NC State Law requires reporting of blood lead test results.

INSTRUCTIONS for using the NC reporting template (**NCTemplate26-07-17.xlsx**).

Quality control procedures should be put in place to ensure correct reporting of blood lead test results and demographic information. Someone *other than the person entering the test result information* should double check the data entry to ensure the correct test result is reported.

1. Open the template and save the file with a new name or copy the file and give the copied file a new name.

   Important: Each file must have a *different*, *unique* filename or it can be **overwritten** with a previously submitted file with the same name.

   - The file name should be *unique* to your facility as there are 200+ facilities uploading one or more files per week.
   - Please do **not** put commas (,) number symbols (#) slashes (/) or apostrophes (‘) in the file name.

   Suggestions: Start the filename with your CLIA number or abbreviated facility name and include a date reference. Example file names are below:

   34D9999999-2026-01-06.xlsx
   SEN-2026-01-06.xlsx

2. Fields marked with an asterisk* are **required**
   - The Medicaid ID is *required,* if applicable. If child is NOT enrolled in Medicaid, please leave the field blank.
   - If there is no Middle name, please leave the field blank.
   - If there is no Apt/Unit number, please leave the field blank.

3. Some of the fields have a drop-down pick list with choices to select
   - If none of the choices are applicable, please leave the field blank.

4. **Sample number** (a.k.a. laboratory sample number, Specimen ID, Accession number)
   - This should be a *unique* identifier for the blood lead specimen. A sample ID should never be used again *unless* a corrected record is being sent for the specimen.

   Suggestion: Use the patient number combined with the sample date as yymmdd.
   Example: If the patient id is **126995** and the date of the test is **07/16/2023** the sample number would be **126995-230716**

5. **Result** field: The *reportable range of the LeadCare II* blood lead analyzer *is 3.3 to 65 µg/dL*.
   - "**Low**" means the result is less than 3.3.
     - **Enter < 3.3** in the result field.
   - If the result is between 3.3 and 65
     - **Enter the numeric value** in the result field (e.g., **3.6, 4.7, 11.2**)
   - "**High**" means the result is greater than 65.
     - **Enter > 65** in the result field

   The **Result** field should *only* contain the following:
   - < 3.3
   - values 3.3 through 65
   - > 65

   Please do not put *units of measurement* in the result field such as µg/dL, mcg, or the like.

   Please note: Result values other than the above will be **rejected**. Please see examples below.

Sample number* (unique - never use same number again)	Specimen date* (mm/dd/yyyy)	Result*	Specimen type C* (DO NOT analyze venous specimens)
256498-230103	01/03/2023	<3.3	C
364589-230103	01/03/2023	<3.3	C
678154-230104	01/04/2023	<3.3	C
957128-230104	01/04/2023	<3.3	C
951623-230104	01/04/2023	3.6	C
845796-230105	01/05/2023	<3.3	C

Correct

Sample number* (unique - never use same number again)	Specimen date* (mm/dd/yyyy)	Result*	Specimen type C* (DO NOT analyze venous specimens)
256498-230103	01/03/2023	NORMAL	C
364589-230103	01/03/2023	<1	C
678154-230104	01/04/2023	3.6 µg/dL	C
957128-230104	01/04/2023	Negative	C
951623-230104	01/04/2023	<2	C
845796-230105	01/05/2023	3.2	C

Incorrect

Please DO NOT submit test results analyzed by another laboratory (e.g., NC State Laboratory of Public Health, LabCorp, Mayo, Quest Diagnostics, etc.) in the LeadCare report file. The report file should *only* include results for specimens analyzed at your facility using the LeadCare blood lead analyzer.

Please DO NOT enter a result as "normal" or "negative". "Normal" is not the test result. "Normal" is an *interpretation.*

Test results below detection, (i.e., < 3.3) **do not** mean the test result is "*normal*" or "*within normal limits*".
- Below detection means the instrument cannot reliably measure below 3.3 ug/dL.
- Levels *as low as 2.5 µg/dL* have been found to produce diminished cognitive function and maladaptive behavior in humans (https://pmc.ncbi.nlm.nih.gov/articles/PMC7462347/).

Contact information

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