

2008

UTAH

POISON
CONTROL
CENTER

ANNUAL
REPORT

"I didn't know that a bee sting could be so serious. It's still hard for me to believe, but if my mom hadn't called the Utah Poison Control Center, I could have died."

—Jessica



JESSICA & WENDY'S STORY

JESSICA:

I was on a date playing frisbee golf with a group of friends. As we walked by some trees I felt something sting my leg. I started jumping up and down and got stung a few more times. After a few minutes, I became short of breath and my friends said I looked pale. They asked me if I wanted to go home. But I was thinking it's just a stupid bee sting, I'll be fine. I didn't want to be this big drama queen and ruin my date. By the time we finished the last hole I was having a harder and harder time breathing, so we decided to go to the store to get some Benadryl®. Once we got to the store, I went into the bathroom and called my mom for advice.

WENDY:

I got the call from Jessica on my cell phone and immediately knew something was wrong. She took a long time to respond to my questions and her speech was off. I kept Jessica on my mobile and called the Utah Poison Control Center from my home phone. I explained the situation and they were able to quickly assess the problem even though Jessica wasn't exhibiting the typical symptoms of an allergic reaction. They told me to call an ambulance.

JESSICA:

When the ambulance arrived, the paramedics quickly gave me an EPI shot, right there on the sidewalk. I thought that would be the end of it, but since my blood pressure was low, they wanted to take me to the hospital as well. My date rode in the front of the ambulance with me in the back.

WENDY:

I'm so grateful that I could call the Utah Poison Control Center and get an immediate response and guidance on what to do. Their recommendations prevented the situation from becoming much more serious. If I had taken the time to drive the 30 minutes to Jessica and then another 20 minutes to the hospital, Jessica could have stopped breathing or her low blood pressure could have been life threatening.

DID YOU KNOW?

.....

In October 2008, the Consumer Healthcare Products Association announced that its members are voluntarily modifying the product labels of over-the-counter children's cough and cold medicines to state "do not use" in children under 4 years of age. The label will also carry a new warning: Do not use to sedate or make a child sleepy. The FDA states that "caregivers should not, under any circumstances, give adult medications to children."

**FDA and CHPA Statements
October 2008**

TIP

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Compact Fluorescent Lights (CFLs) contain mercury, a toxin that can cause adverse health effects. If a bulb breaks, open the windows for at least 15 minutes, shut off central air systems, and call the Utah Poison Control Center for help (1-800-222-1222). Don't vacuum up the debris. Follow proper disposal guidelines: www.epa.gov/mercury/spills



A MESSAGE FROM THE DIRECTOR

The Utah Poison Control Center (UPCC) is proud to provide you its 2008 Annual Report. This report highlights the important work of the UPCC and its staff. In 2008, the UPCC responded to nearly 57,000 calls for assistance which included calls from all 29 counties in Utah.

The UPCC is proud of the impact it has on the community. As one of the first poison centers established in the United States, 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 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. This report highlights the many activities of the UPCC staff throughout the state of Utah.

In 2008, the UPCC held its third update conference for health educators and health professionals. This biennial event brings together health educators and health professionals from around the state to hear about important topics in poison

prevention, education and treatment. This year's conference attracted over 50 participants statewide.

The UPCC is an active member of the public health team. The UPCC staff work with state and local public health workers to plan and respond to situations that affect the public's health. The UPCC is privileged to have participated in the annual Federal Emergency Management Agency's (FEMA) Chemical Stockpile Emergency Preparedness Program exercise since 1991. This year's FEMA report states "The UPCC is very professionally run with dedicated and well trained staff members. They have the ability of making a significant difference in the medical care of the community." The UPCC is honored to be a part of a great emergency response team dedicated to improving the lives of Utahns.

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 that 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 2008 Annual Report.

—BARBARA INSLEY CROUCH, PHARMD, MSPH
DIRECTOR

KEEPING UTAH SAFE

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 1.1 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?

Teen drug abuse is a prevalent problem:

- 1 in 5 teens has tried Vicodin®
- 1 in 10 has tried OxyContin®
- 1 in 10 has used Ritalin® or Adderall® for nonmedical purposes
- 1 in 11 teens has admitted to getting high on cough medicine

Partnership for a Drug-Free America



DID YOU KNOW?

.....
Poisonings happen in Utah more often than motor vehicle crashes!

Every year, over one million possible poisonings in children under the age of six are reported to United States poison control centers.

One in five teens reports intentionally misusing someone else's prescriptions to get high.



