of Connecticut adopted the new reference value in May 2013. As such, Connecticut local health departments and district departments of health are required to initiate public health case management actions for children with a confirmed blood level of ≥5 μg/dL.

Prevalence includes child lead poisoning cases that may have occurred prior to 2012, and remained lead poisoning cases into CY 2012.

Prevalence of Environmental Intervention Blood Lead Levels –

Prevalence of childhood lead poisoning cases of ≥15 μg/dL is defined as the proportion of children under 6 years of age with a confirmed lead test in CY 2012 whose blood lead levels were ≥15 μg/dL.

Prevalence of childhood lead poisoning cases ≥20 μg/dL is defined as the proportion of children under 6 years of age with a confirmed lead test in CY 2011 whose blood lead levels were ≥20 μg/dL.

Response Policies for Actionable Blood Lead Levels in 2012 –

Per Connecticut General Statutes (CGS) sections 19a-110(d), and 19a-111, local health departments are responsible for responding to reported blood lead levels of 10 μg/dL or more. When a child's blood lead is at or above 10 μg/dL, the local health department must provide the parent or guardian of the child with information describing the dangers of lead poisoning, precautions to reduce the risk of lead poisoning, information about potential eligibility for services under the Birth-to-Three Program, and laws and regulations pertaining to lead abatement. In addition to mandated response policies, local health departments also carry out lead poisoning prevention activities annually, enabled by CGS section 19a-111j.

Effective January 2009, a local health department must conduct an on-site comprehensive lead inspection and order remediation of the sources of lead exposure for a child under 6 years of age, when that child has two venous blood lead levels of 15 to 19 μg/dL for tests taken at least 3 months apart.

When a child's venous blood lead level exceeds 20 μg/dL, a local health department must conduct an epidemiological investigation (which includes an on-site comprehensive lead inspection and interviews with parents or caregivers to determine all potential sources of lead exposure) and order the elimination (abatement) of the identified sources of lead exposure for that child.

Some local health departments opt to conduct investigations and order the remediation or abatement of identified lead hazards at lower levels of diagnosed lead poisoning. Those environmental data elements are also included in this report.

Figure 6. Number of children under 6 years of age diagnosed with lead poisoning, CY 2012
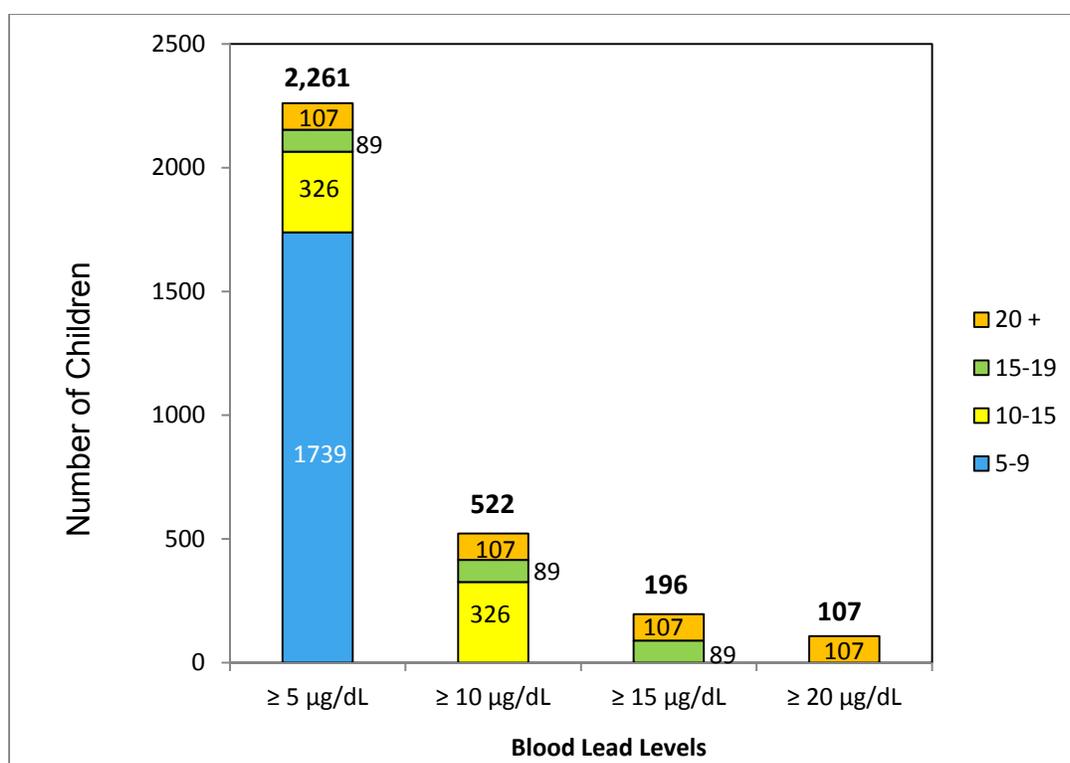
Number of children identified as lead poisoned in 2012:

- 2,261 ≥ 5 μg/dL[‡]
- 522 ≥10 μg/dL[§]
- 196 ≥15 μg/dL[**]
- 107 ≥20 μg/dL

[‡] Inclusive with blood lead levels ≥10 μg/dL , ≥15 μg/dL, and ≥20 μg/dL

[§] Inclusive with blood lead levels ≥15 μg/dL and ≥20 μg/dL

[**] Inclusive with blood lead levels ≥20 μg/dL

Figure 7. Prevalence of children under 6 years of age who are lead poisoned, by calendar year and by blood lead level –
 Connecticut 1995-2012[*]
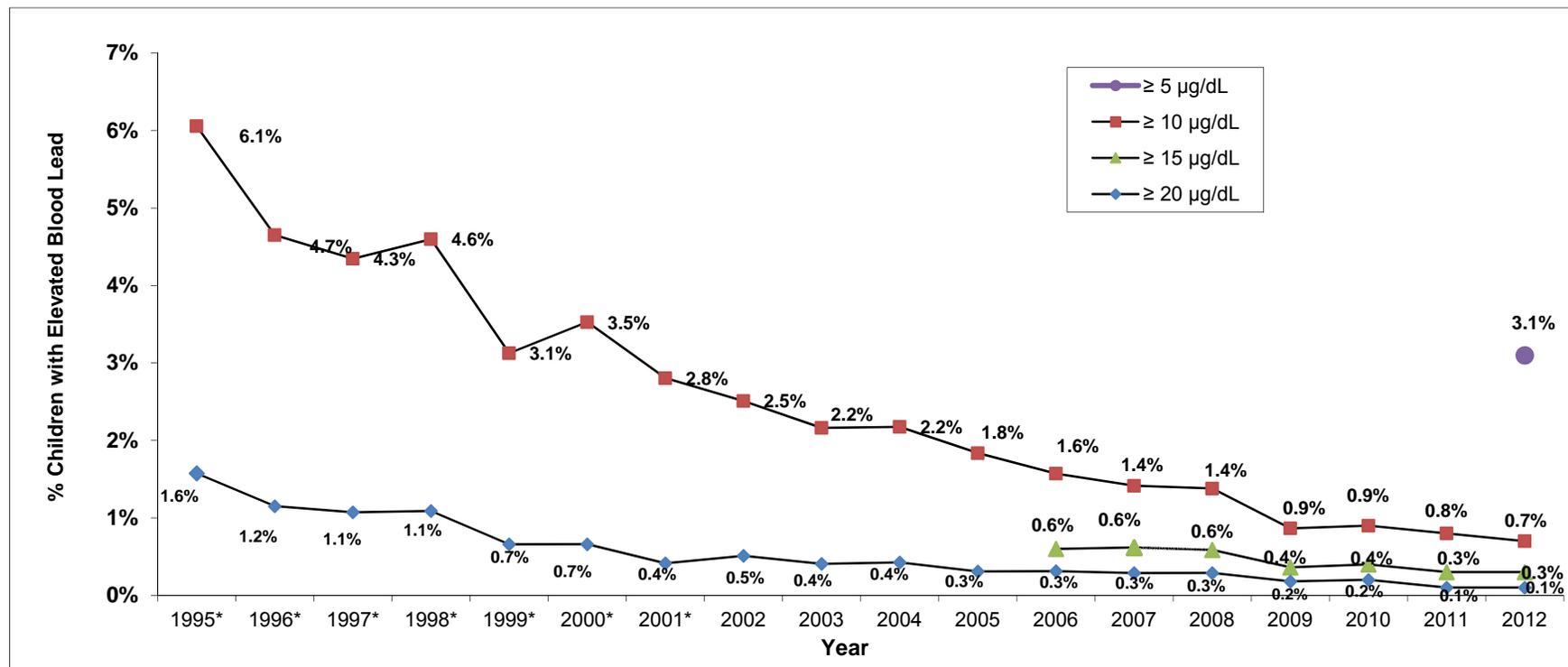
Per CGS **Sec. 19a-110(d)**, *"On and after January 1, 2012, if one per cent or more of children in this state under the age of six report blood lead levels equal to or greater than ten micrograms per deciliter, the director shall conduct such on-site inspection and order such remediation for any child having a confirmed venous blood lead level equal to or greater than ten micrograms per deciliter in two tests taken at least three months apart"*. Based on the 2012 blood lead surveillance, 0.7% of children under the age of six in Connecticut were diagnosed with a confirmed blood lead levels ≥10 μg/dL

[*] Data of 1995-2001 are based on analysis using number of tests instead of number of children screened as the unit of analysis.
  Data source of the 1995-2001 data is the previous published reports commonly known as Screening Data by Town.

Since CY 2009, the prevalence of childhood lead poisoning cases of ≥10 μg/dL has dropped below 1%. The prevalence of ≥10 μg/dL continued to decrease from 2011 to 2012. In addition to assessing the prevalence of ≥10 μg/dL of lead in blood, we assessed the prevalence of lead poisoning at blood lead levels equal to or greater than 5 μg/dL, 15 μg/dL, and 20 μg/dL. Among children under 6 years of age who had a confirmed blood lead test in 2012, 3.1%, 0.3%, and 0.1% of children were found to have blood lead levels of ≥5 μg/dL, ≥15 μg/dL, and ≥20 μg/dL, respectively. Starting with this report, blood lead ≥5 μg/dL is added to this prevalence graph as the current action level for public health action has been lowered to 5 μg/dL in 2013.

Figure 8. Number of children under 6 years of age with lead poisoning, by calendar year and by blood lead levels – Connecticut 2002-2012
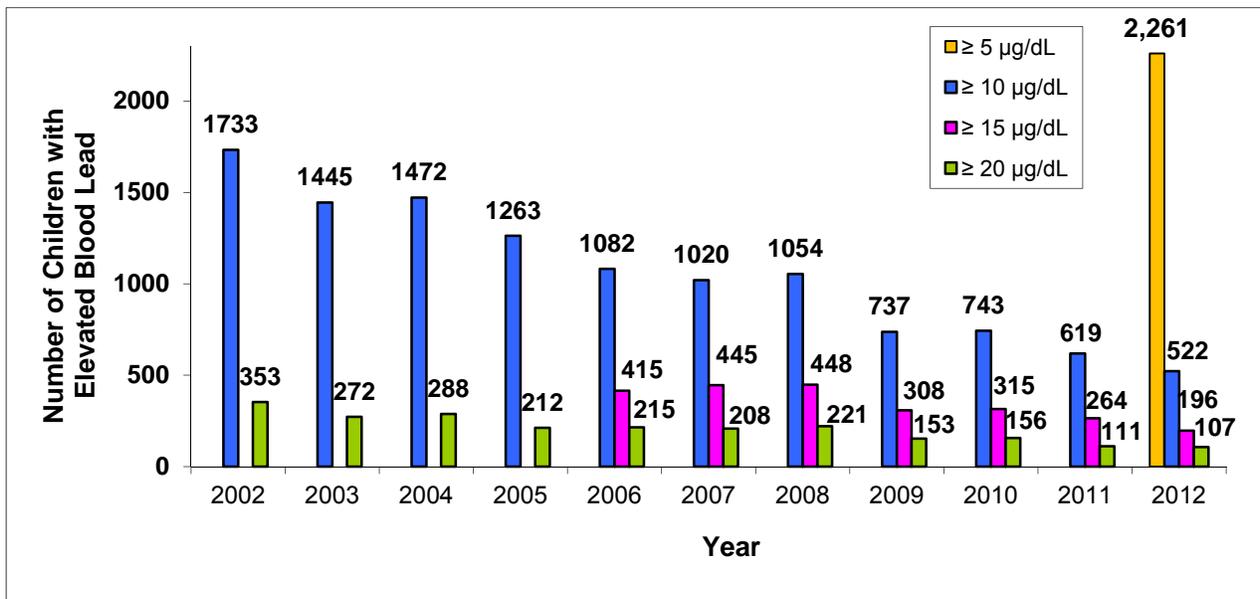
In CY 2012, 2,261 children under 6 years of age were identified with a blood lead level $\geq$5 μg/dL. Number of children under 6 years of age diagnosed with lead levels of $\geq$10 μg/dL decreased by 1,211 children when comparing 2012 to 2002, over a 10 year period. There was a decrease of 97 children diagnosed with lead levels of $\geq$10 μg/dL from CY 2011 to CY 2012.

