TWO THOUSAND SIX

ANNUAL REPORT

UTAH POISON CONTROL CENTER
I went into full panic mode because I wasn’t sure how much of the bait he had eaten...

-Cheryl

DID YOU KNOW?
Calling the Utah Poison Control Center is free, confidential, and available 24 hours a day, 365 days a year. TDD is offered for the hearing impaired and translators are available for non-English speaking callers.
“I was helping my daughter pack up her house for a move. She’s extremely scared of mice and had all sorts of traps and deterrents around the house.

My 18-month-old grandson, Luke, was left alone in the kitchen for about 20 seconds, which is plenty of time for him to find trouble. Sure enough, when I came back into the kitchen, Luke had some of the bar bait from a sticky mouse trap in his mouth.

I called the Utah Poison Control Center and talked to a poison specialist who was calm and reassuring. After going over the situation in detail, he made me understand that Luke would be just fine. He even called me back that evening and again a few days later to make sure Luke hadn’t developed any new symptoms.

The Utah Poison Control Center is something that you don’t know how important it is until you need it. My case with Luke turned out to not be very serious, but it could have been.”

CHERYL & GRANDSON LUKE
BOUNTIFUL, UT

DID YOU KNOW?
A mouthful or tablet of some medicines or chemicals is enough to cause life-threatening injury or death to a toddler.

Some particularly dangerous drugs and chemicals include:
- Pain medicine
- Blood pressure and heart rhythm medications
- Antidepressants
- Oral diabetic medications
- Iron supplements
- Anti-freeze and windshield washing fluid
A MESSAGE FROM THE DIRECTOR

The Utah Poison Control Center (UPCC) is proud to provide you its 2006 Annual Report. This report highlights the activities of the UPCC during 2006 and the tremendous impact the center has on the entire state of Utah. The UPCC received calls from all 29 counties and responded to over 50,000 calls for assistance in 2006. The UPCC has one of the highest utilizations of any poison center in the US with over 16 poison exposures reported per thousand population.

The UPCC is proud of the impact it has on the community. As one of the first poison centers established in the US, the UPCC has a rich history of providing high quality poison information, clinical toxicology consultation, and poison prevention education throughout the state. The UPCC has a highly talented and dedicated staff available 24 hours a day to respond to any poisoning emergency. As a program of the College of Pharmacy, University of Utah, the UPCC staff are familiar with the critical toxicology issues in the state of Utah and can interface quickly with all health care facilities in the state to provide the best possible care for any poisoning. This report highlights the many activities of the UPCC staff throughout the state of Utah.

The UPCC is indebted to the state of Utah, the University of Utah, our public health partners at the state and local level, and Health Resources and Services Administration, US Department of Health and Human Services for their tremendous support. The staff of the UPCC, in turn, is dedicated to ensuring all Utahns have ready access to high quality poison control services. On behalf of the entire staff at the UPCC, we hope you enjoy our 2006 Annual Report.

BARBARA INSLEY CROUCH, PHARMD, MSPH
DIRECTOR
CALLING THE UTAH POISON CONTROL CENTER

The Utah Poison Control Center is an emergency service. The goal is to respond efficiently and effectively to each call for assistance. For each call received, the Specialist in Poison Information (SPI) rapidly takes a poisoning history. Based on the history of the exposure, circumstances of the exposure, and the known toxicity of the poison, a determination is made whether the situation can be safely managed on-site or whether the situation requires prompt medical attention.

In the majority of cases, the situation can be safely managed on-site with telephone follow-up. SPIs will follow many cases to ensure that first aid instructions were understood and the situation is resolving as expected.

If medical attention is needed, the SPI determines whether the patient should be transported via emergency medical services. The SPI calls the hospital and provides treatment recommendations to the health care professionals caring for the patient.

