



**NEW JERSEY STATE
SANITARY CODE**

New Jersey State
Department of Health
John Fitch Plaza P.O. Box 1540
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**CHAPTER 13
LEAD POISONING**

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AUG 7 1972

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1. Investigation of Cases of Elevated Blood Lead Levels.

1.1 The local board of health shall make an epidemiologic investigation of children showing blood lead levels of 40 micrograms per hundred grams or higher. Other children should be referred for diagnosis and/or treatment if necessary.

1.2 The fact of the case shall be notified that a hazard may exist in the dwelling unit concerned on preventive measures and requested to do their part in preventing children from crawling on painted surfaces and in sweeping up chips and flakes of paint.

2. Determination of Lead in Dwelling Units

2.1 Sampling

A minimum of two paint samples shall be collected from each suspect room which should include a hallway and door or window frame. In addition, samples should also be collected from other highly suspected areas, such as crib railings, playpen railings, stairs or banisters and surfaces with loose paint. Preferred locations to be sampled should include surfaces which have been chewed or eaten, suspected of having been chewed or eaten, or areas which are peeling or flaking. All interior sampling should generally be limited to the part of the surface which may eventually be required to be removed.

2.2 Methods for determination of lead in surface coverings

2.2.1 The chemical determination of the lead content in paint by the quantitative methods of analysis of surface coverings shall be made in accordance with the New Jersey State Health Department's Lead Poisoning in Paints & Coatings.

2.2.2 The physical determination of lead in paint may be made by methods of analysis of surface coverings by the New Jersey State Health Department's Lead Poisoning in Paints & Coatings.

3. Standards for Removal of Surfaces Containing Lead Paint

3.1 Surfaces containing lead paint shall be removed from the following areas as indicated:

3.2 Tight lead paint shall be removed from the following areas as indicated:

- a. Windowsills - complete removal
- b. Window and frames below 4 foot level - complete

removal on exposed surfaces

- c. Doors below 4 foot level - removal 4 inches back on hinge and latch edges and other sharp edges
- d. Door frames below 4 foot level - complete removal
- e. Hand rails - complete removal
- f. Staircase "balusters" - removal on surfaces adjacent to walking areas
- g. Baseboards - removal 4 inches back from top on top of tread and from top to rear on bottom side
- h. Any other surface presenting a chewable surface below 4 foot level - removal 4 inches back from edge

1. Tight lead paint surfaces not requiring removal

- a. Walls in good condition without broken areas
- b. Baseboards
- c. Skirtboards on staircases
- d. Staircases
- e. Any surface below the 4 foot level not presenting a chewable surface

2.4 In lieu of removal of the lead paint as specified above, surfaces shall be covered with plasterboard, wallboard, wood-panelling or similar durable material approved by the Commissioner, in a height of 4 feet above the floor.

2.5 Any condition, such as a plumbing leak, causing peeling of paint or loosening of plaster shall be repaired prior to any of the repairs specified above.

2.6 Upon completion of repair and prior to repainting, an inspection shall be made by the local board of health to determine if the hazard has been satisfactorily eliminated. All repairs may be finished with a suitable non-lead paint or other hard non-lead surface.

When an owner has been notified to comply with regulations relating to the removal of lead paint, the local board of health shall provide the owner of such dwelling with the standards to be used when removing the paint.

4. Reporting

4.1 All local boards of health shall immediately report results of blood lead analysis showing elevated blood lead levels in any of all micrograms per 100 milliliters of whole blood to the State Department of Health, to the local board of health, and to the physician examining the specimen.

4.2 Local boards of health shall report monthly to the Commissioner of Health under the act and the status of the cases provided for under the act and the status of the cases provided for under the act.

4.3 Local boards of health not using the State Health Department's laboratories for blood lead and/or paint analysis shall provide the State Department of Health with a monthly statistical tabulation of such results.

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NEW JERSEY STATE DEPARTMENT OF HEALTH
SAFETY STANDARDS FOR THE REMOVAL OF LEAD PAINT

When removing lead paint from dwellings or facilities, the methods used shall not present a hazard to health from fumes, dust, vapors or liquids by inhalation or absorption through the skin and mucous membranes. Hazards may arise from the lead paint itself when it is removed from surfaces or from toxic materials used in the removal process, especially in areas which are not adequately ventilated.

The methods most frequently used to remove lead paint include one or more of the following:

1. scraping and sanding
2. liquid paint removers
3. burning

<u>METHOD</u>	<u>DANGER</u>	<u>SAFETY PRECAUTIONS</u>
1. Scraping or sanding	a. lead dust and/or particles in eye. b. lead dust and/or particles breathed or swallowed. Inhalation of lead particles in sufficient concentration over a long period of time can result in lead poisoning.	a. to protect eyes from chips & flakes of paint, safety goggles should be worn. b. for protection use a respirator approved by the U.S. Bureau of Mines for <u>TOXIC DUSTS</u> .
2. Liquid paint removers	a. inhalation of vapors. b. absorption of solvents and paint removers through the skin.	a. when working with solvents which evaporate readily, a respirator approved by the U.S. Bureau of Mines for <u>ORGANIC VAPORS</u> should be used. When using paint removers adequate ventilation provided by open windows or fans is necessary. b. impervious gloves should be worn.

0007-SWP-036492

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METHOD

3. Burning

DANGER

- a. Inhalation of toxic lead fumes in concentrated amounts or in small concentrations over a long period of time

SAFETY PRECAUTIONS

- a. to prevent the inhalation of lead fumes a respirator approved by the U.S. Bureau of Mines for FUMES should be used.

WARNING: Although burning is the easiest, fastest and most economical method of the three, it is the most hazardous from the standpoint of the danger of igniting the building and also from the danger of poisoning from lead fumes. This method should be used only with strict adherence to safety precautions and only by persons experienced in the use of a blow torch who are aware of the danger of fire igniting the surfaces (and between the wall areas) where the paint is being removed.

GENERAL SAFETY PRECAUTIONS

Workers using any of the preceding methods should take the following additional precautionary measures to protect their health:

- a. Never eat or drink or keep food and drink in areas where lead paint is being removed.
- b. Wash hands, arms and face with soap and warm water prior to eating. The mouth should also be rinsed thoroughly.
- c. Do not smoke, chew tobacco or gum while working.
- d. Wash thoroughly before leaving the work area and take a bath at the end of each work day.
- e. If you are not feeling well consult your family physician and secure an annual physical examination including a blood-lead test.

Symptoms such as: persistent headaches, nausea, vomiting, visual disturbances, dizziness, poor appetite, loss of weight, cramps or constipation may indicate lead poisoning or organic vapor poisoning. If you have any or all of these symptoms consult your family physician at once.

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0007-SWP-036493

0007-SWP-000117818