Starting with this report, blood lead $\geq$5 μg/dL is added to this graph, because the CDC reference value of 5 μg/dL was recently adopted by the CT Department of Public Health.

Figure 9. Percentage and number of children under 6 years of age with blood lead ≥5 μg/dL–Connecticut 2012
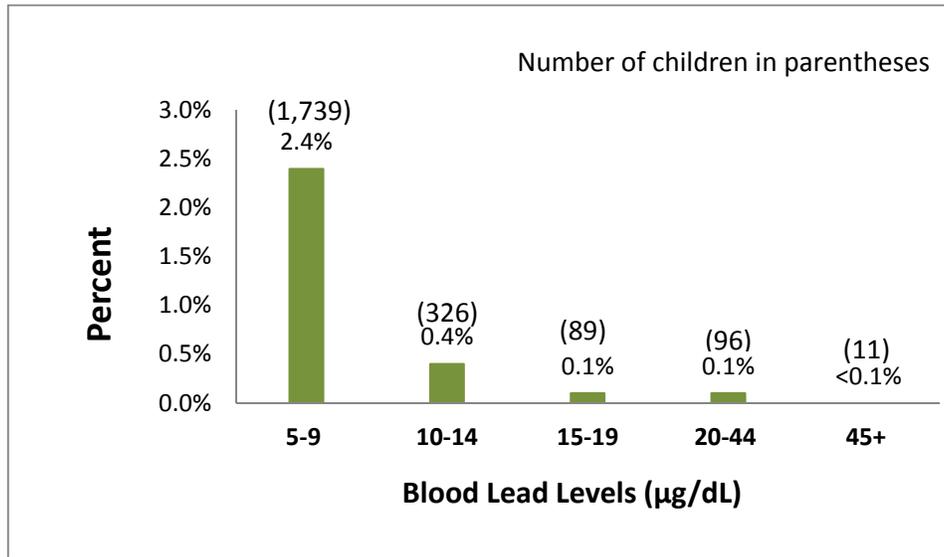
In CY 2012, a total of 2,261 children under 6 years of age were identified with a blood lead level ≥5 μg/dL, indicating some exposure to lead hazards. Among these children, the majority (2.4% total tested) have a level between 5-9 μg/dL, while only 11 children (<0.1% total tested) had a chelation level, ≥45 μg/dL. *Detailed tables of this data are presented in Table 2 in the appendices.*

Map 3.

Number of Lead Poisoned Children* by Town, Connecticut 2012

Total: 2,261 children under 6 years of age

* Blood Lead Level ≥5 µg/dL

Number of Children

- 1 - 10
- 11 - 20
- 21 - 50
- 51 - 100
- 101 - 350

Miles
0   5   10

Map 4.

Number of Children under 6 Years Old with Blood Lead Levels ≥15 µg/dL by Town
Connecticut 2012

Total: 196 children

Number of Children

○	1 - 5
○	6 - 10
○	11 - 20
●	21 - 30
●	31 - 36

0 2.5 5   10
Miles
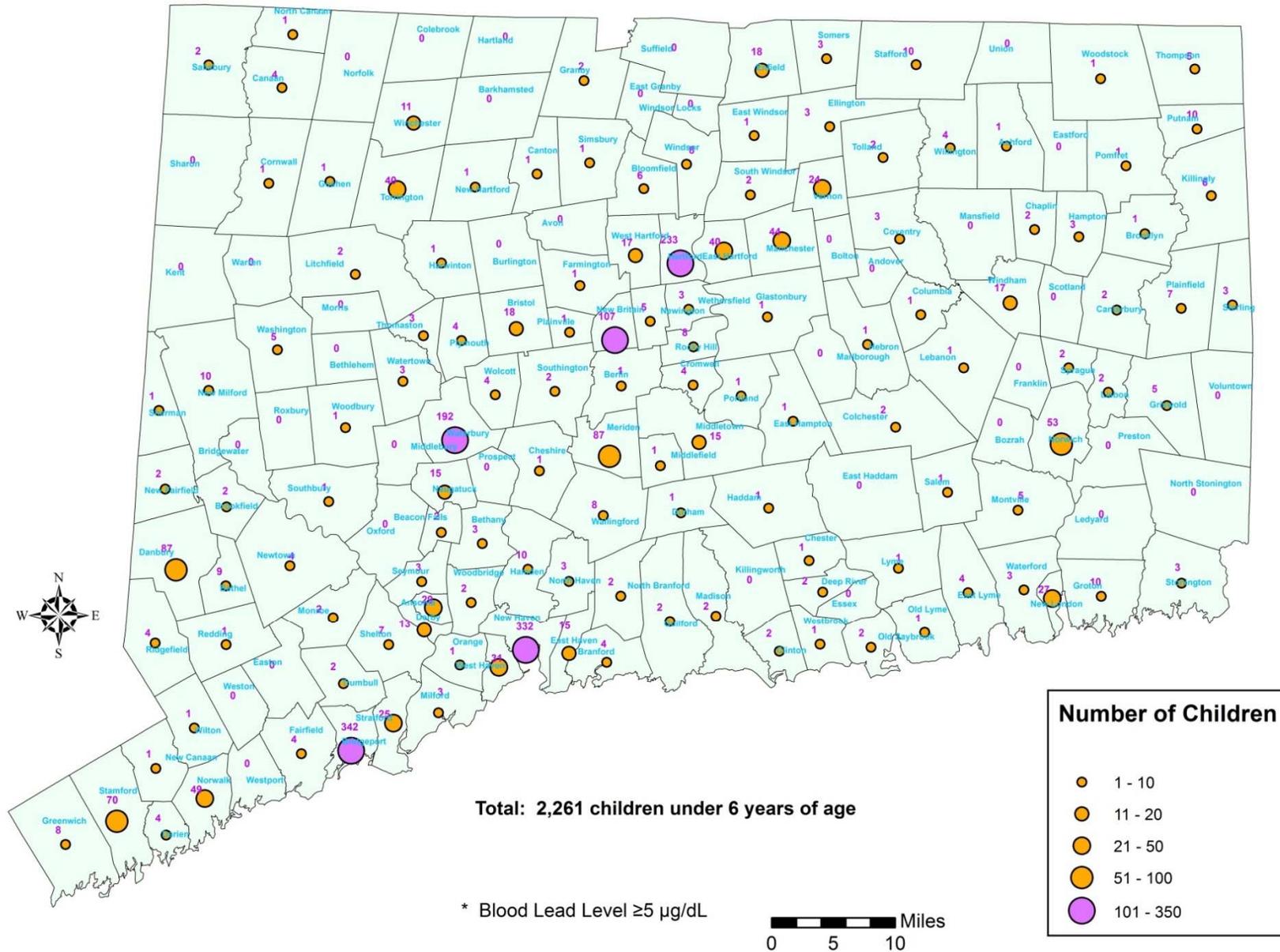
Part III. INCIDENCE OF CHILDHOOD LEAD POISONING

Incidence of Lead Poisoning among Children Under Six Years of Age

The incidence of lead poisoning cases (i.e., new cases of lead poisoning) is defined as the proportion of children under 6 years of age who had a confirmed lead test of ≥5 μg/dL for the first time in 2012 compared to all children under 6 years of age who were screened for lead in 2012 *AND* did not have a result of ≥5 μg/dL prior to 2012.

Incidence of Environmental Intervention Blood Lead Levels –

The incidence of lead poisoning cases of ≥15 μg/dL (i.e., new cases of blood lead ≥15 μg/dL) is defined as the proportion of children under 6 years of age who had a confirmed lead test of ≥15 μg/dL for the first time in 2012 compared to all children under 6 years of age who were tested for lead in 2011 *AND* who had not had a result of ≥15 μg/dL prior to 2012.

The incidence of lead poisoning cases of ≥20 μg/dL (i.e., new cases of blood lead ≥20 μg/dL) is defined as the proportion of children under 6 years of age who had a confirmed lead test of ≥20 μg/dL for the first time in 2012 compared to all children under 6 years of age who were screened for lead in 2012 *AND* who did not have a result of ≥20 μg/dL prior to 2012.

Figure 10. Incidence of lead poisoning among children under 6 years of age, by blood lead levels – Connecticut CY 2012
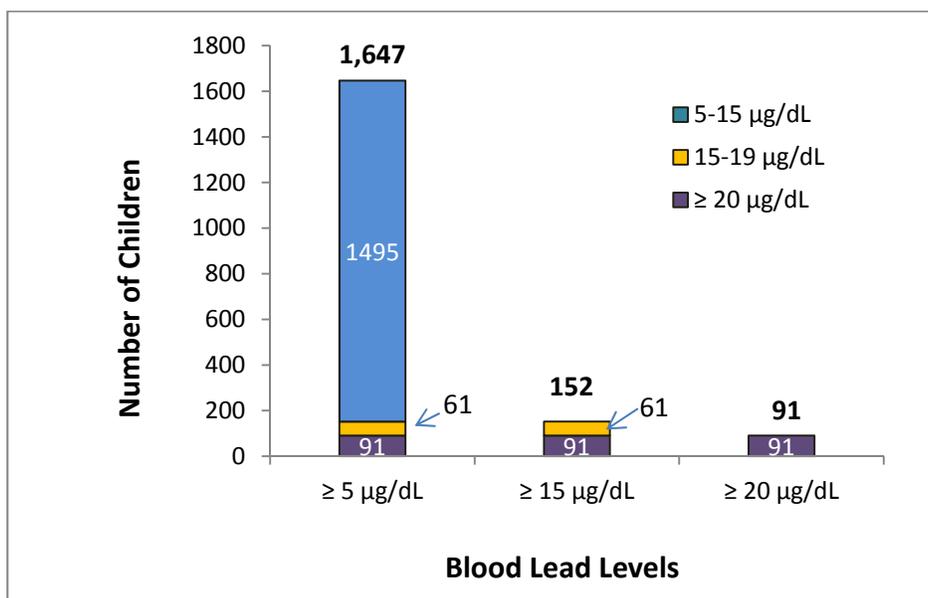
Number of new cases identified and incidence of lead poisoning in 2012:

- 1,647 (23 per 1,000) ≥5 μg/dL
- 152 (2 per 1,000) ≥15 μg/dL
- 91 (1 per 1,000) ≥20 μg/dL

For by town incidence of lead poisoning among children under 6 years of age, see Appendix Table 3.

Figure 11. Number of existing and new cases of lead poisoning among children under 6 years of age, by blood lead levels – Connecticut CY 2012
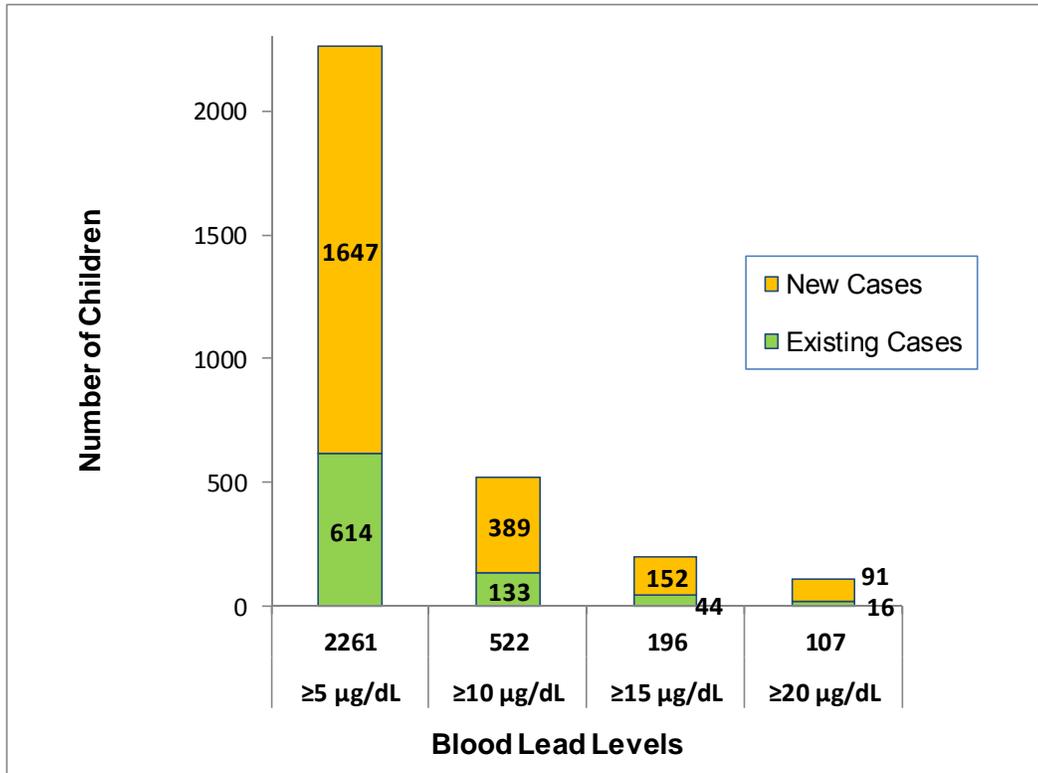
- Of the 2,261 children who were found to have blood lead levels ≥5 μg/dL in 2012, 1647 (72.8%) were new cases.
- Of the 522 children who were found to have blood lead levels ≥10 μg/dL in 2012, 389 (74.5%) were new cases.
- Of the 196 children who were found to have blood lead levels ≥15 μg/dL in 2012, 152 (77.6%) were new cases.
- Of the 107 children who were found to have blood lead levels ≥20 μg/dL in 2012, 91 (85.0%) were new cases.