When consulted by health professionals, SPIs take the same poison history and provide treatment recommendations to clinicians based on the patient history, circumstances of the exposure and the known toxicity of the agent(s). Cases are followed throughout the hospital stay to reassess the patient status and to adjust recommendations.

PROCESS OF A CALL

If someone has tasted, touched, or breathed something that may hurt them, call 1-800-222-1222 immediately.

Your call receives immediate attention. Tell the specialist what happened as best you can. Please be ready to provide the following information:

- Exact name of the product
- Amount taken
- When the poisoning happened
- The age, weight, and general state of health of the poisoned person
- How the person is doing
- Phone number where you can be reached

DID YOU KNOW?

You should call the UPCC if you suspect you or someone in your care has been exposed to poison, especially if any of these symptoms are present:

- Unexplained nausea, vomiting, or diarrhea
- Chest or abdominal pain
- Headache or blurred vision
- Suspicious stains on clothing
- Numbness, chills, or fever
- Burns or rash on lips, mouth, or skin
- Unusual drooling or odor on breath

2006 Annual Report
A PROUD LEGACY
The Utah Poison Control Center is nationally recognized as a Certified Regional Poison Control Center by the American Association of Poison Control Centers. Established in 1954, the UPCC has responded to over one million calls for assistance.

MISSION
The mission of the UPCC is to prevent and minimize adverse health effects from a poison exposure through education, service, and research.

GOALS
- To provide 24-hour emergency telephone service to the public and health professionals of Utah for assistance during a poisoning emergency.
- To maintain accreditation as a regional poison control center by the American Association of Poison Control Centers.
- To be a state resource for accurate and up-to-date poison information and clinical toxicology consultation to the public, health care professionals, emergency service personnel, public health officials, and media.
- To provide quality poison prevention and awareness education throughout the state.
- To be a leader in Utah for education of health professionals and health professional students in clinical toxicology.
- To conduct clinical toxicology, poisoning epidemiology, and poison prevention research.
- To be an integral part of disaster planning and response through actively participating in local, University of Utah, state, and national disaster preparedness and response.

SPECIALISTS IN POISON INFORMATION
The UPCC is staffed 24 hours a day with registered pharmacists, nurses, and physicians with additional training in clinical toxicology. Specialists in Poison Information undergo a minimum of 12 weeks of toxicology training prior to independently answering poison exposure calls. After working at least one year at the center and handling 2,000 exposure calls, staff members are required to sit for the Specialists in Poison Information Proficiency Examination to become a Certified Specialist in Poison Information.

Our medical director and director provide back-up at all times to the Specialists in Poison Information and are board certified in medical and clinical toxicology respectively.

DID YOU KNOW?
Specialists answer calls about the following types of substances and much more!
- Medications
- Chemicals in the home, workplace or environment
- Cosmetics and personal care products
- Bites and stings
- Foreign bodies
- Plants and mushrooms
- Automotive products
- Dietary supplements
- Pesticides
In addition to countless lives saved, the Utah Poison Control Center helps to significantly reduce health care costs to Utah citizens. National research shows that for every dollar spent funding poison control centers, $7 is saved in medical care spending. Without the UPCC, people exposed to poison would have to enter the health care system and incur all associated costs. Or, in many cases, the costs would get passed on to taxpayers.

The UPCC helps Utahns save money by:

- Reducing unnecessary hospital emergency department visits and associated costs
- Reducing ambulance transportation and associated costs
- Providing cost-effective treatment recommendations for hospitalized patients

DID YOU KNOW?

Young children have a hard time distinguishing between some household items and poison:

Common Poison Look-alikes

- Apple juice and pine cleaner
- Blue fruit drink and window cleaner
- Lemonade and nail polish remover
- Breath mints and moth balls
- Candy tarts and children's vitamins
“The Salt Lake Valley Health Department has a strong collaboration with the Utah Poison Control Center that helps us identify, monitor, and prevent outbreaks of diseases that can be dangerous to the public. The West Nile Virus is a great example. When the UPCC started receiving calls from people who were experiencing West Nile Virus-like symptoms, they would share that data with us.