BANG FOR THE BUCK

The Utah Poison Control Center was one of the first poison centers in the nation. Our center helped provide the framework and leadership for all other poison centers in the United States. This means the UPCC has accumulated unparalleled expertise and knowledge. Our center is truly a model of efficiency.

The UPCC is also a great example of a successful public/private partnership that provides Utah citizens with an incredible bang for the buck. The center's knowledge and expertise cannot be replicated by 911 or any other entity. Without their services, the financial toll to the state would easily be in the millions.

But even more important than saving money is saving lives, and the UPCC does save lives. If people couldn't get the instant access to this valuable information, there would be hundreds or even thousands of poison fatalities each year. No one else can assess and respond as fast or with as much information as the UPCC can.

Poisonings can happen at any time and the UPCC is there 24/7 to help. Of course, they not only provide immediate response, they do a tremendous job with educating the public on ways to prevent poisonings from happening in the first place. And if our state ever experiences a health emergency or natural disaster, the UPCC will lead out in the response. Without it, we'd set ourselves back 20 years as a state.

—Representative Tim M. Cosgrove
Utah State House of Representatives, District 44



The UPCC is a very effective, efficient use of resources to save lives and money.

**—Representative
Tim Cosgrove**

DID YOU KNOW?

Poison centers have the most up-to-date information on new products and treatments for poisoning.

The most common substances associated with poison exposures reported to poison centers for children are:

- Cosmetics and personal care items
- Household cleaners
- Pain relieving medicines

CALLING THE UTAH POISON CONTROL CENTER

The Utah Poison Control Center is an emergency service; its 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 patient status and to adjust recommendations as appropriate.

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

Poison centers provide accessible and affordable health care. The Utah Poison Control Center's specialists in poison information assess, triage, manage, and continually monitor patients with a poison exposure at no direct charge to the patient, practitioner or health care institution, thus providing a substantial savings to participants across the entire health care spectrum. This cost savings benefits individuals – whether they have insurance or not; insurance companies; and the government, which funds a significant portion of health care in the United States.

Poison centers save health care dollars by managing most poison exposures at home with telephone follow-up. Utah surveys have documented that up to 76% of callers to the poison center would seek treatment in an emergency department, urgent care clinic or doctors office if the poison center were not available. The poison center helps to avoid these unnecessary health care costs.

Poison centers also help reduce overall health care costs even when treatment in a hospital is necessary. 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.

A few of the ways the Utah Poison Control Center provides tremendous value to Utah health care facilities:

- Helps to decrease crowding in emergency departments
- Minimizes unnecessary EMS ambulance runs
- Frees critical emergency medical staff to be able to handle more true emergencies
- Saves hospitals and health care institutions 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

- 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

DID YOU KNOW?

Young people, who intentionally abuse cough medicine to get high, sometimes take as much as 25-50 times the recommended dose.

Consumer Healthcare Products Association

TIP

Carbon monoxide (CO) is a leading cause of poisoning deaths. All fuel-burning devices can produce CO if they are not properly working or are not properly vented. All homes should have carbon monoxide alarms.



SPREADING THE WORD

Educating the public about the services of the poison control center and how to prevent poisonings is a key component of the Utah Poison Control Center's efforts. The UPCC's outreach efforts include caretakers of small children and Utah's under-served and high risk populations. 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 multi-cultural populations and seniors. Media relations are continually cultivated to communicate vital information through television, radio, and print news outlets. In 2008, the UPCC staff were involved in 23 media events.

The UPCC's website, www.utahpoisoncontrol.org, has sections targeting the needs of health professionals, educators, parents, the media, and a searchable poisonous plant database.

What you can do on the site:

- Access poison prevention lesson plans for specific audiences
- Download activity sheets for children
- Sign up for newsletters
- Access information on ordering educational materials



POISON EDUCATION

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.

Several new programs have been developed and added to the UPCC website:

- Poison Safety
(Pre K through 6th grade)
- Medication Safety and Poison Prevention (Seniors)
- Inhalant Prevention (4th grade through 7th grade)
- Keeping Children Safe
(Young parents)

These are complete lesson plans with activities, worksheets, and PowerPoint® presentations. All materials can be downloaded.

A public newsletter, *Poison Antidote*, that discusses timely poisoning topics is published three times a year.

Topics covered in 2008 included:

Spring cleaning safety tips, medication disposal, dangers of children's products that look like food or drinks, cough and cold medicine warning, and proper disposal of mercury-containing products. This newsletter is available on the website and by email distribution.

PROFESSIONAL EDUCATION

As a program of the College of Pharmacy, University of Utah, the UPCC plays a pivotal role in the didactic and experiential training of pharmacy students. In addition, as a member of the University of Utah Health Sciences Center, 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 providing professional education statewide. UPCC staff gave 39 presentations to health professionals throughout the state in 2008.

