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UTAH
POISON CONTROL
CENTER

07

ANNUAL REPORT



The University of Utah
Utah Poison Control Center



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.

“The education our staff and teachers have received from the UPCC has helped prevent numerous exposures in our Headstart programs.”

- Daniel

STORY

“One of the key ways the Utah Poison Control Center helps minority populations is through the training they provide to our Headstart Program’s staff and teachers. The UPCC training helps the staff recognize poison risks in the classroom. It’s a very proactive approach and one that has helped prevent poisonings in our classrooms.

What’s more, the training is also attended by Centro’s family service specialists and disability specialists. This is important because these specialists are in constant contact with Hispanic families and even make home visits. The valuable information and training they receive from the UPCC helps them assess individual homes for risks so that protective measures can be taken.

The UPCC is always available and willing to go and provide training, even in outlying communities like Sanpete and Genola. They have a great presentation and great materials, which they provide to hundreds of families at no cost. The UPCC personnel are always well prepared and knowledgeable.

Best of all, our Headstart staff and family service specialists can pass on information about the UPCC hotline. This gives every family a place to turn to for help if they have a poison-related problem.”

DANIEL MATA
HEALTH MANAGER
CENTRO DE LA FAMILIA

NO:
01

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 pleased to present its 2007 Annual Report. As one of the first poison centers established in the United States over 50 years ago, the UPCC has a long standing history of providing poison information, clinical toxicology consultation and poison prevention education throughout the state.

The UPCC has a highly talented and dedicated staff available around the clock 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 to any poison victim.

Statewide outreach education efforts continue to grow. In 2007, the UPCC participated in the development and testing of a poison prevention education program for older adults. This program provides older adults with important information about how to contact the poison center, medication safety and poison prevention education.

The UPCC website, www.utahpoisoncontrol.org, was redesigned in 2007. The website provides timely access to poisoning topics of public health concern. The UPCC provides two publications highlighting important public health and toxicology concerns. The "Poison Antidote" addresses timely issues of importance to the public, such as hand sanitizers and caffeine-containing energy drinks. "Toxicology Today" focuses on emerging issues of toxicology importance for health care professionals taking care of potential poison victims.

In 2007, the UPCC responded to over 57,000 calls from all 29 counties in Utah which represents a 6% increase from 2006. This report highlights the many activities of the UPCC staff throughout the state of Utah in 2007.

The UPCC is indebted to the State of Utah, the University of Utah, our public health partners at the state and local level and the Federal Health Resources and Services Administration for the tremendous support to ensure the all Utahns have access to the high quality poison control center services provided by the staff of the Utah Poison Control Center. On behalf of the entire staff at the UPCC, we hope you enjoy our 2007 Annual Report.

BARBARA INSLEY CROUCH, PHARM.D, MSPH
DIRECTOR

FACT

Nearly 60% of the exposures handled by the UPCC specialists involve children less than six years of age and nearly 90% of these pediatric exposures were managed on-site with telephone follow-up.

FACT

UPCC specialists are highly trained pharmacists and nurses who can rapidly determine whether a poison victim can be safely managed on-site.

MAKING UTAH A SAFER PLACE

NO:
03

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.

CURRENT STRATEGIC INITIATIVES

- Maintain a positive and sustainable working environment for staff, faculty, and students.
- Foster and expand collaborative relationships with public health, pre-hospital and health care entities.
- Identify and expand outreach services to populations at high-risk for poisoning that currently underutilize poison center services.
- Identify new trends and sentinel events in poisoning.

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?

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

CALLING THE UTAH POISON CONTROL CENTER

DID YOU KNOW?

Specialists answer calls about the following types of substances and much more!

- Medications
 - Adverse reactions
 - Drug interactions
 - Accidental overdoses
 - Combining 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

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 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. Specialists 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 specialist determines whether the patient should be transported via emergency medical services. The specialist calls the hospital and provides treatment recommendations to the health care professionals caring for the patient.