With the help of the UPCC, we were able to document the first case of West Nile Virus in Salt Lake County. This identification has been crucial in developing a plan for treatment and to help prevent future outbreaks through targeted mosquito abatement.

continued on pg. 7
“The UPCC is definitely a tremendous benefit to the public health of the community.”

- Dagmar Vitek, MD

Since the collaboration on the West Nile Virus, our relationship has blossomed. We now share data for other types of public health problems. For example, in food poisoning cases, the information provided by the UPCC helps us determine the source. No other system has contact with residents across the state and hourly monitoring online. The UPCC can pick up on outbreaks immediately by geographical area, right down to neighborhoods. This instant access to data helps us target outbreak sources and makes it easier for us to contain outbreaks and put preventative measures into place.”
The Utah Poison Control Center conducts multiple outreach activities aimed at educating the Utah populations who need poison prevention information most. Educational materials, presentations, and safety fairs are specifically targeted toward parents with children under age six, educators, health care professionals, law enforcement personnel, and underserved populations including multicultural populations and seniors. Media relations are continually cultivated to communicate vital information through television, radio, and print news outlets. In 2006, 37 media interviews were conducted with members of the UPCC staff.

The UPCC has a recently updated website, www.utahpoisoncontrol.org, with sections targeting health professionals, educators, parents, the media, and a searchable poisonous plant database.
TIP
Never store potential poisons in containers used for eating and drinking. Store all potential poisons in their original labeled containers. Leave the original labels on all products.

POISON PREVENTION MATERIALS
The Utah Poison Control Center is Utah’s premier resource for poison prevention information. Printed materials have been developed to cover numerous poison-related topics. These materials are distributed to key populations throughout the state including: state and local health departments, law enforcement agencies, fire departments, hospitals, physician’s offices, schools, universities, church groups, scouts, businesses, and county agencies. In 2006, a total of 285,490 pieces were distributed.

COMMUNITY INVOLVEMENT
In addition to printed materials, the UPCC provides prevention information by going out into the community to conduct presentations and participate in health and safety fairs. In 2006, the UPCC gave 84 presentations to groups including: Head Start, elementary, secondary and university students, doctors, senior citizens, public health professionals, and daycare providers.

PROFESSIONAL EDUCATION
As a program of the College of Pharmacy, University of Utah, the UPCC plays an important role in the didactic and experiential training of pharmacy students. In addition, as a member of the University of Utah Health Sciences, the UPCC staff plays a key role in the training of emergency medicine residents, pediatric emergency medicine fellows, and medical students. The UPCC is committed to professional education statewide. In 2006, the UPCC staff gave 42 presentations to health professionals in Utah.

The UPCC produces and distributes a professional newsletter statewide. This quarterly newsletter, Toxicsology Today (formerly called Utox Update), features articles on important clinical toxicology topics, provides an update on activities of the UPCC, and reports on other toxicology related news. Topics in 2006 included: skeletal muscle relaxants, buprenorphine, bupropion toxicity, and organophosphate poisoning.

MORE FOR EDUCATORS
The UPCC utilizes its unique Train-the-Trainer program in each of the 12 local health districts in Utah. This unique training helps to build community capacity to provide poison prevention throughout the state and allows the UPCC to stretch its limited resources. This program is supported by a grant from Health Resources and Services Administration, US Department of Health and Human Services. In 2006, the UPCC offered its second Train-the-Trainer Update Conference. Held in both Northern and Southern Utah, the conference provided updates on new and emerging poison hazards and was attended by poison safety advocates including: doctors, local health department personnel, pharmacists, nurses, law enforcement officials, and daycare providers.

2006 Annual Report
The UPCC works closely with doctors, hospitals, and public officials on prevention and treatment of public health issues including:

- West Nile Virus
- Food poisoning
- Bioterrorism threats
- Disaster preparedness

DID YOU KNOW?

