211.902 Reports on persons with excess level of lead in blood -- Records of reports to be indexed and analyzed -- Information to local organizations.

- (1) Every physician, nurse, hospital administrator, director of a clinical laboratory, or public health officer who receives information of the existence of any person found or suspected to have a two and three-tenths (2.3) micrograms per deciliter of whole blood level of lead in his or her blood shall report the information to the cabinet within seven (7) days and to the local or district health officer in approved electronic format as prescribed by administrative regulations promulgated by the cabinet in accordance with KRS Chapter 13A. The contents of the report shall include but not be limited to the following information:
 - (a) The full name and address of the person tested;
 - (b) The date of birth of such person;
 - (c) The type of specimen and the results of the appropriate laboratory tests made on such person; and
 - (d) Any other information about such person deemed necessary by the cabinet to carry out the provisions of this section.

Any physician, nurse, hospital administrator, director of clinical laboratory, public health officer, or allied health professional making such a report in good faith shall be immune from any civil or criminal liability that otherwise might be incurred from the making of such report.

- (2) Notwithstanding the requirements of subsection (1) of this section, a clinical or research laboratory shall not be fined or otherwise disciplined for failure to report required information to the cabinet if the information was not provided by the medical professional obtaining the blood sample.
- (3) The secretary shall maintain comprehensive records of all reports submitted pursuant to KRS 211.900 to 211.905 and 211.994. Records shall be analyzed and geographically indexed by county annually in order to determine the location of areas with a high incidence of elevated blood lead levels reported. The records and analysis shall be public record and provided annually by October 1 to the Governor, the General Assembly, the Legislative Research Commission, and the Lead Poisoning Prevention Advisory Committee; provided, however, that the name of any individual shall not be made public unless the secretary determines that such inclusion is necessary to protect the health and well-being of the affected individual.
- (4) When an elevated blood lead level is reported to the cabinet, it shall inform such local boards of health, local health departments, and other persons and health organizations as deemed necessary.

Effective: July 12, 2012

History: Amended 2012 Ky. Acts ch. 158, sec. 46, effective July 12, 2012. --Amended 2006 Ky. Acts ch. 180, sec. 4, effective July 12, 2006. -- Created 1974 Ky. Acts ch. 20, sec. 3, effective June 21, 1974.