Map 5

Number of New Cases ≥5 μg/dL By Town Among Children Under 6 Years Old Connecticut 2012

Total: 1,647 Children

Number of Children

- 1 - 10
- 11 - 30
- 31 - 50
- 51 - 100
- 101 - 228

Part IV. Demographic Characteristics Associated with Childhood Lead Poisoning

Race and Ethnicity

For the purposes of this report, children who were diagnosed with a blood lead level of ≥ 5 μg/dL are considered to be lead poisoned. The health disparities for lead poisoning among races and between Hispanic and non-Hispanic ethnicities remain in 2012. These health disparities were noticed in the first comprehensive annual lead surveillance report in 2004. The following figures portray the association between lead poisoning and race and ethnicity. They also indicate health disparities.

Race

Figure 12. Percentage of children under 6 years of age with a blood lead level ≥ 5 μg/dL, by race – Connecticut CY 2012
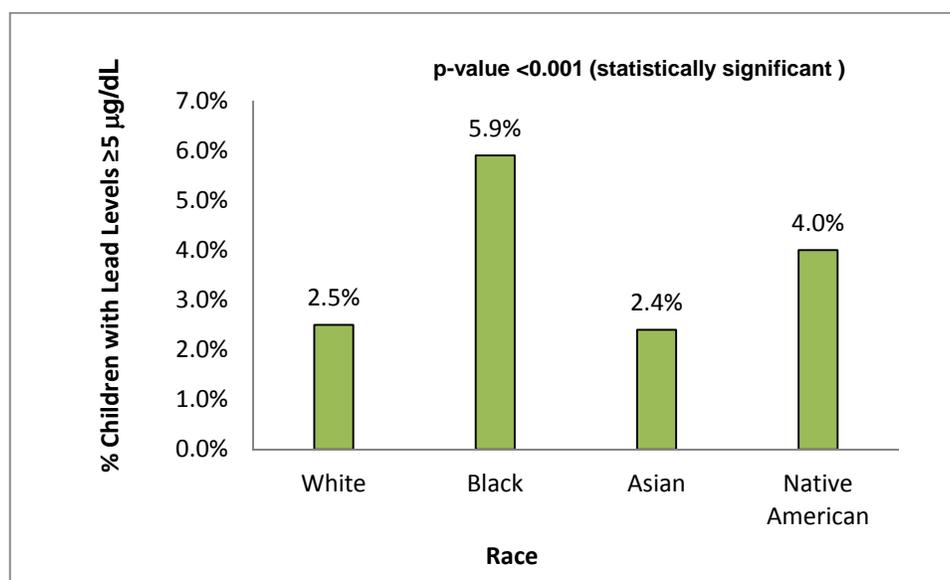
Among children under 6 years of age who had a confirmed blood lead test in 2012, Blacks (5.9%) were twice as likely to be lead poisoned at levels of ≥ 5 μg/dL when compared to Whites (2.5%) or Asians (2.4%).

Ethnicity

Figure 13. Percentage of children under 6 years of age with a blood lead level ≥5 μg/dL, by ethnicity – Connecticut CY 2012
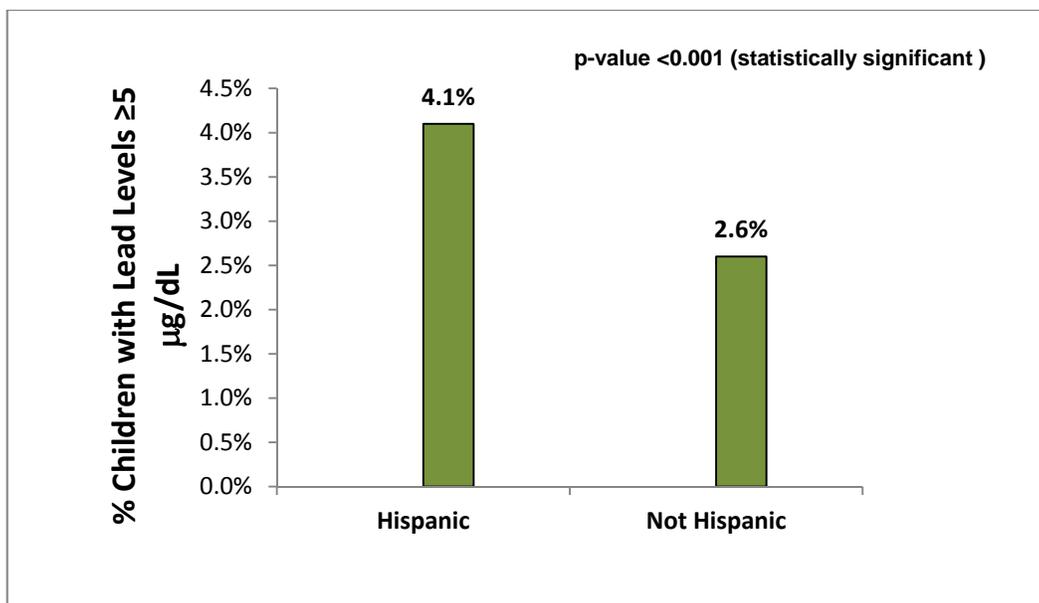
Among children under 6 years of age who had a confirmed blood lead test in 2012, Hispanics (4.1%) were significantly more likely to be lead poisoned at levels of ≥5 μg/dL than Non-Hispanics (2.6%).

Household Income below Poverty Level (Map 6)

A correlation between household incomes below poverty level and childhood lead poisoning is observed using geospatial illustration. Map 6 (page 32) depicts the overlay of lead poisoning cases and household incomes below poverty level. Hartford, Bridgeport, New Haven, and Waterbury are locations that have the highest number of households with incomes below poverty level, as well as the highest rates of childhood lead poisoning.

Pre-1978 housing (Map 7)

Lead-based paints were banned for residential use by 1978. The U.S. Environmental Protection Agency reports that 83% of homes built prior to 1980 contain some lead paint (*Report on the National Survey of Lead-Based Paint in Housing, Base Report*, EPA, 1995. EPA 747-R-95-003.). Older houses have an even higher probability of containing lead-based paint. In Connecticut, 46% of the housing stock was built before 1960 (*2010 American Community Survey 1-Year Estimates*, US Census, 2011). Map 7 (page 33) depicts childhood lead poisoning cases and pre-1960 housing.

Map 6.

Number of Lead Poisoned Children* &
Number of Households with Income Below Poverty Level, Connecticut 2012

Number of Children

·	0 - 14
○	15 - 49
◯	50 - 99
◯	100 - 199
◯	200 - 342

Number of houshold below poverty level

☐	0 - 99
☐	100 - 399
☐	400 - 799
☐	800 - 1499
☐	1500 - 3000
☐	3001 - 7835

0 2.5 5   10 Miles

Total: 2,261 children under 6 years of age from 2,192 dewlling units

* Blood Lead Level ≥5 µg/dL

Poverty Data From 2005-2009 American Community Survey 5 Year Estimate. U.S. Census Bureau, 2010
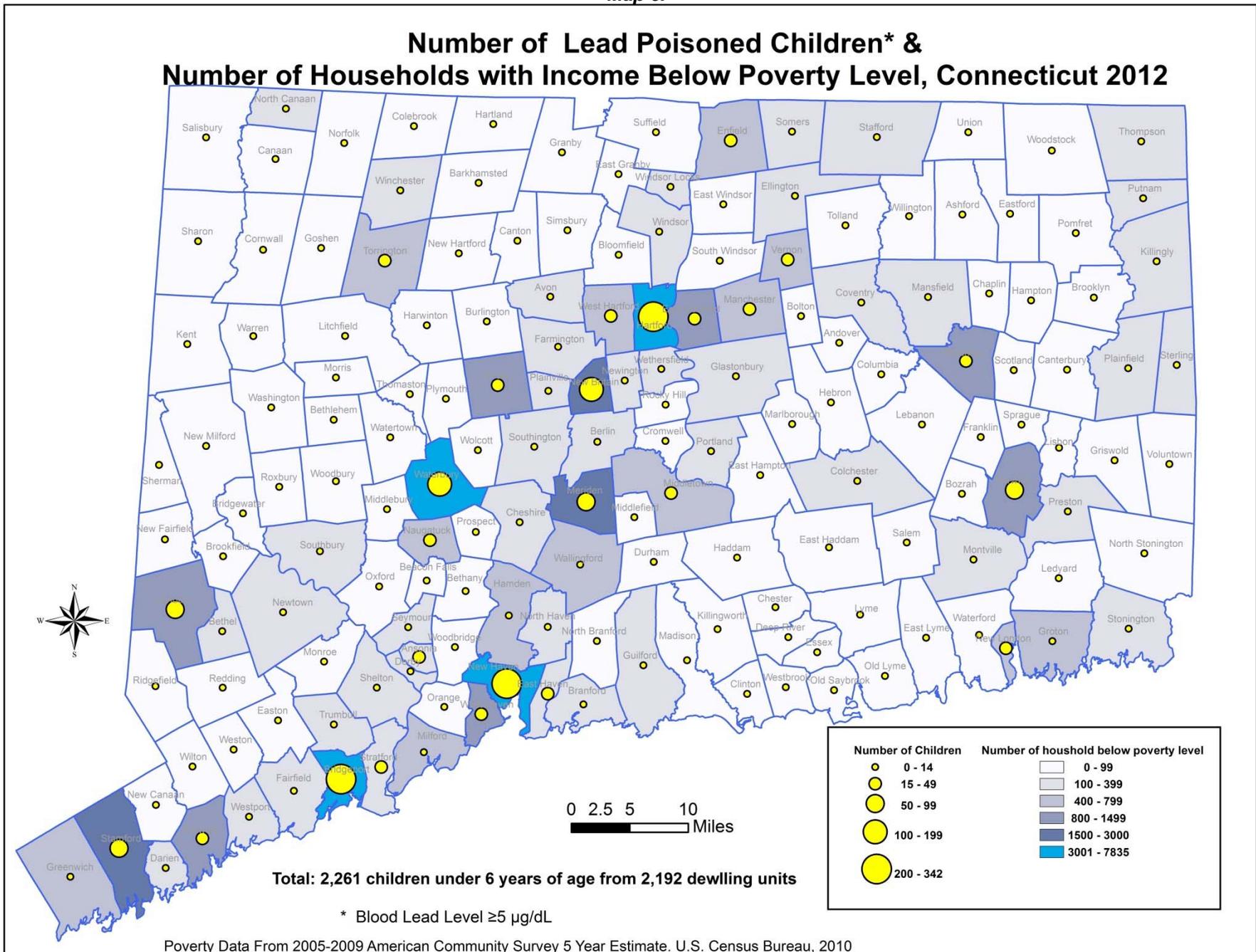
Map 7.