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- West Nile Virus
- Food poisoning
- Bioterrorism threats
- Disaster preparedness

“I call the Utah Poison Control Center almost every day on behalf of my patients.”

- Peter P. Taillac, MD
“I call the Utah Poison Control Center almost every day on behalf of my patients. I ask the Center difficult, complicated questions on treatment options: ‘What is the transit time through the GI tract? When will a substance reach its peak level? How long do I need to monitor a patient?’

The UPCC personnel always have the most up-to-date information and provide exacting information on the management of the patient’s exposure. When you call the UPCC, you get the right answer right away for the right treatment. Their recommendations save me time and speed the flow of people through the ER.

The UPCC is also a great resource for how to treat patients on a multiplicity of medications. They can provide me with a list of potential complications in three minutes. This helps me give more efficient and quality care to my patients.

I know when I note that I consulted the UPCC on a patient’s chart, it makes the case for the prescribed treatment undeniably stronger. Consulting the UPCC is like getting a second opinion free of charge. The patient is also comforted to know that the treatment they’re getting was recommended by the UPCC.”

PETER P. TAILLAC, MD
ASSOCIATE PROFESSOR, ATTENDING PHYSICIAN
THE UNIVERSITY OF UTAH EMERGENCY DEPARTMENT
The Utah Poison Control Center receives an average of 150 calls per day. Some are from callers seeking information about the proper use, storage and precautions regarding drugs and chemicals. But most of the calls are from concerned Utahns and health professionals regarding a poison exposure.

**CALL BREAKDOWN**

Exposure  
44,445 (82.6%)
Drug identification  
4,784 (8.9%)
Drug information  
1,795 (3.3%)
*Poison information  
746 (1.4%)
*Environmental information  
686 (1.3%)
*Medical information  
610 (1.1%)
*Other  
761 (1.4%)

Of the 44,445 poison exposures, 1,712 involved animals.

**TIP**

Clean out your medicine cabinet periodically; discard outdated medications.

**TIP**

Use child-resistant closures, but realize they are not “child-proof.”
AGE DISTRIBUTION

The danger of poison exposure is greatest among Utah’s children. Children are naturally curious and orally explore their environment. This means that children less than six (especially 12 months through two years) are particularly at risk for poison exposure.

<table>
<thead>
<tr>
<th></th>
<th>&lt; 6 yrs.</th>
<th>6-12 yrs.</th>
<th>13-19 yrs.</th>
<th>20-59 yrs.</th>
<th>60+ yrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>25,586</td>
<td>2,420</td>
<td>2,767</td>
<td>9,605</td>
<td>1,568</td>
</tr>
</tbody>
</table>

SUBSTANCE CATEGORIES

The types of substances involved in poison exposures include products available in the home, workplace, and the environment.

Because children under six represent such a large percentage of poison exposures, it is important to note which substances are most prevalent in exposures in this group.

ALL AGES

<table>
<thead>
<tr>
<th>Substances</th>
<th>&lt; 6 yrs.</th>
<th>6-12 yrs.</th>
<th>13-19 yrs.</th>
<th>20-59 yrs.</th>
<th>60+ yrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analgesics</td>
<td>5,451</td>
<td>4,083</td>
<td>3,711</td>
<td>2,251</td>
<td>2,344</td>
</tr>
<tr>
<td>Sedatives, Hypnotics, Antipsychotics</td>
<td>2,069</td>
<td>2,068</td>
<td>2,054</td>
<td>1,677</td>
<td>1,576</td>
</tr>
<tr>
<td>Cosmetics &amp; Personal Care Products</td>
<td>3,109</td>
<td>3,031</td>
<td>2,571</td>
<td>1,866</td>
<td>1,725</td>
</tr>
<tr>
<td>Vitamins &amp; Minerals</td>
<td>1,633</td>
<td>1,532</td>
<td>829</td>
<td>762</td>
<td>666</td>
</tr>
<tr>
<td>Household Cleaning Substances</td>
<td>3,109</td>
<td>3,031</td>
<td>2,571</td>
<td>1,866</td>
<td>1,725</td>
</tr>
<tr>
<td>Cold &amp; Cough Preparations</td>
<td>1,633</td>
<td>1,532</td>
<td>829</td>
<td>762</td>
<td>666</td>
</tr>
</tbody>
</table>

