

## **Request for Non-substantive Change**

Blood Lead Surveillance System (BLSS)

OMB Control No. 0920-0931

Expiration date 05/31/2021

### **Justification for Non-substantive change:**


The National Institute for Occupational Safety and Health (NIOSH) is requesting a change request in response to the following Terms of Clearance included in the Notice of Action (NOA) for 0920-0931:

*TERMS OF CLEARANCE: Within two months of the approval of this ICR, CDC will submit a non-substantive change request confirming updates to the public-facing website reflecting the new language as indicated in the supplementary document associated with this package. Approved consistent with CDC's commitment to always communicate that these data do not provide for nationally representative prevalence estimates, due to the fact that not all states participate in CBLs and ABLS, as well as differences in jurisdictional screening practices and laboratory reporting requirements among state and local jurisdictions. However, use of the consistent case definition allows for estimating needs at the Federal, state, and local level which is important for establishing national program goals and objectives. In addition, CDC commits to working with CMS to better capture Medicaid-required test results and decrease duplicative requirements on States.*


NIOSH would like to confirm that the ABLES content is finalized on the website. We also put an emphasis on occupational lead exposure and linked it back to HP2020 goal. In addition, we added a webpage detailing ABLES standardized variables, format, and instruction for data submission. Below are the websites and screenshots with the updated information. NIOSH would like to request that the NOA be updated to reflect the finalized website.


1) ABLES main page : <https://www.cdc.gov/niosh/topics/ables/default.html>

The National Institute for Occupational Safety and Health (NIOSH)

Promoting productive workplaces through safety and health research 

Workplace Safety & Health Topics

Adult Blood Lead Epidemiology and Surveillance (ABLES) 

Program Description 

Program Staff

State-based Programs




Data

Publications

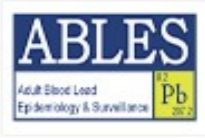
Related Resources

[NIOSH > Workplace Safety & Health Topics](#)

### Adult Blood Lead Epidemiology and Surveillance (ABLES)

The goal of the ABLES program is to examine the extent of workplace lead exposure in adults through measurement of blood lead levels. This goal is identical to the Occupational Safety and Health Objective 7 in Healthy People 2020. In addition, the ABLES program strives to improve state capacity to monitor trends in workplace lead exposure and conduct intervention activities to prevent lead exposures.



#### Why work-related lead surveillance is important

In the United States, when the lead exposure source is known, almost all adult blood lead levels higher than 25 µg/dL are work-related. Lead exposure occurs mainly in battery manufacturing, lead and zinc ore mining, and painting and paper hanging industries.

Workplace lead exposure is an ongoing health problem in the United States. Lead exposure causes short-term and long-term health effects in many organ systems, ranging from changes in function to life-threatening intoxication. Lead exposure at low doses can lead to:


- adverse cardiovascular and kidney effects
- cognitive dysfunction
- adverse reproductive outcomes

#### Contact

To learn more about NIOSH-supported adult blood lead epidemiology surveillance activities, please contact [Rebecca Tsai, PhD \(rtaai@cdc.gov\)](mailto:Rebecca.Tsai.PhD@rtaai@cdc.gov)

PROGRAM DESCRIPTION	DATA
STATE-BASED PROGRAMS	PUBLICATIONS
PROGRAM STAFF	RELATED RESOURCES

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**Related Topics**


- Construction
- Lead
- Occupational Safety and Health Contacts at State and Territorial Health
- Departments
- Surveillance
- Indoor Firing Ranges

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2) ABLES program description page: <https://www.cdc.gov/niosh/topics/ables/description.html>

The National Institute for Occupational Safety and Health (NIOSH)




Workplace Safety & Health Topics

Promoting productive workplaces through safety and health research 

Adult Blood Lead Epidemiology and Surveillance (ABLES)

[NIOSH](#) > [Workplace Safety & Health Topics](#) > [Adult Blood Lead Epidemiology and Surveillance \(ABLES\)](#)

### Adult Blood Lead Epidemiology and Surveillance (ABLES)

#### Program Description

Reference Blood Lead Levels (BLLs) for Adults in the U.S.

Program Staff


State-based Programs

Data

Publications

Related Resources

#### About ABLES



ABLES was created to reduce the rate of adults (age 16+) who have blood lead levels (BLL) equal or greater than ten micrograms per deciliter (BLLs  $\geq 10$   $\mu\text{g}/\text{dL}$ ) as a result of work-related lead exposure.