Number of Lead Poisoned Children* &
Housing Units Built pre-1960, Connecticut 2012

Total: 2,261 children under 6 years of age

Number of lead poisoned children

- 1 - 15
- 16 - 50
- 51 - 100
- 101 - 200
- 201 - 350

Number of Pre-1960 Housing Units

- 81 - 1000
- 1001 - 2000
- 2001 - 4000
- 4001 - 9000
- 9001 - 20000
- 20001 - 33104

Miles
0 5 10

* Blood Lead Level ≥5 µg/dL
Housing Data from 2005-2009 American Community Survey 5-Year Estimates. U.S. Census Bureau, 2010
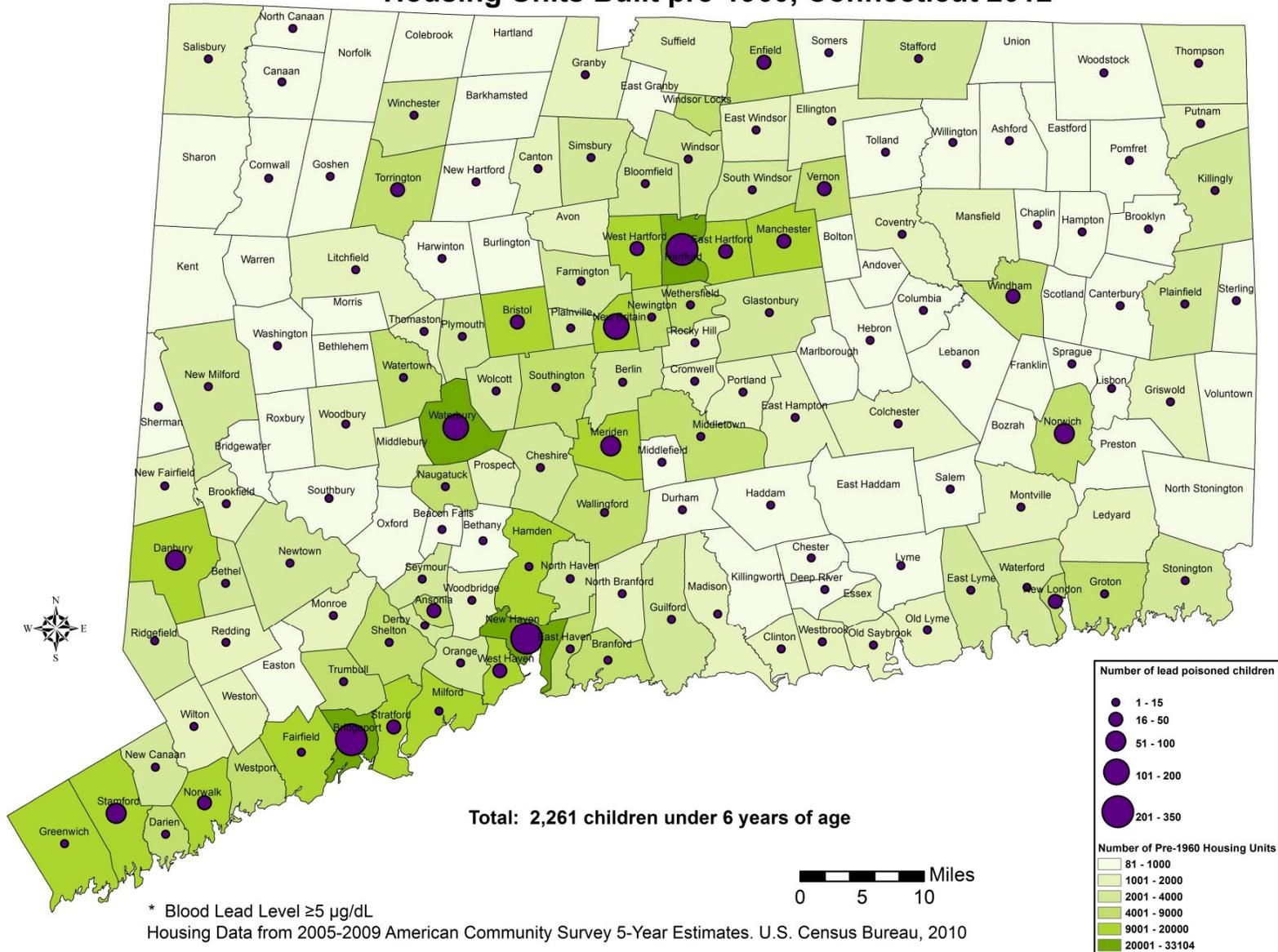
PART V. ENVIRONMENTAL INVESTIGATIONS FOR CHILDREN WITH
ENVIRONMENTAL INTERVENTION BLOOD LEAD LEVELS

Environmental Investigations

Per Connecticut General Statutes (CGS) sections 19a-110(d), and 19a-111, and the Lead Poisoning Prevention and Control Regulations (19a-111 et. seq.), local health departments are required to carry out comprehensive lead inspections at the residences of lead poisoned children. A comprehensive lead inspection includes the sampling of representative painted (or coated) surfaces of a dwelling unit, as well as the collection and analysis of dust, water, and exposed soil at the property.

When a child's venous blood lead level is reported as > 20 μg/dL, a local health department must conduct an epidemiological investigation and order the elimination (abatement) of the sources of lead exposure for that child. The investigation as to the sources of lead exposure may result in the health department conducting a lead inspection at more than one property, if that child is routinely cared for in alternate locations. Additionally, if a lead poisoned child moves to a new dwelling unit (while still poisoned), the new dwelling unit must also be inspected for lead hazards. If a child resides in more than one dwelling unit, multiple investigations are conducted for all the dwelling units where the lead poisoned child resides.

Some local health departments opt to conduct investigations and order remediation or abatement at lower levels of diagnosed lead poisoning. Those environmental data elements are also included in this report.

In 2012, 155 environmental cases were opened for children who had blood lead levels that triggered environmental intervention.

Among the 155 environmental cases opened, 150 properties required a comprehensive or limited lead inspection; five of the homes were built after 1978. Of the 150 properties, 132 units received a comprehensive lead inspection, seventeen properties received a limited inspection, and one refused entry. In order for a comprehensive inspection to be considered complete, the report must minimally include paint sampling, dust sampling, water analysis, and soil analysis results (where applicable) while for limited testing, the report must include dust sampling, water analysis, and soil analysis results.

The analyses of the environmental findings below are based on the environmental investigation reports for the 149 dwelling units for which environmental investigations were conducted for lead poisoned children and where lead inspection reports were provided to the CT DPH.

Housing style

Of the 149 dwelling units inspected, 109 (73.2%) were multiple-unit dwellings, 26 (17.4%) were attached single family dwellings, and 14 (9.4%) were detached single family dwellings.

Figure 14. Percentage of housing style among inspected housing units
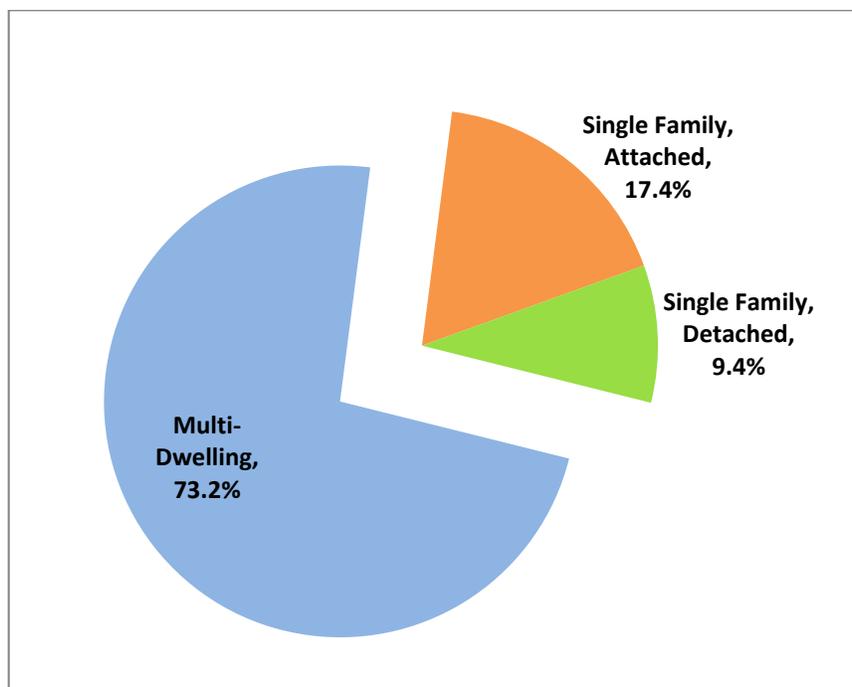
Environmental lead hazards

Children are most commonly exposed to lead from lead-based paint hazards. Lead-based paint hazards include defective painted surfaces, friction and chewable surfaces, lead-contaminated dust on interior floors and surfaces, and lead contaminated soil and water. Children are less frequently poisoned from herbal or ethnic remedies, imported cosmetics, and other miscellaneous lead-contaminated products and foods. A comprehensive lead inspection minimally consists of a lead paint inspection, as well as dust, soil, and water sampling and analyses. If other less common sources of lead exposure are identified during a comprehensive lead inspection or through conversations with a caregiver, they are also collected, sampled and analyzed. The Lead and Healthy Homes Program collects, analyzes, and reports on data for the most common sources of lead exposure.

Of the 149 dwelling units for which lead inspection results were received, 134 (89.9%) were identified with at least one environmental lead hazard, and 15 (10.1%) had no identified environmental lead hazard.

Environmental lead hazards identified by source

Figure 15. Percentage of environmental lead hazards identified by source
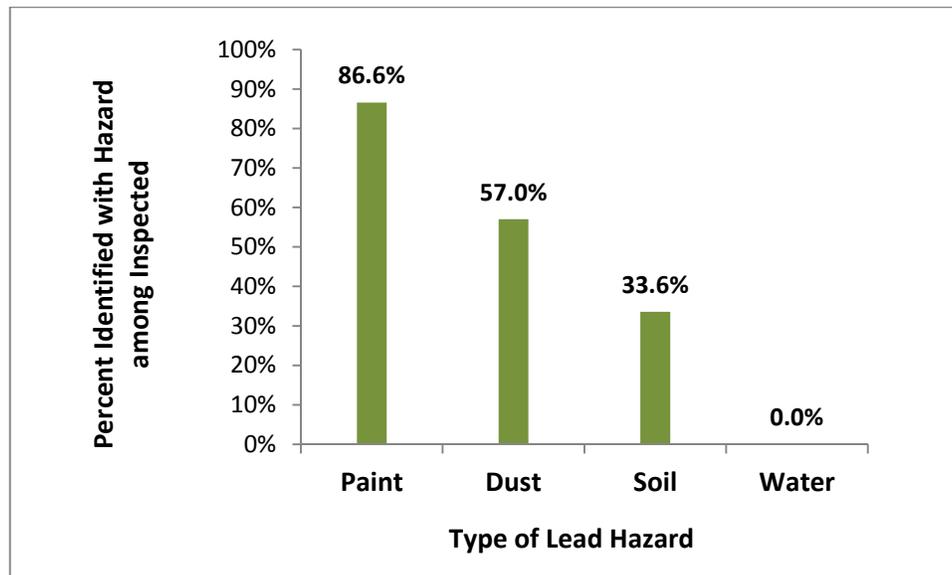
Of the 149 dwelling units investigated and reported, a total of 129 (86.6%) were identified with a lead-based paint hazard, 85 (57.0%) were identified with a dust lead hazard, 50 (33.6%) were identified with a soil lead hazard, and 0 (0.0%) was identified with a lead in drinking water hazard.

Environmental lead hazards identified by existence of lead paint hazard

Figure 16. Percentage of environmental lead hazards related to paint or non-paint hazards
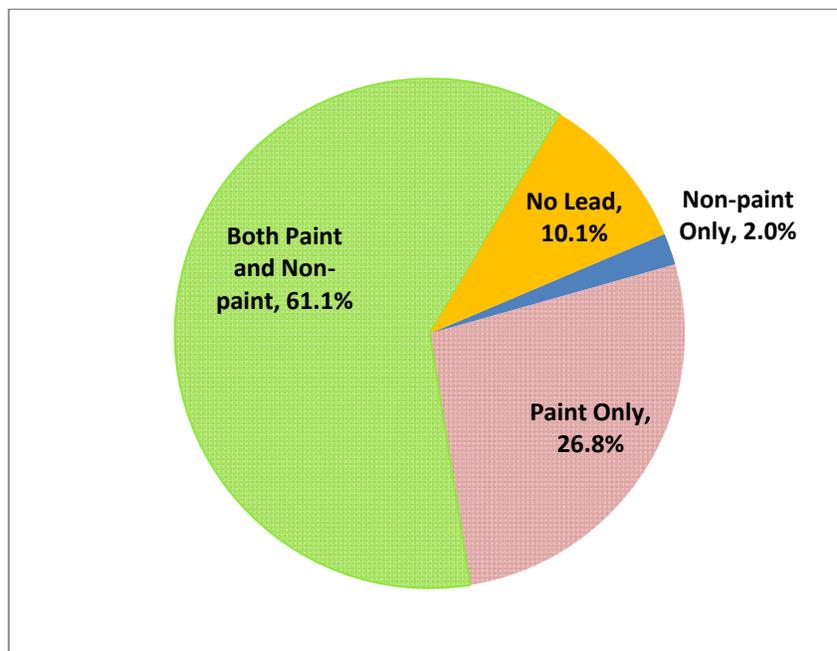
Of the 149 dwelling units for which investigations were completed, 40 (26.8%) dwelling units were identified with lead-based paint hazards only, 91 (61.1%) dwelling units were identified with both lead-based paint and non-paint hazards[††], 3 (2.0%) were identified with non-paint hazards only, and 15 (10.1%) had no environmental lead hazard.

[††] Non-paint hazards consist of lead dust, lead in soil, or lead in water.