TIP

Store all household products and medicines out of reach and out of sight of children and pets.
“The UPCC provides a great service that not only saves lives, but it also saves Utah families money.”

- David Steele

FACT
Every 30 seconds a child is poisoned in the United States

FACT
Nationally, poison is second only to motor vehicle crashes as a leading cause of unintentional death.
“As a legislator, I personally worked to secure funding for the Utah Poison Control Center because the need was apparent, especially for the health and safety of Utah’s children. The numbers just make sense. The UPCC gives Utah residents direct access to experts who can answer questions, evaluate the problem, and provide crucial information. This is done instantly, at the exact moment when people are in a crisis.

The cost savings also make funding the Center a no-brainer. Because the UPCC doesn’t charge for its services, Utah families save on direct medical expenses. Unnecessary visits to the ER and calls for paramedics are avoided because of the exposure assessment and treatment given by the UPCC.

The highly trained UPCC staff also continually conduct research on poisons, symptoms, and treatments. This makes the UPCC a tremendous resource. When family members show symptoms that may be caused by a poison exposure, they can call UPCC or visit the website to get reliable information.

Continued funding for the UPCC should remain a top priority. The UPCC provides a great service that not only saves lives, but it also saves Utah families money.

As a lifelong math teacher who knows a thing or two about statistics—the numbers just add up.”

DAVID STEELE
UTAH STATE LEGISLATOR 1986-2003
HIGH SCHOOL ADMINISTRATOR & MATH TEACHER
EXPOSURE SITE
The majority of poison exposures occur in the home. Use of child-resistant closures and other safety precautions help, but even in the best poison-proofed homes, exposures occur because the majority of exposures occur when the product is in use.

REASON FOR EXPOSURE
The majority of poison exposures reported to the Utah Poison Control Center were unintentional and involved children orally exploring their environment. Ninety-nine percent of exposures in children less than six years of age were unintentional compared to only 42% in the age group of 13-19 years. The majority of exposures in adults were unintentional (63%). Adult unintentional exposures involved therapeutic errors (taking the wrong dose or wrong medication) as well as ocular and dermal exposures to household chemicals, pesticides, and automotive products.

EXPOSURE MANAGEMENT AND TREATMENT
Due to the expertise and efficiency of the UPCC call center, the majority of poison exposures (76%) were managed on site with telephone follow-up. Children less than six years old are even more likely than older children or adults to be managed on site (89%). Treatment in a health care facility was provided in 20% of the exposures and recommended in another 2% of patients who refused the referral.

The UPCC was involved in the care of more than 8,500 poison exposure cases that were managed in a health care facility. The health care facilities include all acute care hospitals throughout the state as well as urgent care clinics and doctor’s offices. Of those that were managed in a health care facility:

- Treated and released from emergency department: 69.2%
- Lost to follow up and/or left against medical advice: 12.5%
- Admitted to a critical care unit: 8.4%
- Admitted to a non-critical care unit: 6.3%
- Admitted to psychiatric facility: 3.6%

TIP
First aid instructions on product labels are often incorrect or dangerous. If you have questions, call the UPCC for advice.
COUNTY DISTRIBUTION

Poison exposure is a statewide concern. Human exposure calls originated in all 29 Utah counties as shown in the table to the right. Penetrance is the rate of reporting based on the population of each county (rate is per 1,000 population). The UPCC’s penetrance of 16.3 is more than double the national average.