When consulted by health professionals, specialists 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

SAVING LIVES & SAVING MONEY

NO:
05

By providing accurate assessments and treatment recommendations for poison exposures at no cost, the Utah Poison Control Center provides substantial savings to participants across the entire health care spectrum. These cost savings benefit both self-paying or co-paying patients, hospitals and health care institutions, insurance companies, and governmental public health funding agencies. National statistics show that when poison center involvement in an exposure results in treatment that altogether prevents an acute inpatient hospitalization, an average stay of 3.5 days is averted, providing an average cost savings of \$10,350 from each prevented hospitalization (in 2005 dollars).

When hospitalization is necessary, consultation with a poison center can significantly decrease the patient's length of stay by the more effective use of laboratory testing, more efficient use of antidotes, and appropriate monitoring practices. Patients managed with poison center assistance cut their average length of hospitalization from 6.5 days to 3.5 days, resulting in further savings of more than \$2,100 per patient. The annual cost savings attributable to poison center support for inpatient care of poisoned patients is more than 9 times greater than the total cost of running all American poison centers.

**The Utah Poison
Control Center
provides tremendous
value to Utah health
care facilities by:**

- Helping to decrease crowding in emergency departments
- Minimizing needless EMS ambulance runs
- Freeing critical emergency medical staff to be able to handle more true emergencies
- Saving the facilities the costs of providing indigent care

DID YOU KNOW?

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

Common Poison Look-alikes

- Bottled water and rubbing alcohol
- Fruit drink and liquid cough medicine
- Chocolate bar and chocolate laxative
- Gummy candies and gummy vitamins
- Apple juice and beer

STORY

“We were sitting at my brother’s home when Austin walked in chewing on something that looked like candy. My sister-in-law knew it was ant poison. We weren’t immediately too worried because we’ve called the Utah Poison Control Center before and usually got some simple instructions on what to do. But in this case, they said we needed to get to a hospital immediately.

It turns out the kind of ant poison Austin had ingested has a high level of arsenic in it. After some tests, we found out the levels of arsenic in Austin were off the charts. He needed an antidote, but even the doctor didn’t know what to do. Luckily, the poison center was there with the answers.

They made arrangements with a pharmacy to provide the proper antidote. When we picked it up, the pharmacist didn’t even know what it was for. And it was a nasty concoction that smelled like rotten eggs.

continued on pg. 7





“We were on a first name basis with the Poison Control Center staff, and not a just a case number.”

- Rebecca Horsely

NO:
07

But, if you're looking for one tough kid, it's Austin. He just powered it down time and time again for several weeks. This treatment saved his life. Without it, his organs would have shut down within two or three months.

I don't know what we would have done without the Utah Poison Control Center. Nobody else knew what to do, not even the doctors. But the Poison Center knew exactly what Austin needed and then kept in contact with us every step of the way until our little guy had all the arsenic out of his system.”

**BARRY, REBECCA,
AND AUSTIN
PRICE, UTAH**

THE BEST DEFENSE AGAINST POISON EXPOSURE IS EDUCATION

DID YOU KNOW?

The UPCC was represented in numerous health and safety fairs attended by over 20,000 people.

Some of these fairs included:

- SAFE KIDS Fair
- Senior Expo
- The Junior League Community Assistance and Resource Fair (CARE)
- Neighborhood House Fair
- Natural Resources Festival, Richfield
- Select Health Family Fair
- Children's Museum Fair

TIP

Never refer to medicine as candy to a young child.

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 under-served populations including multicultural populations and seniors. Media relations are continually cultivated to communicate vital information through television, radio, and print news outlets. In 2007, the UPCC staff were involved in 35 media events.

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.

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 2007, a total of 207,092 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 2007, the UPCC gave 74 presentations to groups including: Head Start, elementary, secondary and university students, doctors, senior citizens, public health professionals, and day-care 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 2007, the UPCC staff gave 41 presentations to health professionals in Utah.

The UPCC produces and distributes a professional newsletter statewide. This quarterly newsletter, Toxicology Today, features articles on important clinical toxicology topics, provides an update on activities of the UPCC, and reports on other toxicology related news. Topics in 2007 included: anticonvulsants, botulism, tramadol, and ecstasy.