Reported abatement and management activities

A health department is required to issue an order to the property owner to abate the lead-based paint hazards identified during the comprehensive lead inspection. The dwelling unit, common areas, ancillary structures (garages/sheds), and exterior exposed soil areas may undergo lead abatement if a lead hazard was identified on the property during the comprehensive lead inspection. Intact lead-based paint surfaces that remain in the home must be placed on a management plan to ensure that they remain intact, and do not become a lead hazard and future source of exposure for occupants.

Through the lead inspection report information provided to the CT DPH, the Lead and Healthy Homes Program identified 362 dwelling units (including cases carried forward from previous years) that remained open environmental cases in 2012.

Figure 17. Abatement and management activities among dwelling units requiring abatement of lead hazards
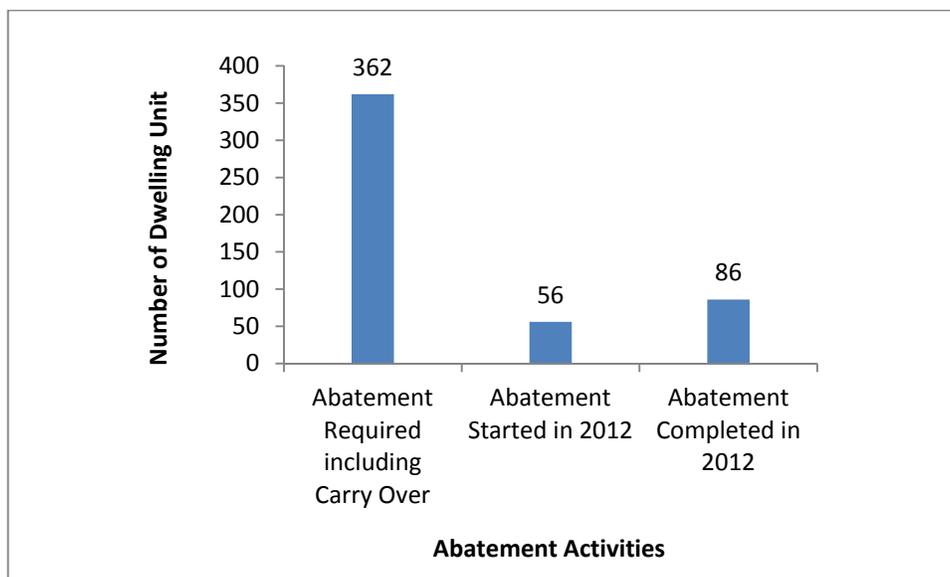
Among the 362 dwelling units for which abatement of lead hazards was required in 2012, 56 units started the abatement in 2012 and 86 units were completed in 2012.

Figure 18. Lead management plans among dwelling units where lead abatement was completed in 2012
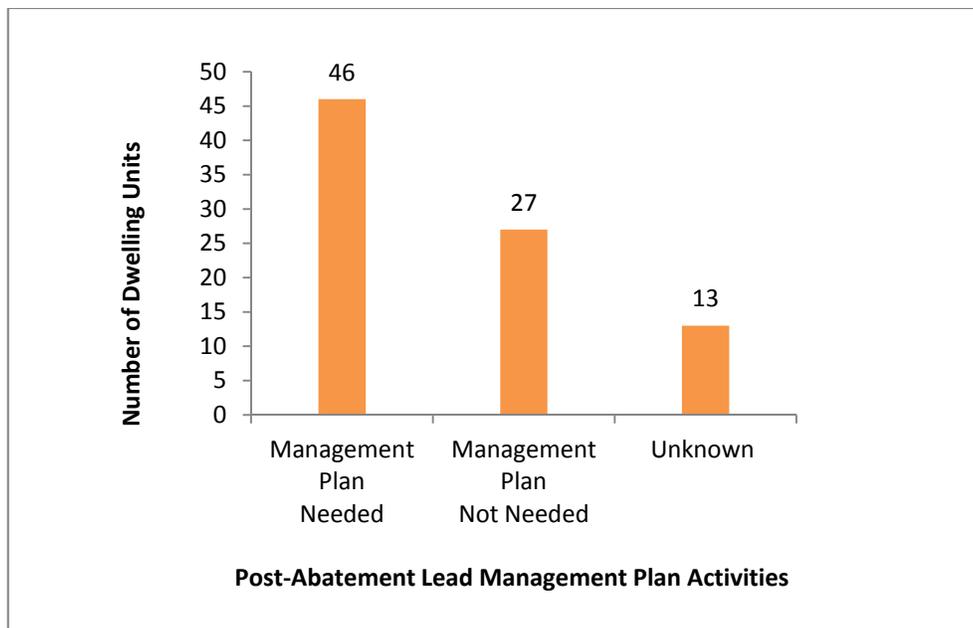
Intact lead-based paint and encapsulated surfaces must be placed on a lead management plan. Of the 86 dwelling units for which lead abatement was completed in 2012, 46 (53.5%) of the dwelling units required lead management plans, 27 (31.4%) did not require lead management plans, and the status of 13 (15.1%) dwelling units was not reported.

Part VI. Appendices

Table 1. By Town Screening

Table 1. By town screening for children under age 6 and 9 months to 2 years old – Connecticut CY 2012

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number	2 yrs.	Number	Percent
	Connecticut				
	CY 2002*	69,857	88,094	40,452	45.9
	CY 2003*	67,592	88,094	38,742	44.0
	CY 2004*	68,606	88,094	39,894	45.3
	CY 2005*	69,263	88,094	42,954	48.8
	CY 2006*	69,315	88,094	43,193	49.0
	CY 2007*	72,088	88,094	45,037	51.1
	CY 2008*	76,722	88,094	48,594	55.2
	CY 2009*	85,354	88,094	54,106	61.4
	CY 2010*	82,194	79,676	52,744	66.2
	CY 2011	77,423	82,765	55,960	67.6
	CY 2012	**75,569**	**80,411**	**54,524**	**67.8**
	By-Town, CY 2012				
1	ANDOVER	33	51	29	56.9
2	ANSONIA	520	551	359	65.2
3	ASHFORD	69	78	57	73.1
4	AVON	200	272	175	64.3
5	BARKHAMSTED	18	52	16	30.8
6	BEACON FALLS	92	121	64	52.9
7	BERLIN	197	326	155	47.5
8	BETHANY	59	73	49	67.1
9	BETHEL	336	358	280	78.2
10	BETHLEHEM	48	48	30	62.5
11	BLOOMFIELD	312	421	236	56.1

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number	2 yrs.	Number	Percent
12	BOLTON	64	72	46	63.9
13	BOZRAH	31	33	24	72.7
14	BRANFORD	369	443	341	77.0
15	BRIDGEPORT	6614	4609	3723	80.8
16	BRIDGEWATER	10	17	9	52.9
17	BRISTOL	1110	1377	899	65.3
18	BROOKFIELD	237	249	210	84.3
19	BROOKLYN	150	137	97	70.8
20	BURLINGTON	74	147	65	44.2
21	CANAAN	13	7	9	100.0[‡]
22	CANTERBURY	67	72	49	68.1
23	CANTON	100	168	91	54.2
24	CHAPLIN	39	51	36	70.6
25	CHESHIRE	318	394	238	60.4
26	CHESTER	55	57	50	87.7
27	CLINTON	185	237	167	70.5
28	COLCHESTER	188	346	159	46.0
29	COLEBROOK	7	12	4	33.3
30	COLUMBIA	64	81	57	70.4
31	CORNWALL	12	21	11	52.4
32	COVENTRY	192	256	151	59.0
33	CROMWELL	253	360	222	61.7
34	DANBURY	2334	2293	1739	75.8
35	DARIEN	409	515	344	66.8
36	DEEP RIVER	71	84	59	70.2

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number		Number	Percent
37	DERBY	299	320	214	66.9
38	DURHAM	98	130	87	66.9
39	EAST GRANBY	62	117	51	43.6
40	EAST HADDAM	99	160	96	60.0
41	EAST HAMPTON	236	313	226	72.2
42	EAST HARTFORD	1209	1426	887	62.2
43	EAST HAVEN	513	561	421	75.0
44	EAST LYME	204	267	172	64.4
45	EAST WINDSOR	176	253	127	50.2
46	EASTFORD	23	14	17	100.0[‡]
47	EASTON	79	99	70	70.7
48	ELLINGTON	267	334	189	56.6
49	ENFIELD	779	795	532	66.9
50	ESSEX	75	81	68	84.0
51	FAIRFIELD	998	1126	884	78.5
52	FARMINGTON	267	413	215	52.1
53	FRANKLIN	17	28	16	57.1
54	GLASTONBURY	367	570	304	53.3
55	GOSHEN	28	39	27	69.2
56	GRANBY	131	164	108	65.9
57	GREENWICH	1165	1164	1016	87.3
58	GRISWOLD	166	264	117	44.3
59	GROTON	1004	1133	743	65.6
60	GUILFORD	218	309	205	66.3
61	HADDAM	107	153	105	68.6

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number		Number	Percent
62	HAMDEN	982	1310	811	61.9
63	HAMPTON	37	41	33	80.5
64	HARTFORD	4668	4433	3087	69.6
65	HARTLAND	22	27	16	59.3
66	HARWINTON	58	64	49	76.6
67	HEBRON	88	162	76	46.9
68	KENT	18	42	16	38.1
69	KILLINGLY	395	324	255	78.7
70	KILLINGWORTH	72	75	70	93.3
71	LEBANON	63	138	56	40.6
72	LEDYARD	263	291	224	77.0
73	LISBON	29	35	20	57.1
74	LITCHFIELD	94	118	84	71.2
75	LYME & OLD LYME[β]	101	114	91	79.8
76	MADISON	176	181	170	93.9
77	MANCHESTER	1354	1646	1010	61.4
78	MANSFIELD	134	199	122	61.3
79	MARLBOROUGH	65	123	56	45.5
80	MERIDEN	1889	1688	1209	71.6
81	MIDDLEBURY	118	128	68	53.1
82	MIDDLEFIELD	60	68	58	85.3
83	MIDDLETOWN	931	1297	827	63.8
84	MILFORD	757	1033	591	57.2
85	MONROE	291	320	252	78.8
86	MONTVILLE	296	354	235	66.4

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number		Number	Percent
87	MORRIS	27	35	26	74.3
88	NAUGATUCK	692	789	462	58.6
89	NEW BRITAIN	2590	2493	1593	63.9
90	NEW CANAAN	342	367	297	80.9
91	NEW FAIRFIELD	208	189	175	92.6
92	NEW HARTFORD	68	121	61	50.4
93	NEW HAVEN	4687	4114	3068	74.6
94	NEW LONDON	693	710	483	68.0
95	NEW MILFORD	422	512	377	73.6
96	NEWINGTON	338	549	283	51.5
97	NEWTOWN	290	415	255	61.4
98	NORFOLK	16	23	13	56.5
99	NORTH BRANFORD	169	227	154	67.8
100	NORTH CANAAN	32	60	25	41.7
101	NORTH HAVEN	302	383	245	64.0
102	NORTH STONINGTON	54	63	41	65.1
103	NORWALK	2163	2606	1639	62.9
104	NORWICH	826	1066	566	53.1
105	OLD LYME & LYME[β]	101	114	91	79.8
106	OLD SAYBROOK	111	145	105	72.4
107	ORANGE	169	190	147	77.4
108	OXFORD	178	244	158	64.8
109	PLAINFIELD	324	301	212	70.4
110	PLAINVILLE	269	369	208	56.4
111	PLYMOUTH	192	230	143	62.2

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number		Number	Percent
112	POMFRET	72	86	51	59.3
113	PORTLAND	130	179	127	70.9
114	PRESTON	45	69	34	49.3
115	PROSPECT	112	148	67	45.3
116	PUTNAM	232	183	141	77.0
117	REDDING	89	117	84	71.8
118	RIDGEFIELD	379	388	320	82.5
119	ROCKY HILL	341	433	297	68.6
120	ROXBURY	21	20	20	100.0
121	SALEM	40	67	35	52.2
122	SALISBURY	21	41	16	39.0
123	SCOTLAND	10	18	8	44.4
124	SEYMOUR	302	339	232	68.4
125	SHARON	17	28	14	50.0
126	SHELTON	662	757	568	75.0
127	SHERMAN	36	49	32	65.3
128	SIMSBURY	226	383	183	47.8
129	SOMERS	117	108	81	75.0
130	SOUTH WINDSOR	290	466	231	49.6
131	SOUTHBURY	176	214	157	73.4
132	SOUTHINGTON	507	796	384	48.2
133	SPRAGUE	54	72	40	55.6
134	STAFFORD	221	242	177	73.1
135	STAMFORD	3805	4314	3028	70.2
136	STERLING	60	52	35	67.3

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number		Number	Percent
137	STONINGTON	173	150	133	88.7
138	STRATFORD	1125	1133	848	74.8
139	SUFFIELD	172	167	108	64.7
140	THOMASTON	107	145	72	49.7
141	THOMPSON	160	107	89	83.2
142	TOLLAND	235	270	174	64.4
143	TORRINGTON	603	822	501	60.9
144	TRUMBULL	542	595	473	79.5
145	UNION	7	8	5	62.5
146	VERNON	661	807	510	63.2
147	VOLUNTOWN	32	38	21	55.3
148	WALLINGFORD	791	854	629	73.7
149	WARREN	9	8	8	100.0
150	WASHINGTON	47	46	43	93.5
151	WATERBURY	5089	3328	2280	68.5
152	WATERFORD	260	293	189	64.5
153	WATERTOWN	403	402	224	55.7
154	WEST HARTFORD	1103	1372	915	66.7
155	WEST HAVEN	1303	1429	963	67.4
156	WESTBROOK	75	81	71	87.7
157	WESTON	106	130	96	73.8
158	WESTPORT	417	378	373	98.7
159	WETHERSFIELD	411	572	343	60.0
160	WILLINGTON	83	87	67	77.0
161	WILTON	248	334	223	66.8

Table 1. By Town Screening

		Number of Children Under Age 6 Screened	Population* Age 9 months-2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened	
		Number	2 yrs.	Number	Percent
162	WINCHESTER	153	216	121	56.0
163	WINDHAM	529	661	471	71.3
164	WINDSOR	435	588	340	57.8
165	WINDSOR LOCKS	171	211	127	60.2
166	WOLCOTT	222	253	120	47.4
167	WOODBRIDGE	116	109	100	91.7
168	WOODBURY	106	126	75	59.5
169	WOODSTOCK	150	88	81	92.0

NOTE: Children are counted only once, regardless of the number of times they are tested.