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>HUMAN EXPOSURES</th>
<th>PERCENT OF CALLS</th>
<th>PENETRANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beaver</td>
<td>93</td>
<td>0.2%</td>
<td>14.5</td>
</tr>
<tr>
<td>Box Elder</td>
<td>620</td>
<td>1.5%</td>
<td>13.5</td>
</tr>
<tr>
<td>Cache</td>
<td>1,707</td>
<td>4.0%</td>
<td>16.2</td>
</tr>
<tr>
<td>Carbon</td>
<td>379</td>
<td>0.9%</td>
<td>19.4</td>
</tr>
<tr>
<td>Daggett</td>
<td>16</td>
<td>0.0%</td>
<td>16.9</td>
</tr>
<tr>
<td>Davis</td>
<td>4,964</td>
<td>11.6%</td>
<td>17.3</td>
</tr>
<tr>
<td>Duchesne</td>
<td>375</td>
<td>0.9%</td>
<td>24.1</td>
</tr>
<tr>
<td>Emery</td>
<td>168</td>
<td>0.4%</td>
<td>16.1</td>
</tr>
<tr>
<td>Garfield</td>
<td>85</td>
<td>0.2%</td>
<td>17.8</td>
</tr>
<tr>
<td>Grand</td>
<td>120</td>
<td>0.3%</td>
<td>13.3</td>
</tr>
<tr>
<td>Iron</td>
<td>634</td>
<td>1.5%</td>
<td>14.6</td>
</tr>
<tr>
<td>Juab</td>
<td>146</td>
<td>0.3%</td>
<td>15.7</td>
</tr>
<tr>
<td>Kane</td>
<td>106</td>
<td>0.2%</td>
<td>16.8</td>
</tr>
<tr>
<td>Millard</td>
<td>163</td>
<td>0.4%</td>
<td>12.3</td>
</tr>
<tr>
<td>Morgan</td>
<td>109</td>
<td>0.3%</td>
<td>12.3</td>
</tr>
<tr>
<td>Piute</td>
<td>13</td>
<td>0.0%</td>
<td>9.5</td>
</tr>
<tr>
<td>Rich</td>
<td>31</td>
<td>0.1%</td>
<td>14.6</td>
</tr>
<tr>
<td>Salt Lake</td>
<td>16,153</td>
<td>37.8%</td>
<td>16.2</td>
</tr>
<tr>
<td>San Juan</td>
<td>81</td>
<td>0.2%</td>
<td>5.5</td>
</tr>
<tr>
<td>Sanpete</td>
<td>358</td>
<td>0.8%</td>
<td>13.9</td>
</tr>
<tr>
<td>Sevier</td>
<td>357</td>
<td>0.8%</td>
<td>17.9</td>
</tr>
<tr>
<td>Summit</td>
<td>435</td>
<td>1.0%</td>
<td>11.8</td>
</tr>
<tr>
<td>Tooele</td>
<td>947</td>
<td>2.2%</td>
<td>17.4</td>
</tr>
<tr>
<td>Uintah</td>
<td>482</td>
<td>1.1%</td>
<td>17.4</td>
</tr>
<tr>
<td>Utah</td>
<td>8,314</td>
<td>19.5%</td>
<td>17.5</td>
</tr>
<tr>
<td>Wasatch</td>
<td>331</td>
<td>0.8%</td>
<td>15.7</td>
</tr>
<tr>
<td>Washington</td>
<td>1,865</td>
<td>4.4%</td>
<td>13.8</td>
</tr>
<tr>
<td>Wayne</td>
<td>27</td>
<td>0.1%</td>
<td>10.7</td>
</tr>
<tr>
<td>Weber</td>
<td>3,144</td>
<td>7.4%</td>
<td>14.6</td>
</tr>
<tr>
<td>Out of State</td>
<td>511</td>
<td>1.2%</td>
<td>15.7</td>
</tr>
<tr>
<td>Total</td>
<td>42,734</td>
<td>100%</td>
<td>16.3</td>
</tr>
</tbody>
</table>

A small percentage of cases were judged potentially toxic, but lost to follow up due to inaccurate contact information.