In addition, a quarterly newsletter on timely clinical toxicology topics, *Toxicology Today*, is distributed to health professionals statewide. Featured topics in 2008 included: cyanide, sentinel events, activated charcoal, nasal decongestants, and hydrogen peroxide.

TIP

Pesticides can be absorbed through the skin or when inhaled. Use caution when applying pesticides whether indoors or outdoors. Wear proper clothing and protective eyewear and avoid spraying outside on windy days. Use containers that are made to keep children out. If a product has a child resistant closure, replace the cap tightly. Remember that NO container is child proof.

TIP

Dispose of medications properly. Do not flush them down the toilet. Mix unused medications with an undesirable substance and place in a sealed container before disposing in the trash.

*As a mother, it's
reassuring to know
that there is a place
you can call anytime
that will help you; a
place that doesn't
make you feel stupid
or embarrassed to
have called.*

–Heidi



ANNA & HEIDI'S STORY

My six-year-old daughter Anna was in our front room watching TV while I was in the kitchen doing dishes. I couldn't see her very well, but I could hear her rummaging through my purse. She's such a girlie girl who loves makeup, I figured she was looking for my lipstick. When I heard a click, I instantly knew she had gotten a hold of my EPI pen.

I ran into the front room to investigate and sure enough, the EPI pen was lying on the floor. Anna had accidentally released a dose into her finger. Seeing my panicked face, Anna quickly explained she was just trying to write with the pen.

The EPI pen stays in my purse at all times because I'm allergic to nuts. I had to use it once and it made my heart race so fast I thought it would jump out of my chest. As a dramatic mother, I instantly jumped to the conclusion that if the EPI shot made my heart race, it could easily cause my little girl's heart to explode.

I called my pediatrician who told me to immediately call the Utah Poison Control Center. The poison specialist who answered calmed me down and assured me that Anna wasn't in mortal danger. He was a bit concerned that the location of the EPI shot could stop the blood flow to Anna's finger, so he recommended that I seek treatment at an emergency facility. A huge feeling of relief washed over me as I hung up the phone with the poison center because I knew Anna would be okay.

DID YOU KNOW?

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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

TIP

Energy drinks, other energy boosting supplements, and weight loss products often contain one or more sources of caffeine and other dietary supplements that may pose potential safety risks in combination. The FDA recently released a warning against one such product, because it contained an undeclared prescription weight loss medication, which is a controlled substance. Pay close attention to ingredients and servings per containers.

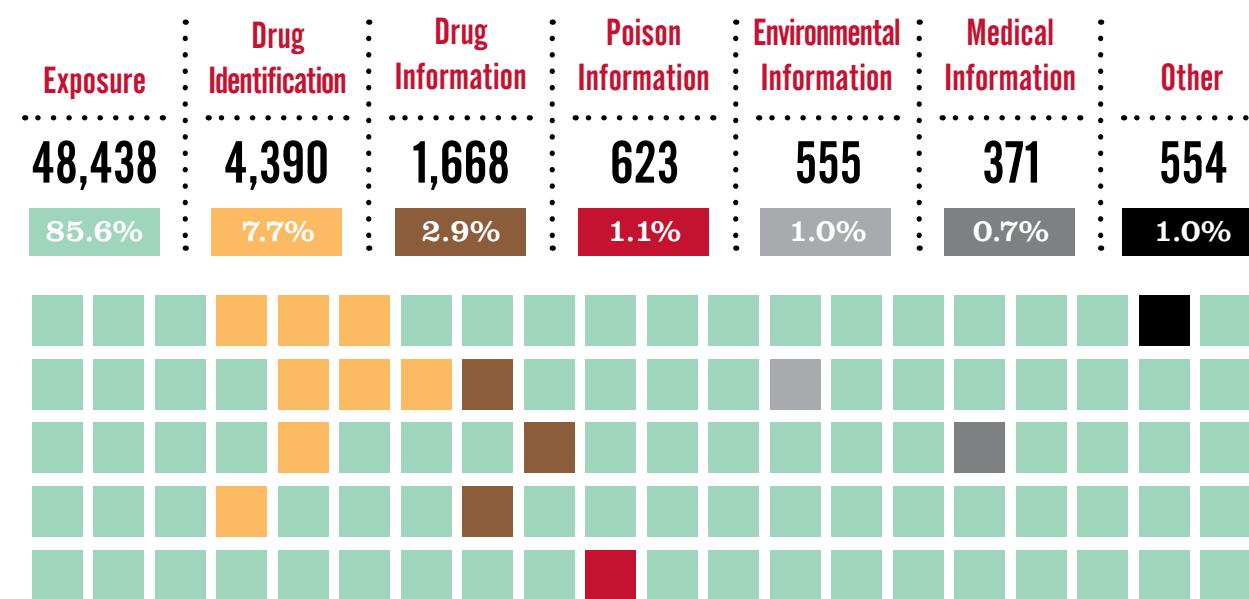


2008 HIGHLIGHTS & STATISTICS

The Utah Poison Control Center receives an average of 155 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.