- Population estimate is based on vital registry for birth cohorts 2009 and 2010. Children 9 months to 11 months old who were tested in 2012 were added to the population denominator.

- * Screening rates for CY 2002 to CY 2010 are based on number of children who were 1 or 2 years old at time of screening. These statistics were reported in previous annual reports

- ‡ Screening rate rounded down to 100%.

- β Lyme and Old Lyme are combined because residents of Lyme are often reported as residing in Old Lyme.

Table 2. By Town Prevalence - Children under 6 Years of Age

Table 2. Percent of Children with a Blood Lead Level 0-4 μg/dL and Cumulative Percent of Children with a blood lead level of ≥5 μg/dL among children under 6 years of age, by Blood Lead Categories

		Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test										
CY 2012 Data (<6 years old)	Number of Children with Confirmed Test	0–4 μg/dL		≥ 5 μg/dL		**Cumulative Statistics**						
						≥ 10 μg/dL		≥ 15 μg/dL		≥ 20 μg/dL		
		Number	%	Number	%	Number	%	Number	%	Number	%	
Connecticut												
CY 2002	69,062					1,733	2.5			353	0.5	
CY 2003	66,847					1,445	2.2			272	0.4	
CY 2004	67,688					1,472	2.2			288	0.4	
CY 2005	68,757					1,263	1.8			212	0.3	
CY 2006	68,828					1,082	1.6	415	0.6	215	0.3	
CY 2007	71,627					1,020	1.4	445	0.6	208	0.3	
CY 2008	76,367					1,054	1.4	448	0.6	221	0.3	
CY 2009	85,138					737	0.9	308	0.4	153	0.2	
CY 2010	81,999	76.598	93.4	5,401*	6.6	743	0.9	315	0.4	156	0.2	
CY 2011	77,306	72,322	93.6	4,984*	6.4*	619	0.8	264	0.3	111	0.1	
CY2012	**73,785**	**71,524**	**96.9**	**2,261**	**3.1**	**522**	**0.7**	**196**	**0.3**	**107**	**0.1**	
By-Town												
1 ANDOVER	33	33	100.0	0	0	0	0	0	0	0	0	
2 ANSONIA	496	467	94.2	29	5.8	9	1.8	3	0.6	0	0	
3 ASHFORD	68	67	98.5	1	1.5	1	1.5	1	1.5	0	0	
4 AVON	198	198	100.0	0	0	0	0	0	0	0	0	
5 BARKHAMSTED	17	17	100.0	0	0	0	0	0	0	0	0	
6 BEACON FALLS	91	89	97.8	2	2.2	2	2.2	1	1.1	1	1.1	
7 BERLIN	195	194	99.5	1	0.5	0	0	0	0	0	0	
8 BETHANY	56	53	94.6	3	5.4	1	1.8	1	1.8	1	1.8	

* Capillary tests ≥ 5 μg/dL were treated as confirmatory tests based on previous confirmatory definition

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test									
			0–4 µg/dL		Cumulative Statistics							
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%
9	BETHEL	327	318	97.2	9	2.8	3	0.9	1	0.3	1	0.3
10	BETHLEHEM	45	45	100.0	0	0	0	0	0	0	0	0
11	BLOOMFIELD	310	304	98.1	6	1.9	2	0.6	1	0.3	0	0
12	BOLTON	64	64	100.0	0	0	0	0	0	0	0	0
13	BOZRAH	31	31	100.0	0	0	0	0	0	0	0	0
14	BRANFORD	364	360	98.9	4	1.1	1	0.3	0	0	0	0
15	BRIDGEPORT	6478	6136	94.7	342	5.3	87	1.3	36	0.6	24	0.4
16	BRIDGEWATER	10	10	100.0	0	0	0	0	0	0	0	0
17	BRISTOL	1078	1060	98.3	18	1.7	2	0.2	2	0.2	0	0
18	BROOKFIELD	231	229	99.1	2	0.9	0	0	0	0	0	0
19	BROOKLYN	145	144	99.3	1	0.7	0	0	0	0	0	0
20	BURLINGTON	73	73	100.0	0	0	0	0	0	0	0	0
21	CANAAN	13	9	69.2	4	30.8	1	7.7	1	7.7	0	0
22	CANTERBURY	67	65	97.0	2	3	0	0	0	0	0	0
23	CANTON	97	96	99.0	1	1	0	0	0	0	0	0
24	CHAPLIN	38	36	94.7	2	5.3	0	0	0	0	0	0
25	CHESHIRE	316	315	99.7	1	0.3	0	0	0	0	0	0
26	CHESTER	53	52	98.1	1	1.9	0	0	0	0	0	0
27	CLINTON	182	180	98.9	2	1.1	0	0	0	0	0	0
28	COLCHESTER	186	184	98.9	2	1.1	0	0	0	0	0	0
29	COLEBROOK	4	4	100.0	0	0	0	0	0	0	0	0
30	COLUMBIA	64	63	98.4	1	1.6	0	0	0	0	0	0
31	CORNWALL	10	9	90.0	1	10	0	0	0	0	0	0
32	COVENTRY	190	187	98.4	3	1.6	0	0	0	0	0	0
33	CROMWELL	251	247	98.4	4	1.6	0	0	0	0	0	0
34	DANBURY	2285	2198	96.2	87	3.8	6	0.3	0	0	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test									
			0–4 µg/dL		Cumulative Statistics							
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%
35	DARIEN	404	400	99.0	4	1	2	0.5	0	0	0	0
36	DEEP RIVER	69	67	97.1	2	2.9	0	0	0	0	0	0
37	DERBY	286	273	95.5	13	4.5	3	1	2	0.7	1	0.3
38	DURHAM	98	97	99.0	1	1	1	1	0	0	0	0
39	EAST GRANBY	61	61	100.0	0	0	0	0	0	0	0	0
40	EAST HADDAM	97	97	100.0	0	0	0	0	0	0	0	0
41	EAST HAMPTON	230	229	99.6	1	0.4	1	0.4	1	0.4	0	0
42	EAST HARTFORD	1201	1161	96.7	40	3.3	4	0.3	3	0.2	1	0.1
43	EAST HAVEN	508	493	97.0	15	3	1	0.2	0	0	0	0
44	EAST LYME	198	194	98.0	4	2	2	1	2	1	1	0.5
45	EAST WINDSOR	171	170	99.4	1	0.6	0	0	0	0	0	0
46	EASTFORD	22	22	100.0	0	0	0	0	0	0	0	0
47	EASTON	78	78	100.0	0	0	0	0	0	0	0	0
48	ELLINGTON	262	259	98.9	3	1.1	0	0	0	0	0	0
49	ENFIELD	750	732	97.6	18	2.4	4	0.5	2	0.3	1	0.1
50	ESSEX	73	73	100.0	0	0	0	0	0	0	0	0
51	FAIRFIELD	990	986	99.6	4	0.4	2	0.2	0	0	0	0
52	FARMINGTON	265	264	99.6	1	0.4	0	0	0	0	0	0
53	FRANKLIN	17	17	100.0	0	0	0	0	0	0	0	0
54	GLASTONBURY	365	364	99.7	1	0.3	0	0	0	0	0	0
55	GOSHEN	27	26	96.3	1	3.7	1	3.7	0	0	0	0
56	GRANBY	129	127	98.5	2	1.6	0	0	0	0	0	0
57	GREENWICH	1136	1128	99.3	8	0.7	1	0.1	1	0.1	1	0.1
58	GRISWOLD	163	158	96.9	5	3.1	1	0.6	0	0	0	0
59	GROTON	989	979	99.0	10	1	3	0.3	0	0	0	0
60	GUILFORD	215	213	99.1	2	0.9	0	0	0	0	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test									
			0–4 µg/dL		Cumulative Statistics							
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%
61	HADDAM	107	106	99.1	1	0.9	1	0.9	1	0.9	1	0.9
62	HAMDEN	949	939	98.9	10	1.1	3	0.3	1	0.1	0	0
63	HAMPTON	35	32	91.4	3	8.6	0	0	0	0	0	0
64	HARTFORD	4630	4397	95.0	233	5	46	1	18	0.4	6	0.1
65	HARTLAND	22	22	100.0	0	0	0	0	0	0	0	0
66	HARWINTON	57	56	98.2	1	1.8	0	0	0	0	0	0
67	HEBRON	88	87	98.9	1	1.1	0	0	0	0	0	0
68	KENT	17	17	100.0	0	0	0	0	0	0	0	0
69	KILLINGLY	374	368	98.4	6	1.6	4	1.1	1	0.3	0	0
70	KILLINGWORTH	69	69	100.0	0	0	0	0	0	0	0	0
71	LEBANON	58	57	98.3	1	1.7	0	0	0	0	0	0
72	LEDYARD	261	261	100.0	0	0	0	0	0	0	0	0
73	LISBON	29	27	93.1	2	6.9	0	0	0	0	0	0
74	LITCHFIELD	88	86	97.7	2	2.3	1	1.1	0	0	0	0
75	LYME	1	.	.	1	100	0	0	0	0	0	0
76	MADISON	171	169	98.8	2	1.2	0	0	0	0	0	0
77	MANCHESTER	1334	1290	96.7	44	3.3	11	0.8	6	0.4	6	0.4
78	MANSFIELD	133	133	100.0	0	0	0	0	0	0	0	0
79	MARLBOROUGH	63	63	100.0	0	0	0	0	0	0	0	0
80	MERIDEN	1849	1762	95.3	87	4.7	22	1.2	12	0.6	4	0.2
81	MIDDLEBURY	112	112	100.0	0	0	0	0	0	0	0	0
82	MIDDLEFIELD	59	58	98.3	1	1.7	0	0	0	0	0	0
83	MIDDLETOWN	920	905	98.4	15	1.6	2	0.2	0	0	0	0
84	MILFORD	739	736	99.6	3	0.4	0	0	0	0	0	0
85	MONROE	290	288	99.3	2	0.7	1	0.3	0	0	0	0
86	MONTVILLE	286	281	98.3	5	1.7	1	0.3	0	0	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test										
			0–4 µg/dL		Cumulative Statistics									
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL			
			Number	%	Number	%	Number	%	Number	%	Number	%
87	MORRIS	26	26	100.0	0	0	0	0	0	0	0	0
88	NAUGATUCK	680	665	97.8	15	2.2	4	0.6	2	0.3	1	0.1
89	NEW BRITAIN	2567	2460	95.8	107	4.2	23	0.9	11	0.4	8	0.3
90	NEW CANAAN	334	333	99.7	1	0.3	0	0	0	0	0	0
91	NEW FAIRFIELD	206	204	99.0	2	1	0	0	0	0	0	0
92	NEW HARTFORD	64	63	98.4	1	1.6	1	1.6	0	0	0	0
93	NEW HAVEN	4435	4103	92.5	332	7.5	92	2.1	35	0.8	20	0.5
94	NEW LONDON	670	643	96.0	27	4	7	1	1	0.1	0	0
95	NEW MILFORD	417	407	97.6	10	2.4	0	0	0	0	0	0
96	NEWINGTON	334	330	98.8	4	1.2	0	0.0	0	0.0	0	0.0
97	NEWTOWN	276	272	98.6	4	1.4	1	0.4	0	0	0	0
98	NORFOLK	15	15	100.0	0	0	0	0	0	0	0	0
99	NORTH BRANFORD	169	167	98.8	2	1.2	0	0	0	0	0	0
100	NORTH CANAAN	29	28	96.6	1	3.4	0	0	0	0	0	0
101	NORTH HAVEN	298	295	99.0	3	1	0	0	0	0	0	0
102	NORTH STONINGTON	53	53	100.0	0	0	0	0	0	0	0	0
103	NORWALK	2137	2088	97.7	49	2.3	3	0.1	1	0	0	0
104	NORWICH	815	762	93.5	53	6.5	9	1.1	3	0.4	1	0.1
105	OLD LYME	97	96	99.0	1	1	0	0	0	0	0	0
106	OLD SAYBROOK	111	109	98.2	2	1.8	0	0	0	0	0	0
107	ORANGE	165	164	99.4	1	0.6	0	0	0	0	0	0
108	OXFORD	174	174	100.0	0	0	0	0	0	0	0	0
109	PLAINFIELD	304	297	97.7	7	2.3	3	1	1	0.3	1	0.3
110	PLAINVILLE	263	262	99.6	1	0.4	0	0	0	0	0	0
111	PLYMOUTH	189	185	97.9	4	2.1	3	1.6	1	0.5	0	0
112	POMFRET	72	71	98.6	1	1.4	1	1.4	0	0	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test										
			0–4 µg/dL		Cumulative Statistics									
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL			
			Number	%	Number	%	Number	%	Number	%	Number	%
113	PORTLAND	123	122	99.2	1	0.8	0	0	0	0	0	0
114	PRESTON	45	45	100.0	0	0	0	0	0	0	0	0
115	PROSPECT	111	111	100.0	0	0	0	0	0	0	0	0
116	PUTNAM	214	204	95.3	10	4.7	4	1.9	3	1.4	2	0.9
117	REDDING	89	88	98.9	1	1.1	0	0	0	0	0	0
118	RIDGEFIELD	373	369	98.9	4	1.1	0	0	0	0	0	0
119	ROCKY HILL	337	329	97.6	8	2.4	1	0.3	1	0.3	1	0.3
120	ROXBURY	21	21	100.0	0	0	0	0	0	0	0	0
121	SALEM	40	39	97.5	1	2.5	1	2.5	0	0	0	0
122	SALISBURY	21	19	90.5	2	9.5	0	0	0	0	0	0
123	SCOTLAND	10	10	100.0	0	0	0	0	0	0	0	0
124	SEYMOUR	296	293	99.0	3	1	1	0.3	0	0	0	0
125	SHARON	17	17	100.0	0	0	0	0	0	0	0	0
126	SHELTON	651	644	98.9	7	1.1	1	0.2	0	0	0	0
127	SHERMAN	36	35	97.2	1	2.8	0	0	0	0	0	0
128	SIMSBURY	222	221	99.6	1	0.5	0	0	0	0	0	0
129	SOMERS	113	110	97.3	3	2.7	1	0.9	1	0.9	1	0.9
130	SOUTH WINDSOR	286	284	99.3	2	0.7	2	0.7	1	0.3	1	0.3
131	SOUTHBURY	175	174	99.4	1	0.6	0	0	0	0	0	0
132	SOUTHINGTON	501	499	99.6	2	0.4	1	0.2	0	0	0	0
133	SPRAGUE	53	51	96.2	2	3.8	2	3.8	0	0	0	0
134	STAFFORD	199	189	95.0	10	5	5	2.5	2	1	1	0.5
135	STAMFORD	3762	3692	98.1	70	1.9	13	0.3	2	0.1	0	0
136	STERLING	54	51	94.4	3	5.6	0	0	0	0	0	0
137	STONINGTON	168	165	98.2	3	1.8	0	0	0	0	0	0
138	STRATFORD	1102	1077	97.7	25	2.3	1	0.1	0	0	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test									
			0–4 µg/dL		Cumulative Statistics							
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%
139	SUFFIELD	170	170	100.0	0	0	0	0	0	0	0	0
140	THOMASTON	103	100	97.1	3	2.9	0	0	0	0	0	0
141	THOMPSON	153	148	96.7	5	3.3	2	1.3	0	0	0	0
142	TOLLAND	234	232	99.1	2	0.9	1	0.4	0	0	0	0
143	TORRINGTON	555	515	92.8	40	7.2	9	1.6	5	0.9	3	0.5
144	TRUMBULL	534	532	99.6	2	0.4	1	0.2	0	0	0	0
145	UNION	7	7	100.0	0	0	0	0	0	0	0	0
146	VERNON	640	616	96.3	24	3.8	9	1.4	3	0.5	2	0.3
147	VOLUNTOWN	32	32	100.0	0	0	0	0	0	0	0	0
148	WALLINGFORD	785	777	99.0	8	1	3	0.4	0	0	0	0
149	WARREN	8	8	100.0	0	0	0	0	0	0	0	0
150	WASHINGTON	47	42	89.4	5	10.6	1	2.1	0	0	0	0
151	WATERBURY	4837	4645	96.0	192	4	51	1.1	19	0.4	13	0.3
152	WATERFORD	252	249	98.8	3	1.2	0	0	0	0	0	0
153	WATERTOWN	399	396	99.2	3	0.8	0	0	0	0	0	0
154	WEST HARTFORD	1088	1071	98.4	17	1.6	0	0	0	0	0	0
155	WEST HAVEN	1270	1239	97.6	31	2.4	10	0.8	1	0.1	1	0.1
156	WESTBROOK	75	74	98.7	1	1.3	1	1.3	0	0	0	0
157	WESTON	104	104	100.0	0	0	0	0	0	0	0	0
158	WESTPORT	409	409	100.0	0	0	0	0	0	0	0	0
159	WETHERSFIELD	411	408	99.3	3	0.7	2	0.5	0	0	0	0
160	WILLINGTON	77	73	94.8	4	5.2	2	2.6	0	0	0	0
161	WILTON	246	245	99.6	1	0.4	0	0	0	0	0	0
162	WINCHESTER	142	131	92.3	11	7.7	4	2.8	3	2.1	1	0.7
163	WINDHAM	498	481	96.6	17	3.4	10	2	1	0.2	0	0
164	WINDSOR	430	422	98.1	8	1.9	1	0.2	1	0.2	0	0