MEDICAL OUTCOME

<table>
<thead>
<tr>
<th>EXPOSURE CALLS RECEIVED IN 2006</th>
<th>42,734</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASES JUDGED AS MINIMALLY TOXIC OR NONTOXIC</td>
<td>21,883</td>
</tr>
<tr>
<td>CASES WERE RE-CONTACTED FOR CONTINUED EVALUATION</td>
<td>20,851</td>
</tr>
</tbody>
</table>

- 20,111 had minimal or no effect
- 1,683 had a moderate to major effect that usually required treatment in a health care facility
- 89 resulted in death, 72 of these were reported by the state medical examiner or law enforcement

TIP
Avoid taking medication in front of children.

TIP
Turn on a light when taking or giving medication.
“As a mom, peace of mind is important. When it comes to my kids, the Utah Poison Control Center provides me with a safety net.”

- Michelle

**FACT**
The UPCC receives 150 calls per day on average.

**TIP**
Never refer to medicine as candy to a young child.

**TIP**
Never eat any part of an unknown plant or mushroom. Teach children to never put leaves, stems, bark, seeds, or berries in their mouths without first asking an adult.
“My experience as a mother is that if any drama is going to happen with your kids, it’s not going to happen conveniently between nine and five. But whenever your child is in danger, you need to act fast.

Both of my girls have asthma, which is exacerbated by their seasonal allergies. To combat the allergies, they take Zyrtec®. One night Gracie wasn’t feeling well, so I gave her some Motrin®. I didn’t notice until after she had taken it that it was Motrin® cold medicine. I immediately worried that the cold medication in the Motrin® might not interact well with Zyrtec®, so I called the Utah Poison Control Center.

The poison specialist I spoke with immediately calmed me down. After I read him the list of ingredients of both drugs, he assured me that Gracie would be fine and there would be no negative interaction. What’s more, he called me back the next day to make sure there were no lingering effects or problems.

As a mom, peace of mind is important. When it comes to my kids, the Utah Poison Control Center provides me with a safety net.”

MICHELLE, GRACIE & EMILY
SALT LAKE CITY, UTAH
THANK YOU

The Utah Poison Control Center is only as good as its staff and supporters. Luckily, we have the best and brightest in both categories. A sincere thanks to the following:

**UTAH POISON CONTROL CENTER STAFF**

Specialists in Poison Information:
- Kathleen T. Anderson, PharmD, CSPI*
- Michael Andrus, PharmD
- Bradley D. Dahl, PharmD, CSPI*
- Mike Donnelly, RN, BSN, CSPI*
- Craig Graham, RN, BSN
- Ed. T. Moltz, RN, BSN, CSPI*
- Mo Mulligan, RN, BSN, JD
- Sandee Oliver, RN, BSN, CSPI*
- Micah Redmond, RN, BSN
- Cathie Smith, RN, BSN
- John Stromness, BS Pharm, CSPI*

*CSPI denotes AAPCC Certified Specialist in Poison Information.

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Scott Marshall, PharmD, CSPI*

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Christine Holman
Karen Thomas

**DID YOU KNOW?**

In a customer satisfaction survey taken in 2006:

97.5% of the respondents rated the UPCC poison specialists good or excellent in terms of courtesy, knowledge, understanding, and helpfulness.

98.3% of the respondents rated the UPCC services as good or excellent.

99.6% will call the UPCC again.
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A UPCC Advisory Board was established in 1998 and continues to represent the interests of the public, university and state, and to provide fiscal oversight.

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TIP
Always read the label before using and follow the instructions on medicines, cleaners, pesticides, automotive, and lawn and garden products for their proper use.