

**UTAH** Poison Control Center

A N N U A L R E P O R T

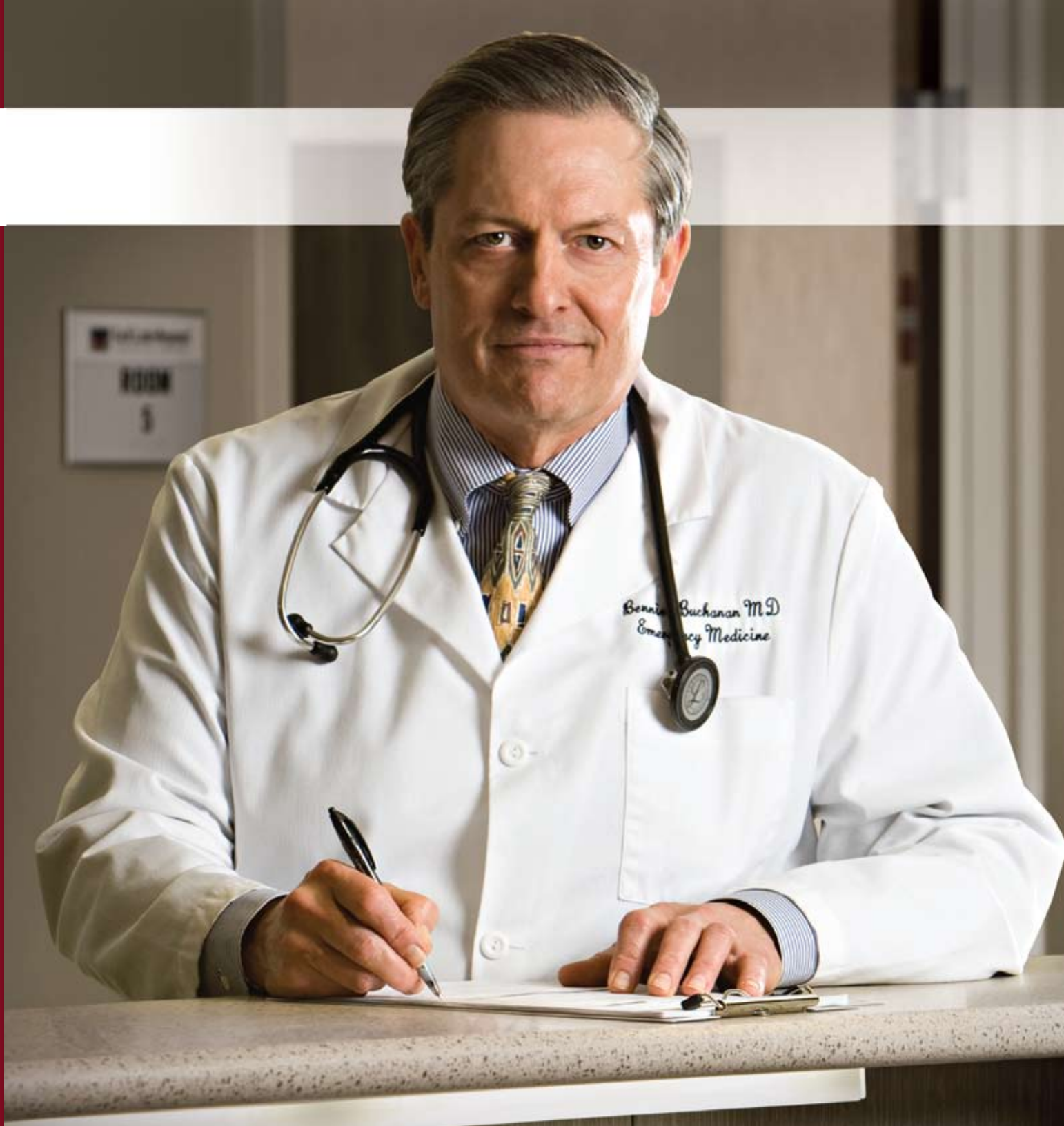
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“When you call the UPCC, you get an immediate and well-informed response from a highly trained specialist, backed by a board-certified toxicologist. It’s information that’s available at your fingertips 24/7.”

