### JEH QUIZ

### FEATURED ARTICLE QUIZ #6

# Lead Source Attribution by Stable Isotope Analysis in Child Risk Assessment Investigations

A vailable to those with an active National Environmental Health Association (NEHA) membership, the *JEH* Quiz is offered six times per calendar year and is an easily accessible way to earn continuing education (CE) contact hours toward maintaining a NEHA credential. Each quiz is worth 1.0 CE.

Completing quizzes is now based on the honor system and should be self-reported by the credential holder. Quizzes published only during your current credential cycle are eligible for CE credit. Please keep a copy of each completed quiz for your records. CE credit will post to your account within 3 business days.

## Paper or electronic quiz submissions will no longer be collected by NEHA staff.

#### INSTRUCTIONS TO SELF-REPORT A JEH QUIZ FOR CE CREDIT

- Read the featured article and select the correct answer to each JEH Quiz question.
- Log in to your MyNEHA account at https://neha.users.membersuite.com/ home
- 3. Click on Credentials located at the top of the page.
- 4. Select Report CEs from the drop-down menu.
- 5. Enter the date you finished the quiz in the Date Attended field.
- 6. Enter 1.0 in the Length of Course in Hours field.
- In the Description field, enter the activity as "JEH Quiz #, Month Year" (e.g., JEH Quiz 6, May 2023).
- 8. Click the Create button.

### **JEH Quiz #4 Answers**

#### January/February 2023

1. c 4. d 7. a 10. c 2. d 5. a 8. a 11. c 3. b 6. e 9. a 12. b

- → Quiz effective date: May 1, 2023 | Quiz deadline: August 1, 2023
- The primary intervention for a child with a case of lead poisoning is to remove the sources of lead from the child's environment.
  - a. True.
  - b. False.
- Lead isotope analysis (LIA) is based on the \_\_ stable, naturally occurring isotopes of lead that all have relative abundances in the Earth's crust.
  - a. two
  - b. three
  - c. four
  - d. five
- To be eligible for the case series in this study, a child with a case of lead poisoning must have met the following criteria:
  - a. peak venous blood lead level (BLL) ≥10 μg/dl.
  - b. age ≤6 years.
  - c. resided in southern Wisconsin.
  - d. all of the above.
  - e. none of the above.
- Lead in surface coatings was identified in this study using an X-ray fluorescence instrument and a lead dust hazard for floors was defined as
  - a.  $\geq 0.7 \text{ mg/cm}^2$ .
  - b.  $\geq$ 40  $\mu$ g/ft<sup>2</sup>.
  - c.  $200 \,\mu g/ft^2$ .
  - d. 1,200 ppm.
- 5. Case 1 involved a female at 24 months with a BLL of
  - a. 10 µg/dl.
  - b. 12 μg/dl.
  - c. 14 µg/dl.
  - d. 16 μg/dl.
- For case 1, 1.5 years after the initial BLL and after the family's home was remediated, the child's venous BLL decreased to
  - a. 4 µg/dl.
  - b. 5 μg/dl.
  - c. 6 µg/dl.
  - d. 7 µg/dl.

- In case 2, lead isotope ratios in blood were similar to the street lateral water pipe but dissimilar to
  - a. tap water.
  - b. the floor lateral pipe.
  - c. all of the above.
  - d. none of the above.
- 8. In case 3, the highest lead concentrations were
  - a. the interior windowsills.
  - b. the porch entry floor.
  - c. the backyard play area.
  - d. all of the above.
  - e. none of the above.
- 9. In case 4, the risk assessment found lead hazards in the walls, floors, and points of entry of the home.
  - a. True.
  - b. False.
- In case 6, the child's BLL at 22 months after the initial BLL decreased to
  - a. 5 µg/dl.
  - b. 6 µg/dl.
  - c. 7 µg/dl.
  - d. 8 µg/dl.
- 11. In this study, cases 4–6 demonstrated that LIA was able to identify the most common household exposure: legacy lead-based paint exposure via hand-tomouth behavior.
  - a. True.
  - b. False.
- Water was \_\_ as the dominant or likely source of lead in the cases investigated in this study.
  - a. not observed
  - b. weakly observed
  - c. strongly observed