MORE FOR EDUCATORS

The UPCC also 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.

NEW BROCHURE DEVELOPMENT

The UPCC worked collaboratively with a pediatric resident to develop a new brochure titled, "In Your Hands or Out Of Reach." This brochure is a reminder that potential poisons should be put away when not in use. This brochure includes a list of common potential poisons from around the home, helpful hints to prevent poisonings, and a household checklist, and is available in English and Spanish. It was reviewed by pediatric healthcare providers and parents.

TIP

Many energy drinks contain large amounts of caffeine and other legal stimulants. While most energy drinks are not harmful if consumed in small amounts, mixing these drinks with other sources of caffeine or alcohol can produce serious adverse effects. Think of energy drinks as what they really are; highly concentrated sugary, caffeinated drinks that should be consumed with caution.

DID YOU KNOW?

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



“Nobody functions in an emergency department or poison control center in a vacuum; it’s a collaborative effort built on trust and caring.”

- Mike Moon, RN

STORY

“There’s rarely a shift that goes by that I don’t call the Poison Control Center. It’s great to have a place to call and say, “I need help.” For example, when an overdose is coming in, I call the UPCC immediately to give them all the information I can about the medication or substance the patient has taken. Usually in the few minutes before the patient gets to the hospital, the UPCC has already given me some solid treatment recommendations.

Of course, we see some pretty bizarre things come through the emergency department. Recently, a patient came in who had been seeing an herbal specialist. This specialist had given him two remedies; one he was supposed to drink, and another he was supposed to rub onto his skin. Unfortunately, the patient confused the two substances. By the time he arrived in our emergency room, his muscles had constricted and wouldn’t release.

I called the UPCC about this patient. They recognized the signs of the poisoning and provided treatment recommendations even before all the paperwork had been filled out. If the assessment had been delayed or if I had to take the time to research treatment options, the patient probably wouldn’t have made it. Another five minutes and he would have stopped breathing on his own. The UPCC made it so we were able to effectively treat the patient without more invasive procedures. And this is just one case. I’ve got dozens of similar stories where lives have been saved because I followed the treatment recommendations of the UPCC.”

MIKE MOON, R.N.
EMERGENCY DEPARTMENT
PIONEER VALLEY HOSPITAL

TIP

Carbon monoxide is a leading cause of accidental poisoning in the US. All homes should have carbon monoxide alarms.

2007 HIGHLIGHTS & STATISTICS

TIP

Clean out your medicine cabinet periodically; discard outdated medications.

TIP

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

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

47,981 (84.1%)

Drug identification

4,863 (8.5%)

Drug information

1,849 (3.2%)

*Poison information

713 (1.2%)

*Environmental information

548 (1.0%)

*Medical information

464 (0.8%)

*Other

647 (1.2%)



+Of the 47,981 poison exposures, 1,893 involved animals.

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.

| < 6 yrs. | 6-12 yrs. | 13-19 yrs. | 20-59 yrs. | 60+ yrs. |
|----------|-----------|------------|------------|----------|
| 28,134 | 2,507 | 2,786 | 10,089 | 1,704 |

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

| | | | | |
|------------------------------|--|---|--------------------------|------------------------------------|
| Analgesics 6,124 | Household Cleaning Substances 4,256 | Cosmetics & Personal Care Products 4,207 | Topicals 2,380 | Cold & Cough Preparations 2,348 |
| Vitamins & Minerals 2,324 | Foreign Bodies, Toys, Misc. 2,310 | Sedatives Hypnotics Antipsychotics 2,277 | Food Poisonings 1,758 | Antidepressants 1,707 |

CHILDREN UNDER SIX

| | | | | |
|---|--|-------------------------------------|-------------------|------------------------------|
| Cosmetics & Personal Care Products 3,635 | Household Cleaning Substances 3,213 | Analgesics 2,955 | Topicals 1,984 | Vitamins & Minerals 1,905 |
| Foreign Bodies, Toys, Misc. 1,825 | Cold & Cough Preparations 1,511 | Gastrointestinal Preparation 965 | Pesticides 819 | Antihistamines 723 |

NO:
13

FACT

The UPCC receives 150 calls per day on average.