—Ben Buchanan, M.D.





# A VITAL SECOND OPINION

I have been a doctor since 1978 and I've seen plenty of changes in how medicine is practiced, but through it all, I have been a strong proponent of the Utah Poison Control Center. I talk to the poison specialists several times each week. The center is an extremely helpful resource for me in the emergency department when it comes to industrial exposures and multiple medication or pediatric overdoses. Not only do the poison specialists confirm or clarify treatment options, they provide a valuable second opinion. After 31 years, I feel pretty comfortable treating overdoses, but having the UPCC back up the recommended treatment really carries weight with the patient and his/her concerned family members.

In fact, when overdoses come into the E.D., I call poison control immediately to coordinate plans and to make sure we're on the same page regarding treatment recommendations. Frequently, exposure patients come to us after calling the UPCC. In those cases, the center always calls ahead to provide us with the details of the exposure, treatment recommendations, and any concerns they may have. This allows us to respond as quickly as possible when the patient comes through the door.

What's more, no one knows more about local poison trends and outbreaks than the UPCC. Their specialists are experts on all the local poisonous plants, insects, and animals, and they are well versed in the cultural variations of drug use and abuse within our population. The fact that the UPCC is right here in Utah and not some faraway place, adds greatly to their effectiveness.

**—Bennion Buchanan, M.D.**  
*Emergency Physician, Salt Lake Regional Medical Center*

## DID YOU KNOW

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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**

# A MESSAGE FROM THE DIRECTOR

The Utah Poison Control Center (UPCC) is proud to provide you its 2009 Annual Report. This report highlights the important work of the bright and talented UPCC staff. In 2009, the UPCC responded to over 56,000 calls for assistance, which included calls from all 29 counties in Utah.

The UPCC is proud of its broad community impact. As one of the first poison centers established in 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 specialists in poison information are 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 interface quickly with health care professionals statewide to provide the best possible care to any poison victim. This report highlights the many activities of the UPCC staff throughout Utah.

In 2009, the UPCC continued to nurture partnerships with pre-hospital providers and state and local public health agencies. The UPCC purchased an Interactive Voice Response System to assist in getting rapid information disseminated to a broad audience during a public health emergency. UPCC staff worked closely with the Utah Department of Health to develop and

program important public health messages.

UPCC staff have continually participated in the annual Federal Emergency Management Agency's (FEMA) Chemical Stockpile Emergency Preparedness Program exercise since 1991. Brad Dahl, PharmD, CSPI participated on the exercise planning team to ensure that the UPCC was challenged with mock calls that truly tested UPCC's readiness for a disaster.

Outreach education efforts continue to grow statewide with enhanced partnerships with educators through local health districts and the development of several new and exciting education programs. With some enhancements of the UPCC database, educators statewide can now order educational materials electronically through a system that allows the UPCC to update its tracking and reporting of outreach activities.

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 2009 Annual Report.

**—Barbara Insley Crouch, PharmD, MSPH**

# KEEPING UTAH SAFE

## A PROUD LEGACY

Established in 1954, the Utah Poison Control Center has responded to over 1.2 million calls for assistance. The UPCC is nationally recognized as a Certified Regional Poison Control Center by the American Association of Poison Control Centers (AAPCC), a status that was re-confirmed in 2009. The center's proud legacy extends far. It was one of the first poison centers established in the United States and was also one of the first to achieve national accreditation status. The UPCC has provided unwavering support and assistance for Utahns ever since.

Affirmation of accreditation status is a true mark of quality. To be accredited, a poison control center must meet a number of strict standards, including 24-hour poison information and toxicology consultation to the public and health care professionals, employment of nurses and pharmacists certified as poison information specialists, a board-certified medical toxicologist to provide medical oversight and direction, an ongoing quality improvement program, written guidelines for evaluation and management of toxic exposures, and public and professional education programs.

## MISSION

The mission of the Utah Poison Control Center 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 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 throughout the state.
- To be a leader in Utah for education of health professionals and 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 Health Sciences, and national disaster preparedness and response.
- To maintain accreditation as a regional poison control center by the AAPCC.

