

Lead Contamination Response

Dear UVMHN Providers and UVMHC Laboratory Clients,

As many of you are aware, The Vermont Department of Health sent a HAN out earlier this week over concerns for possible lead contamination in 4mL EDTA lavender-top specimen collection tubes that could lead to elevated blood lead test results. In response to these concerns the UVMHC laboratory has taken the following actions:

1. A thorough review of all lead testing results performed at UVMHC from January 2022 to present showed a stable moving average for lead results and no trends towards increasing elevated blood lead results. For this reason we believe the risk of samples tested at UVMHC during this time frame of having lead contamination from the collection tubes is exceedingly low, and the UVMHC chemistry medical director is available to discuss the possible need for retesting of samples resulted from August to November 2022.
2. We are in the process of testing all lots of collection tubes/containers that we supply for lead testing and thus far we have not identified any lead contamination in those current tubes/containers.
3. We will continue to prospectively screen all new lots of collection tubes/containers that we supply for lead testing to ensure those supplies do not contain lead contamination and that you can trust the lead results on your patients when they are collected using tubes/containers provided by UVMHC.

It has also been brought to our attention that providers have been getting calls from patients and guardians of patients that are confused about the state's recommendation to retest patients that had a venous lead level of 3.5 ug/dL or greater if they were collected in a non-pre-screened EDTA tube and were tested from August to November 2022. What this statement means is as follows and you can provide this to your patients:

1. A patient with a venous lead level that was any number from 0.0-3.4 ug/dL and may or may not have included a < sign (i.e. UVMHC reports <2.0 ug/dL as our lower limit of detection) does not need to be retested.
2. A patient with a venous lead level that was reported as <3.5 ug/dL does not need to be retested.
3. A patient with a venous lead level that was reported as ≥3.5 ug/dL is recommended to be retested.

For clients that send venous lead testing to UVMHC using their own collection tubes to ensure that your patients receive accurate blood lead results we recommend the following:

1. You may send us a sample of your current lot of tubes (including microtainers) used for venous lead testing to be prescreened for lead contamination. We will report our findings to you, so that you may know what lot of tubes at your site are appropriate for testing. It will be your responsibility to monitor your collection tube inventory for lot changes and send us additional tubes as you bring those lots into use over time. We are unable to check every tube we receive to verify it is the correct lot and vendor for your location.
2. You may reach out to us so that we may provide you pre-screened tubes to use for venous blood lead collection.
3. At this time we do not plan to supply the tan-topped tubes referenced by VDH in the HAN
4. You may use and send to us for testing the aforementioned tan-top lead-free tubes or (Royal Blue EDTA) trace metal analysis tubes mentioned in the HAN.

For any questions please feel free to reach out the laboratory or your laboratory outreach contact.

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