DID YOU KNOW?

Plants are a common cause of poisoning in children.

Common toxic plants include:

- Philodendron
- Jimsonweed
- Dumb cane
- Foxglove
- Virginia creeper
- Stinging nettle

TIP

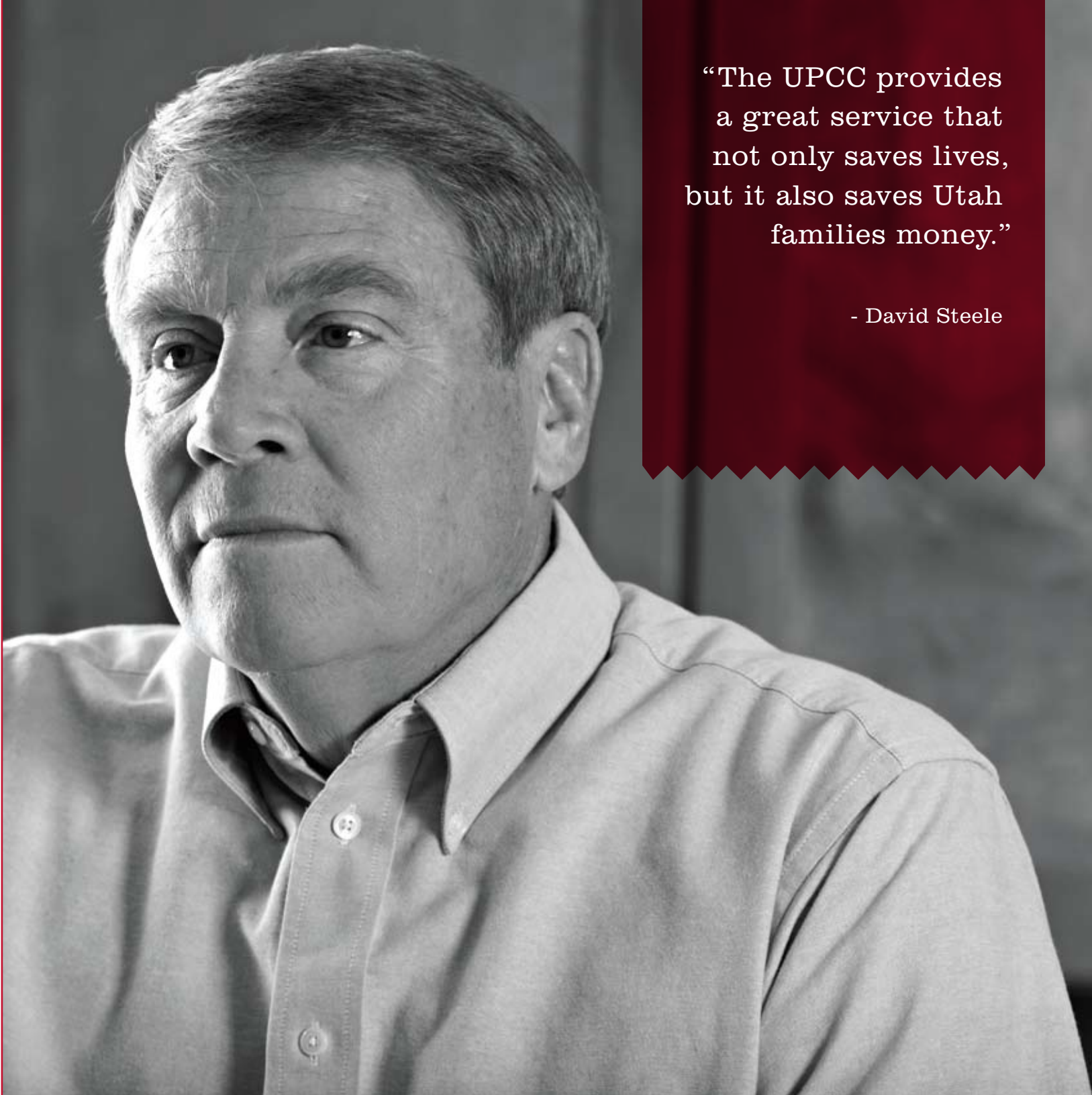
Never eat any part of an unknown plant or mushroom. Teach children to never put leaves, stems, bark, seeds, or berries in their mouths without first asking an adult.