Table 2. By Town Prevalence - Children under 6 Years of Age

CY 2012 Data (<6 years old)		Number of Children with Confirmed Test	Numbers and Percents of Confirmed Blood Lead Levels among Children Aged Less Than Six Years with a Confirmed Lead Test										
			0–4 µg/dL		Cumulative Statistics									
					≥ 5 µg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 µg/dL			
			Number	%	Number	%	Number	%	Number	%	Number	%
165	WINDSOR LOCKS	168	168	100.0	0	0	0	0	0	0	0	0
166	WOLCOTT	217	213	98.2	4	1.8	1	0.5	0	0	0	0
167	WOODBRIDGE	113	111	98.2	2	1.8	1	0.9	1	0.9	1	0.9
168	WOODBURY	104	103	99.0	1	1	0	0	0	0	0	0
169	WOODSTOCK	147	146	99.3	1	0.7	0	0	0	0	0	0

Table 3. By Town Incidence

Table 3. Incidence of lead poisoning among children under six years of age, by town and by blood lead levels – Connecticut CY 2012

	CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
	Connecticut												
		1647	**72534**	**2.3**	**389**	**73343**	**0.5**	**152**	**73584**	**0.2**	**91**	**73690**	**0.1**
	By-Town												
1	ANDOVER	0	33	0	0	33	0.0	0	33	0.0	0	33	0.0
2	ANSONIA	19	481	4	7	490	1.4	2	492	0.4	0	494	0.0
3	ASHFORD	1	68	1.5	1	68	1.5	1	68	1.5	0	68	0.0
4	AVON	0	198	0	0	198	0.0	0	198	0.0	0	198	0.0
5	BARKHAMSTED	0	17	0	0	17	0.0	0	17	0.0	0	17	0.0
6	BEACON FALLS	0	87	0	1	90	1.1	0	90	0.0	0	90	0.0
7	BERLIN	0	192	0	0	195	0.0	0	195	0.0	0	195	0.0
8	BETHANY	2	55	3.6	0	55	0.0	0	55	0.0	0	55	0.0
9	BETHEL	9	325	2.8	3	327	0.9	1	327	0.3	1	327	0.3
10	BETHLEHEM	0	45	0	0	45	0.0	0	45	0.0	0	45	0.0
11	BLOOMFIELD	6	309	1.9	2	310	0.6	1	310	0.3	0	310	0.0
12	BOLTON	0	64	0	0	64	0.0	0	64	0.0	0	64	0.0
13	BOZRAH	0	31	0	0	31	0.0	0	31	0.0	0	31	0.0
14	BRANFORD	4	364	1.1	1	364	0.3	0	364	0.0	0	364	0.0
15	BRIDGEPORT	224	6198	3.6	71	6411	1.1	31	6445	0.5	22	6464	0.3
16	BRIDGEWATER	0	10	0	0	10	0.0	0	10	0.0	0	10	0.0
17	BRISTOL	14	1073	1.3	1	1074	0.1	2	1075	0.2	0	1077	0.0
18	BROOKFIELD	2	231	0.9	0	231	0.0	0	231	0.0	0	231	0.0
19	BROOKLYN	0	144	0	0	144	0.0	0	145	0.0	0	145	0.0
20	BURLINGTON	0	73	0	0	73	0.0	0	73	0.0	0	73	0.0
21	CANAAN	3	12	25	1	13	7.7	1	13	7.7	0	13	0.0
22	CANTERBURY	2	67	3	0	67	0.0	0	67	0.0	0	67	0.0
23	CANTON	1	97	1	0	97	0.0	0	97	0.0	0	97	0.0
24	CHAPLIN	2	37	5.4	0	38	0.0	0	38	0.0	0	38	0.0

Table 3. By Town Incidence

	CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
						Numbers and Percents of New Confirmed Blood Lead Levels							
25	CHESHIRE	1	316	0.3	0	316	0.0	0	316	0.0	0	316	0.0
26	CHESTER	1	53	1.9	0	53	0.0	0	53	0.0	0	53	0.0
27	CLINTON	1	181	0.6	0	182	0.0	0	182	0.0	0	182	0.0
28	COLCHESTER	1	184	0.5	0	184	0.0	0	186	0.0	0	186	0.0
29	COLEBROOK	0	4	0	0	4	0.0	0	4	0.0	0	4	0.0
30	COLUMBIA	1	64	1.6	0	64	0.0	0	64	0.0	0	64	0.0
31	CORNWALL	1	10	10	0	10	0.0	0	10	0.0	0	10	0.0
32	COVENTRY	2	189	1.1	0	189	0.0	0	189	0.0	0	190	0.0
33	CROMWELL	2	248	0.8	0	249	0.0	0	250	0.0	0	251	0.0
34	DANBURY	74	2258	3.3	3	2280	0.1	0	2281	0.0	0	2284	0.0
35	DARIEN	4	403	1	2	403	0.5	0	404	0.0	0	404	0.0
36	DEEP RIVER	0	66	0	0	69	0.0	0	69	0.0	0	69	0.0
37	DERBY	11	278	4	2	285	0.7	1	285	0.4	1	285	0.4
38	DURHAM	0	97	0	0	97	0.0	0	97	0.0	0	97	0.0
39	EAST GRANBY	0	61	0	0	61	0.0	0	61	0.0	0	61	0.0
40	EAST HADDAM	0	97	0	0	97	0.0	0	97	0.0	0	97	0.0
41	EAST HAMPTON	0	229	0	0	229	0.0	0	229	0.0	0	230	0.0
42	EAST HARTFORD	31	1181	2.6	2	1193	0.2	2	1200	0.2	1	1200	0.1
43	EAST HAVEN	11	502	2.2	0	505	0.0	0	508	0.0	0	508	0.0
44	EAST LYME	2	195	1	1	196	0.5	1	197	0.5	1	197	0.5
45	EAST WINDSOR	1	170	0.6	0	170	0.0	0	170	0.0	0	171	0.0
46	EASTFORD	0	22	0	0	22	0.0	0	22	0.0	0	22	0.0
47	EASTON	0	76	0	0	77	0.0	0	77	0.0	0	77	0.0
48	ELLINGTON	2	258	0.8	0	261	0.0	0	261	0.0	0	262	0.0
49	ENFIELD	12	742	1.6	2	745	0.3	2	749	0.3	1	749	0.1
50	ESSEX	0	73	0	0	73	0.0	0	73	0.0	0	73	0.0
51	FAIRFIELD	3	989	0.3	2	989	0.2	0	990	0.0	0	990	0.0
52	FARMINGTON	1	264	0.4	0	265	0.0	0	265	0.0	0	265	0.0