The public health objective of the ABLES program is identical to the Occupational Safety and Health Objective 7 in Healthy People 2020, which is to "Reduce the proportion of persons who have elevated blood lead concentrations from work exposures." The ABLES program aims to accomplish Objective 7 by working with state ABLES programs to build state capacity to initiate or improve adult blood lead surveillance programs which can accurately measure trends in adult BLLs and which can effectively target interventions to prevent lead exposures.

ABLES works with state programs to accurately measure trends in work-related adult BLLs, to better target interventions and prevent lead exposures. As of April 2018, 37 states collaborate with NIOSH to conduct adult BLL surveillance, and among them, 23 states have submitted blood lead data for 2016. ABLES states are required to have a mandatory state requirement that laboratories report BLL results to the State Health Department or designee. Most states require reporting all BLLs, elevated or not. Reporting all BLLs is extremely useful and is recommended for any state planning to initiate or change their reporting requirements.


ABLES states are encouraged to develop effective working relationships with Environmental Public Health Tracking and Childhood Lead Poisoning Prevention programs within their state. Lead may be taken home from the workplace on clothes or in cars thus potentially exposing spouses and children. ABLES states are also encouraged to develop effective working relationships with other federal and state agencies involved in preventing lead exposure including:

- Occupational Safety and Health Administration (OSHA)
- Department of Housing and Urban Development (HUD)
- Environmental Protection Agency (EPA)
- Department of Transportation (DOT)
- Department of Defense (DOC)

Besides the 37 state ABLES programs, other partners collaborating with ABLES to achieve the Healthy People 2020 adult lead objective include:

- CPWR, Center for Construction Research and Training
- Council of State and Territorial Epidemiologists - Occupational Health

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**WORKER HEALTH CHARTS**

#### Related Topics

- Construction
- Lead
- Occupational Safety and Health Contacts at State and Territorial Health Departments
- Surveillance
- Indoor Firing Ranges

3) ABLES standardized variable, format page: <https://www.cdc.gov/niosh/topics/ables/statesub.html>

OUR VENTURES (PULL)

- Program Description +
- Program Staff
- State-based Programs -
- Adult Blood Lead Epidemiology and Surveillance (ABLES)**
- Data
- Publications
- Related Resources

## Adult Blood Lead Epidemiology and Surveillance (ABLES)

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### ABLES Standardized Variables, Format, and Instructions for ABLES Data Submissions

Below are the variables and format that states should provide when submitting ABLES data to NIOSH. If you have any questions, please contact [Rebecca Tsai](#).

OMB No. 0920-0931  
Exp. Date 5/31/2018

Variable name	Length	Type	Description, instruction, and valid codes
1. StateRep	2	Text	2-letter Postal State abbreviation for the State making this report. <i>[Note: This should be a constant and must be present]</i>
2. StateRes	2	Text	2-letter Postal State abbreviation for State in which the adult resides. 99 = Unknown. CN = Canada, MX = Mexico.
3. CountyRes	3	Text	3-digit county Federal Information Process Standards (FIPS) code for county of residence of the adult. 999 = Unknown.
4. StateExp	2	Text	2-letter Postal State abbreviation for State where exposure occurred. 99 = Unknown. CN = Canada, MX = Mexico. <i>[Note: Code StateExp only if you are sure of exposure location (do not make assumptions)]</i>
5. CountyExp	3	Text	3-digit county FIPS code for county where exposure occurred. 999 = Unknown.
6. ID	15	Text	State-assigned unique ID number for adult (ID must remain constant from year to year) with 15 characters maximum. If all characters are not used, leave the missing ones blank, and left justify. Do not fill with zeros. <i>[Note: Do not use any personal identifier such as an SSN or name for ID.]</i>
7. Status	1	Text	<b>For adults with BLLs <math>\geq 10</math> <math>\mu\text{g}/\text{dL}</math>:</b> <b>1 = New case.</b>  An adult whose highest BLL was $\geq 10$ $\mu\text{g}/\text{dL}$ in the current calendar year who was not in the State lead registry in the immediately preceding calendar year with a BLL $\geq 10$ $\mu\text{g}/\text{dL}$ . This adult may have been in the registry with a BLL $\geq 10$ $\mu\text{g}/\text{dL}$ in earlier calendar years or with a BLL $< 10$ $\mu\text{g}/\text{dL}$ in the immediately preceding calendar year.

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**WORKER HEALTH CHARTS**

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