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.



“The UPCC provides a great service that not only saves lives, but it also saves Utah families money.”

- David Steele

STORY

“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

DID YOU KNOW?

National research shows that for every dollar spent funding poison control centers, \$7 is saved in medical care spending.

2007

TIP

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

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.

Own Residence

85.6%
39,450

Other Residence - 6.4% - 2,951
Workplace - 2.4% - 1,114
Public Area - 1.6% - 765
School - 0.7% - 312
Restaurant/Food Service - 0.6% - 270
Unknown/Other - 2.7% - 1,226
Total - 100% - 46,088

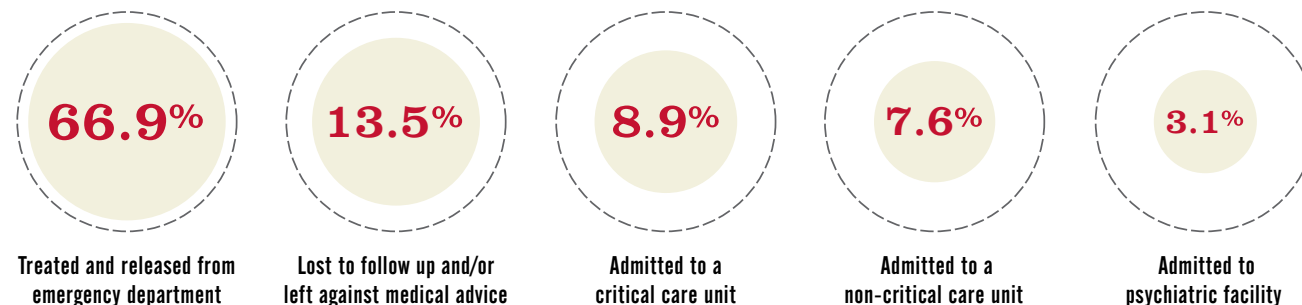
REASON FOR EXPOSURE

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 44% in the age group of 13-19 years. The majority of exposures in adults were unintentional (64%). 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 (77%) 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 9,000 poison exposures 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:



MEDICAL OUTCOME

46,088

HUMAN EXPOSURE
CALLS RECEIVED
IN 2007

23,500

CASES JUDGED
AS MINIMALLY
TOXIC OR
NONTOXIC

22,588

CASES WERE
RE-CONTACTED
FOR CONTINUED
EVALUATION

OF THE **22,588** CASES:

- **20,659** had minimal or no effect
- **1,822** had a moderate to major effect that usually required treatment in a health care facility
- **104** resulted in death, **80** of these were reported by the state medical examiner or law enforcement

NO:
17

DID YOU KNOW?

The UPCC was one of the first three poison centers established in the United States.

TIP

Avoid taking medication in front of children.

TIP

Turn on a light when taking or giving medication.

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 17.6 is more than double the national average. This means that Utah has a high awareness of the poison center, thus affording more cost-effective, quality care for Utah residents.