In 2008, the Utah Poison Control Center received 56,599 calls.

CALL BREAKDOWN



Of the 48,438 poison exposures, 1,753 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.

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 common in exposures in this group.

POISON EXPOSURES

<6 yrs.	6-12 yrs.	13-19 yrs.	20-59 yrs.	60+ yrs.
28,962	2,546	2,678	9,902	1,795
62%	6%	6%	22%	4%

RANKING OF TOP 10 SUBSTANCES

ALL AGES	6,629	Analgesics	1	Cosmetics & Personal Care Products	3,715	CHILDREN UNDER SIX
	4,351	Household Cleaning Substances	2	Analgesics	3,381	
	4,272	Cosmetics & Personal Care Products	3	Household Cleaning Substances	3,327	
	2,515	Vitamins & Minerals	4	Vitamins & Minerals	2,075	
	2,469	Foreign Bodies, Toys, Misc.	5	Topical Preparations	2,023	
	2,460	Sedatives, Hypnotics & Antipsychotics	6	Foreign Bodies, Toys, Misc.	1,970	
	2,362	Topical Preparations	7	Cold & Cough Preparations	1,243	
	2,109	Cold & Cough Preparations	8	Gastrointestinal Preparations	1,055	
	1,698	Antidepressants	9	Antihistamines	878	
	1,435	Food Poisonings	10	Plants	748	

TIP

Store all household products and medicines out of reach and out of sight of children and pets.

FACT

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

FACT

.....
Nationally, poisoning is second only to motor vehicle crashes as a leading cause of unintentional death.



TRULY A LIFESAVER

The Utah Poison Control Center is truly a lifesaver, particularly in rural and frontier areas. Some of the communities in my four-county area don't have widespread Internet access, so without the UPCC, many people would try to handle poison exposures themselves. Fatalities would occur that could easily be prevented. Plus, in rural and frontier areas, hospitals are often over an hour away. Poison exposures require treatment to begin immediately. The UPCC tells you what you can do to treat an exposure before you get to the hospital. The poison specialists will also call ahead to the hospital to provide information and recommendations so that proper treatment can be administered immediately upon your arrival.

Of course the UPCC isn't just sitting around waiting for people to call. I am constantly impressed with their proactive nature as they seek new ways to educate communities across the state. Their printed materials are wonderful. We have found the information to be extremely effective in educating new parents, grandparents, and the public on ways they can help prevent exposures, particularly in children.

You cannot underestimate the important role the UPCC plays regarding state-wide preparedness for bioterrorism and other potential catastrophes. If a truck rolls or there is a train accident involving hazardous materials, the UPCC is a key member of the response team that will determine how to best protect the community.

—Georgina Nowak
Community Health Educator
Southeastern Utah District Health Department



In addition to being experts in all poison-related issues, the poison specialists are always helpful, caring, and professional. Their commitment to follow up each case through additional phone calls is second to none.

—Georgina

TIP

First aid instructions on product labels are often incorrect or dangerous. 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.

TOTAL HUMAN EXPOSURES 46,685							
Own Residence	Other Residence	Workplace	Public Area	School	Restaurant/ Food Service	Health Care Facility	Unknown/ Other
40,407	2,966	882	732	271	228	150	1,049
86.5%	6.4%	1.9%	1.6%	0.6%	0.5%	0.3%	2.2%

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 43% in the age group of 13-19 years. The majority of exposures in adults were unintentional (62%). 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.

BREAKDOWN OF 9,089 CASES MANAGED IN A HEALTH CARE FACILITY				
Treated and released from emergency department	Lost to follow up and/or left against medical advice	Admitted to a critical care unit	Admitted to a non-critical care unit	Admitted to psychiatric facility
5,931	1,235	866	779	278
65.2%	13.6%	9.5%	8.6%	3.1%

MEDICAL OUTCOME

46,685	23,833	22,852	OF THE 22,852 CASES:
Human exposure calls received in 2008	Cases judged as minimally toxic or nontoxic	Cases were re-contacted for continued evaluation	<p>21,015 had minimal or no effect</p> <p>1,772 had a moderate to major effect that usually required treatment in a health care facility</p> <p>63 resulted in death, 36 of these were reported by the state medical examiner or law enforcement.</p>

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

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 17.3 is more than double the national average. This means that Utahns have a high awareness and utilization of the poison center, and take advantage of the quality and cost-effective services the UPCC provides.