Table 3. By Town Incidence

	Numbers and Percents of New Confirmed Blood Lead Levels											
CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
53 FRANKLIN	0	17	0	0	17	0.0	0	17	0.0	0	17	0.0
54 GLASTONBURY	1	365	0.3	0	365	0.0	0	365	0.0	0	365	0.0
55 GOSHEN	1	27	3.7	1	27	3.7	0	27	0.0	0	27	0.0
56 GRANBY	1	128	0.8	0	129	0.0	0	129	0.0	0	129	0.0
57 GREENWICH	8	1136	0.7	1	1136	0.1	1	1136	0.1	1	1136	0.1
58 GRISWOLD	5	162	3.1	1	162	0.6	0	163	0.0	0	163	0.0
59 GROTON	9	986	0.9	3	989	0.3	0	989	0.0	0	989	0.0
60 GUILFORD	1	214	0.5	0	214	0.0	0	214	0.0	0	215	0.0
61 HADDAM	0	106	0	0	106	0.0	0	106	0.0	0	106	0.0
62 HAMDEN	6	939	0.6	3	946	0.3	1	948	0.1	0	949	0.0
63 HAMPTON	3	35	8.6	0	35	0.0	0	35	0.0	0	35	0.0
64 HARTFORD	174	4494	3.9	35	4587	0.8	14	4611	0.3	5	4619	0.1
65 HARTLAND	0	22	0	0	22	0.0	0	22	0.0	0	22	0.0
66 HARWINTON	1	57	1.8	0	57	0.0	0	57	0.0	0	57	0.0
67 HEBRON	1	88	1.1	0	88	0.0	0	88	0.0	0	88	0.0
68 KENT	0	17	0	0	17	0.0	0	17	0.0	0	17	0.0
69 KILLINGLY	2	369	0.5	2	371	0.5	0	372	0.0	0	374	0.0
70 KILLINGWORTH	0	69	0	0	69	0.0	0	69	0.0	0	69	0.0
71 LEBANON	1	58	1.7	0	58	0.0	0	58	0.0	0	58	0.0
72 LEDYARD	0	259	0	0	261	0.0	0	261	0.0	0	261	0.0
73 LISBON	2	29	6.9	0	29	0.0	0	29	0.0	0	29	0.0
74 LITCHFIELD	2	88	2.3	1	88	1.1	0	88	0.0	0	88	0.0
75 LYME	0		0	0		0.0	0	1	0.0	0	1	0.0
76 MADISON	2	171	1.2	0	171	0.0	0	171	0.0	0	171	0.0
77 MANCHESTER	33	1316	2.5	10	1332	0.8	6	1334	0.4	6	1334	0.4
78 MANSFIELD	0	133	0	0	133	0.0	0	133	0.0	0	133	0.0
79 MARLBOROUGH	0	63	0	0	63	0.0	0	63	0.0	0	63	0.0
80 MERIDEN	66	1808	3.7	16	1831	0.9	11	1840	0.6	4	1845	0.2
81 MIDDLEBURY	0	110	0	0	112	0.0	0	112	0.0	0	112	0.0

Table 3. By Town Incidence

		Numbers and Percents of New Confirmed Blood Lead Levels											
	CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
82	MIDDLEFIELD	1	59	1.7	0	59	0.0	0	59	0.0	0	59	0.0
83	MIDDLETOWN	10	913	1.1	1	917	0.1	0	919	0.0	0	919	0.0
84	MILFORD	2	737	0.3	0	737	0.0	0	738	0.0	0	739	0.0
85	MONROE	2	290	0.7	1	290	0.3	0	290	0.0	0	290	0.0
86	MONTVILLE	4	284	1.4	0	285	0.0	0	285	0.0	0	286	0.0
87	MORRIS	0	26	0	0	26	0.0	0	26	0.0	0	26	0.0
88	NAUGATUCK	9	669	1.3	2	673	0.3	1	677	0.1	1	680	0.1
89	NEW BRITAIN	81	2509	3.2	18	2548	0.7	8	2558	0.3	7	2563	0.3
90	NEW CANAAN	1	334	0.3	0	334	0.0	0	334	0.0	0	334	0.0
91	NEW FAIRFIELD	2	206	1	0	206	0.0	0	206	0.0	0	206	0.0
92	NEW HARTFORD	1	64	1.6	1	64	1.6	0	64	0.0	0	64	0.0
93	NEW HAVEN	228	4273	5.3	65	4350	1.5	28	4393	0.6	16	4412	0.4
94	NEW LONDON	21	655	3.2	6	665	0.9	0	667	0.0	0	670	0.0
95	NEW MILFORD	10	416	2.4	0	417	0.0	0	417	0.0	0	417	0.0
96	NEWINGTON	4	334	1.2	0	334	0.0	0	334	0.0	0	334	0.0
97	NEWTOWN	4	275	1.5	1	275	0.4	0	276	0.0	0	276	0.0
98	NORFOLK	0	15	0	0	15	0.0	0	15	0.0	0	15	0.0
99	NORTH BRANFORD	0	166	0	0	167	0.0	0	169	0.0	0	169	0.0
100	NORTH CANAAN	1	29	3.4	0	29	0.0	0	29	0.0	0	29	0.0
101	NORTH HAVEN	2	297	0.7	0	297	0.0	0	298	0.0	0	298	0.0
102	NORTH STONINGTON	0	53	0	0	53	0.0	0	53	0.0	0	53	0.0
103	NORWALK	37	2105	1.8	3	2129	0.1	1	2136	0.0	0	2137	0.0
104	NORWICH	39	794	4.9	5	807	0.6	1	810	0.1	0	814	0.0
105	OLD LYME	1	96	1	0	97	0.0	0	97	0.0	0	97	0.0
106	OLD SAYBROOK	2	111	1.8	0	111	0.0	0	111	0.0	0	111	0.0
107	ORANGE	1	165	0.6	0	165	0.0	0	165	0.0	0	165	0.0
108	OXFORD	0	174	0	0	174	0.0	0	174	0.0	0	174	0.0

Table 3. By Town Incidence

		Numbers and Percents of New Confirmed Blood Lead Levels											
	CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
109	PLAINFIELD	6	303	2	3	304	1.0	1	304	0.3	1	304	0.3
110	PLAINVILLE	0	262	0	0	262	0.0	0	263	0.0	0	263	0.0
111	PLYMOUTH	0	184	0	0	185	0.0	0	187	0.0	0	187	0.0
112	POMFRET	1	72	1.4	1	72	1.4	0	72	0.0	0	72	0.0
113	PORTLAND	1	123	0.8	0	123	0.0	0	123	0.0	0	123	0.0
114	PRESTON	0	45	0	0	45	0.0	0	45	0.0	0	45	0.0
115	PROSPECT	0	111	0	0	111	0.0	0	111	0.0	0	111	0.0
116	PUTNAM	8	211	3.8	2	212	0.9	2	212	0.9	1	212	0.5
117	REDDING	1	89	1.1	0	89	0.0	0	89	0.0	0	89	0.0
118	RIDGEFIELD	4	373	1.1	0	373	0.0	0	373	0.0	0	373	0.0
119	ROCKY HILL	6	334	1.8	1	336	0.3	1	337	0.3	1	337	0.3
120	ROXBURY	0	21	0	0	21	0.0	0	21	0.0	0	21	0.0
121	SALEM	1	40	2.5	1	40	2.5	0	40	0.0	0	40	0.0
122	SALISBURY	2	21	9.5	0	21	0.0	0	21	0.0	0	21	0.0
123	SCOTLAND	0	10	0	0	10	0.0	0	10	0.0	0	10	0.0
124	SEYMOUR	3	295	1	1	296	0.3	0	296	0.0	0	296	0.0
125	SHARON	0	16	0	0	16	0.0	0	17	0.0	0	17	0.0
126	SHELTON	6	649	0.9	1	649	0.2	0	651	0.0	0	651	0.0
127	SHERMAN	1	36	2.8	0	36	0.0	0	36	0.0	0	36	0.0
128	SIMSBURY	1	222	0.5	0	222	0.0	0	222	0.0	0	222	0.0
129	SOMERS	3	113	2.7	1	113	0.9	1	113	0.9	1	113	0.9
130	SOUTH WINDSOR	0	283	0	1	285	0.4	0	285	0.0	0	285	0.0
131	SOUTHBURY	1	175	0.6	0	175	0.0	0	175	0.0	0	175	0.0
132	SOUTHINGTON	2	500	0.4	1	501	0.2	0	501	0.0	0	501	0.0
133	SPRAGUE	2	53	3.8	2	53	3.8	0	53	0.0	0	53	0.0
134	STAFFORD	8	196	4.1	5	197	2.5	2	198	1.0	1	199	0.5
135	STAMFORD	56	3722	1.5	12	3754	0.3	1	3759	0.0	0	3761	0.0
136	STERLING	0	51	0	0	51	0.0	0	54	0.0	0	54	0.0

Table 3. By Town Incidence

	CY 2012 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
							Numbers and Percents of New Confirmed Blood Lead Levels						
137	STONINGTON	3	168	1.8	0	168	0.0	0	168	0.0	0	168	0.0
138	STRATFORD	19	1084	1.8	1	1098	0.1	0	1101	0.0	0	1102	0.0
139	SUFFIELD	0	170	0	0	170	0.0	0	170	0.0	0	170	0.0
140	THOMASTON	3	103	2.9	0	103	0.0	0	103	0.0	0	103	0.0
141	THOMPSON	4	151	2.6	2	152	1.3	0	152	0.0	0	153	0.0
142	TOLLAND	2	234	0.9	1	234	0.4	0	234	0.0	0	234	0.0
143	TORRINGTON	36	546	6.6	7	550	1.3	3	552	0.5	2	553	0.4
144	TRUMBULL	2	532	0.4	1	533	0.2	0	534	0.0	0	534	0.0
145	UNION	0	7	0	0	7	0.0	0	7	0.0	0	7	0.0
146	VERNON	17	630	2.7	5	634	0.8	1	637	0.2	1	638	0.2
147	VOLUNTOWN	0	32	0	0	32	0.0	0	32	0.0	0	32	0.0
148	WALLINGFORD	7	783	0.9	3	785	0.4	0	785	0.0	0	785	0.0
149	WARREN	0	8	0	0	8	0.0	0	8	0.0	0	8	0.0
150	WASHINGTON	5	47	10.6	1	47	2.1	0	47	0.0	0	47	0.0
151	WATERBURY	123	4700	2.6	37	4791	0.8	18	4818	0.4	13	4828	0.3
152	WATERFORD	2	250	0.8	0	252	0.0	0	252	0.0	0	252	0.0
153	WATERTOWN	3	398	0.8	0	398	0.0	0	399	0.0	0	399	0.0
154	WEST HARTFORD	15	1081	1.4	0	1088	0.0	0	1088	0.0	0	1088	0.0
155	WEST HAVEN	22	1249	1.8	7	1263	0.6	1	1267	0.1	1	1268	0.1
156	WESTBROOK	1	75	1.3	1	75	1.3	0	75	0.0	0	75	0.0
157	WESTON	0	103	0	0	103	0.0	0	104	0.0	0	104	0.0
158	WESTPORT	0	409	0	0	409	0.0	0	409	0.0	0	409	0.0
159	WETHERSFIELD	2	410	0.5	1	410	0.2	0	410	0.0	0	410	0.0
160	WILLINGTON	4	77	5.2	2	77	2.6	0	77	0.0	0	77	0.0
161	WILTON	1	245	0.4	0	246	0.0	0	246	0.0	0	246	0.0
162	WINCHESTER	7	137	5.1	3	138	2.2	2	141	1.4	1	142	0.7
163	WINDHAM	10	485	2.1	6	492	1.2	1	495	0.2	0	496	0.0

Table 3. By Town Incidence

CY 2012 Data		Numbers and Percents of New Confirmed Blood Lead Levels												
		Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 5 µg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥10 µg/dL	≥ 10 µg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 15 µg/dL	≥ 15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with **No Previous** BLL of ≥ 20 µg/dL	≥ 20 µg/dL Incidence (%)
164	WINDSOR	6	427	1.4	0	428	0.0	1	430	0.2	0	430	0.0
165	WINDSOR LOCKS	0	168	0	0	168	0.0	0	168	0.0	0	168	0.0
166	WOLCOTT	4	216	1.9	1	217	0.5	0	217	0.0	0	217	0.0
167	WOODBRIDGE	1	112	0.9	0	112	0.0	0	112	0.0	1	113	0.9
168	WOODBURY	1	104	1	0	104	0.0	0	104	0.0	0	104	0.0
169	WOODSTOCK	1	147	0.7	0	147	0.0	0	147	0.0	0	147	0.0

QUI TRANSTULIT SUSTINET

The children in the photos in this report are **not** lead poisoned. The goal of the Department of Public Health is for **all** children to be safe from lead poisoning.

Additional lead poisoning data can be found at http://www.ct.gov/dph/lead