| COUNTY | HUMAN EXPOSURES | PERCENT OF CALLS | PENETRANCE |
|--------------|-----------------|------------------|------------|
| Beaver | 74 | 0.2% | 11.6 |
| Box Elder | 754 | 1.6% | 16.4 |
| Cache | 1,816 | 3.9% | 17.2 |
| Carbon | 430 | 0.9% | 22.1 |
| Daggett | 14 | 0.0% | 15.2 |
| Davis | 5,309 | 11.5% | 18.5 |
| Duchesne | 444 | 1.0% | 28.5 |
| Emery | 210 | 0.5% | 20.2 |
| Garfield | 100 | 0.2% | 21.0 |
| Grand | 107 | 0.2% | 11.9 |
| Iron | 686 | 1.5% | 15.8 |
| Juab | 187 | 0.4% | 20.2 |
| Kane | 96 | 0.2% | 15.2 |
| Millard | 194 | 0.4% | 14.7 |
| Morgan | 117 | 0.3% | 1.3 |
| Piute | 18 | 0.0% | 13.5 |
| Rich | 32 | 0.1% | 15.1 |
| Salt Lake | 16,464 | 35.7% | 16.5 |
| San Juan | 102 | 0.2% | 7.0 |
| Sanpete | 491 | 1.1% | 19.0 |
| Sevier | 358 | 0.8% | 17.9 |
| Summit | 452 | 1.0% | 12.3 |
| Tooele | 1,097 | 2.4% | 20.2 |
| Uintah | 548 | 1.2% | 19.8 |
| Utah | 9,160 | 19.9% | 19.3 |
| Wasatch | 335 | 0.7% | 15.9 |
| Washington | 2,132 | 4.6% | 15.8 |
| Wayne | 39 | 0.1% | 15.5 |
| Weber | 3,449 | 7.5% | 16.0 |
| Out of State | 873 | 1.9% | |
| Total | 46,088 | 100% | 17.6 |

DID YOU KNOW?

In 2007, the Consumer Products Safety Commission (CPSC) evaluated home lead testing kits. The CPSC does not recommend the use of these kits because testing has shown that some kits may not reliably detect lead when it is present (false negatives) or may register a positive response in the absence of significant lead levels (false positives).

The major sources of lead poisoning are: lead-based paint, many imported candies, toys and toy jewelry, and certain dishware.

Contact your primary care provider for blood testing recommendations, and your local health department for



“I served on the National Poison Control Center board, so I know that Utah has a remarkable center - a model center for how things should work.”

- Patricia Keller, M.P.H., R.N.

STORY

“I work closely with each of the 12 health districts in Utah, so I can clearly see the important role the Utah Poison Control Center plays in helping to maintain the health and safety of Utah families.

The services provided by the UPCC are particularly effective in rural areas where there are no hospitals nearby. For people in small towns, the time and effort required to get to a hospital following a poison exposure could mean the difference between life and death. By calling the UPCC, people in every corner of the state can receive treatment recommendations immediately; and at no cost.

I’m acutely aware of the value of the UPCC on a professional level, but I’m also indebted to them on personal level. I know that no matter how hard you work to “child proof” your home to protect your children, kids have a way of finding trouble. When my son was younger, he got into some pills that he found in his grandma’s purse. Another time, he got into a can of gasoline my husband had in the shed. Even though I’m a trained RN with experience in dealing with crisis situations, in both cases, I called the UPCC.

So if you ask me how I know the UPCC is a lifesaver for Utah families, it’s because I’ve experienced their services firsthand.”

PATRICIA KELLER, M.P.H., R.N.
PROGRAM MANAGER
VIOLENCE & INJURY PREVENTION PROGRAM
STATE OF UTAH, DEPARTMENT OF HEALTH

DID YOU KNOW?

The FDA issued a Public Health Advisory for parents and caregivers, recommending that over-the-counter (OTC) cough and cold products should not be used to treat infants and children less than 2 years of age because of serious and potentially life-threatening side effects.
—FDA News, 1/17/08

TIP

Hand sanitizers have been shown to be effective in reducing illness. However, common hand sanitizers contain high concentrations of ethanol and isopropanol (rubbing alcohol). Always supervise children when using these products.

DID YOU KNOW?

In the 2007 customer satisfaction survey:

98.3% of the respondents rated the UPCC poison specialists good or excellent in terms of courtesy, knowledge, understanding, and helpfulness.

99.2% of the respondents rated the UPCC services as good or excellent.

99.9% will call the UPCC again.

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

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*CSPI denotes AAPCC Certified Specialist in Poison Information.

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Always read the label
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