COUNTY	HUMAN EXPOSURES	PERCENT OF CALLS	PENETRANCE
Beaver	79	0.2%	12.2
Box Elder	791	1.6%	16.7
Cache	1,808	3.9%	16.6
Carbon	426	0.9%	21.6
Daggett	14	0.0%	14.4
Davis	5,316	11.5%	18.0
Duchesne	466	1.0%	28.8
Emery	227	0.5%	21.7
Garfield	79	0.2%	16.2
Grand	109	0.2%	11.9
Iron	689	1.5%	15.4
Juab	164	0.4%	17.0
Kane	108	0.2%	16.8
Millard	174	0.4%	13.0
Morgan	120	0.3%	13.0
Piute	21	0.0%	15.2
Rich	58	0.1%	26.8
Salt Lake	16,387	35.7%	16.1
San Juan	103	0.2%	7.0
Sanpete	452	1.1%	17.1
Sevier	359	0.8%	17.6
Summit	438	1.0%	11.4
Tooele	1,050	2.4%	18.6
Uintah	523	1.2%	18.2
Utah	9,408	19.9%	18.8
Wasatch	298	0.7%	13.6
Washington	2,077	4.6%	14.7
Wayne	38	0.1%	14.4
Weber	3,567	7.5%	16.2
Out of State	1,336	1.9%	
Total	46,685	100%	17.3

TIP

Avoid taking medication in front of children.

TIP

Turn on a light when taking or giving medication.

*With the Utah
Poison Control
Center available
24/7, it's like having
a poison expert
in the emergency
department around
the clock.*

–Dr. Bruce Herman



HIGH STANDARD OF EXCELLENCE

When I was a trainee in emergency medicine, I had the opportunity to work with the Utah Poison Control Center. I have talked to them on an almost daily basis ever since. When patients come into the ED with poison exposures, I always call the UPCC to confirm diagnoses and treatment recommendations. Even with cases that seem cut-and-dry, I will consult with them to make sure I haven't missed anything.

The UPCC also helps to greatly reduce our workload, making the ED more efficient. Instead of trying to comb through a huge computer database looking for up-to-date information about a particular poison or treatment, we can call the UPCC for specific information tailored to an individual case. The poison specialists tell us exactly what we need to do for even the most- uncommon exposures like snakebites. And their help is invaluable in determining how long patients should be observed and when a patient can be safely released. Because of their input, we save a huge amount of hospital resources by not sending patients into critical care management when they don't really need it.

Bottom line, if the UPCC weren't there, it would hurt the children. Basically, we'd be winging it in many circumstances. Primary Children's Medical Center has a well-deserved reputation for providing the highest level of care for children and we need the Utah Poison Control Center to maintain our standard of excellence.

—Dr. Bruce Herman, M.D.
Pediatric Emergency Medicine and Primary Children's Medical Center Fellowship Director

DID YOU KNOW?

Plants are a common cause of poisoning in children.

Common toxic plants include:

- Philodendron
- Jimsonweed
- Dumbcane
- Foxglove
- Virginia creeper
- Stinging nettle

DID YOU KNOW?

In a customer satisfaction survey taken in 2008:

97.9% of the respondents rated the UPCC poison specialists good or excellent in terms of courtesy, knowledge, understanding, and helpfulness.

98.8% of the respondents rated the UPCC services as good or excellent.

100% will call the UPCC again.



THANK YOU

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

SPECIALISTS IN POISON INFORMATION:

Kathleen T. Anderson, PharmD, CSPI*
Michael Andrus, PharmD, CSPI*
Bradley D. Dahl, PharmD, CSPI*
Mike Donnelly, RN, BSN, CSPI*
Ed. T. Moltz, RN, BSN, CSPI*
Mo Mulligan, RN, BSN, JD
Sandee Oliver, RN, BSN, CSPI*
Micah Redmond, RN, BSN, CSPI*
Cathie Smith, RN, BSN
John Stromness, BS Pharm, CSPI*
Megan Smedley, PharmD
Karen Thomas, PharmD

**CSPI denotes AAPCC Certified
Specialist in Poison Information.*

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ADVISORY BOARD

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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Pediatrician

CHAIR-ELECT:

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Health Resources and Services
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TIP

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



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