## CURRENT STRATEGIC INITIATIVES

- Foster and expand collaborative relationships with public health, pre-hospital and health care entities.
- Provide world-class customer service to all stakeholders.
- Provide comprehensive poison prevention education.

## 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 pass the specialists in poison information proficiency examination to become a certified specialist in poison information.

## TOXICOLOGY EXPERTS

The UPCC has two board-certified toxicologists. The medical director is a fellow of the American College of Medical Toxicology and the director is a diplomat of the American Board of Applied Toxicology.

## TIP

### Medicine Mishaps Put Children at Risk:

Each year, more than 71,000 children end up in hospital emergency departments from medicine overdoses. Most of these poisonings occur in children less than 6 years of age. The majority of the overdoses are a result of children getting into medicine while unsupervised or as a result of adult errors.

—Am J Prev Med 2009

### To help prevent medication poisonings:

- Review and verify medication dosing schedule prior to use.
- Use appropriate measuring device when giving children medication.
- Always keep medicines out of reach of children.
- Never call medicine “candy.”
- Avoid taking medication in front of children.
- Use child resistant closures and always secure after use.



# A REAL CAN DO ORGANIZATION

The Department of Environmental Quality (DEQ) runs a grant program for the proper disposal of unused medication. The program utilizes bins at local police stations that people can deposit their unused medications so they don't flush those substances down the toilet. Allowing those medications to get into the water can be harmful to the environment. In addition to permanent disposal locations, our department sponsors community "take back" events.

The Utah Poison Control Center is an active partner with DEQ because unused medication can be a poisoning hazard as well as an environmental concern. We thought it would be a great partnership, and the UPCC has exceeded our expectations. They have jumped in with both feet and been able to contribute their expertise in getting the message out to the public and educating people about the importance of safe, proper disposal. The UPCC has been able to turn medicine disposal into more than just a "green" issue but also a "safety" issue; one that resonates with the public, particularly families with young children.

The UPCC has been an amazing resource for not only getting the message out to a new and broader audience, they have also been great to help staff events. They are a real can do organization. And they bring an incredible knowledge base and professional expertise to the program. They have truly filled every need we've had and have helped make the program a growing success.

**—Leah Ann Lamb, MS**

*Assistant Director, Division of Water Quality  
Department of Environmental Quality*



“The UPCC has been so committed to the program of safely disposing unused medication. Their commitment level from the director on down through the entire organization is truly impressive. They are an organization that just plain gets things done.”

—Leah Ann Lamb

## DID YOU KNOW

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### Iron-Containing Medicine

- The Consumer Products Safety Commission (CPSC) warns that iron medications can be deadly to a young child. The CPSC requires that iron-containing medicines and vitamins with iron be packaged in child-resistant closures. Parents should always properly secure safety closures after use.

—CPSC doc #5051

# 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 rapidly takes a poisoning history. Based on the history of the exposure, circumstances of the exposure, and the known toxicity of the agent, 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 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

The nation's poison centers respond to over 4 million calls for assistance annually. Poison control centers provide accessible and affordable health care. Specialists in poison information assess, triage, and monitor patients with a possible poison exposure at no direct charge to the caller.

Poison centers save health care dollars by managing most poison exposures at home with telephone follow-up. In 2009, 79% of calls to the Utah Poison Control Center were managed on-site. UPCC surveys have documented that up to 77% of callers would seek treatment in an emergency department,

urgent care clinic, doctor's office or call 911 if the poison center were not available. The UPCC helps to avoid these unnecessary health care costs. The beneficiaries of the health care cost savings are not only the individuals, but also the insurance providers, both private and government.

Poison centers also help reduce overall health care costs, even when treatment in a hospital is necessary. The UPCC consults directly with health care providers daily. Studies have shown that 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 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.

Finally, poison centers provide additional benefits in rural areas where health care resources may be even more limited.

**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 the most life threatening situations.
- Saves hospitals and health care institutions the costs of providing care.

## 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 cap tightly. Remember that NO container is child proof.

## IN THE NEWS

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The UPCC uses a variety of media to communicate vital information including television, radio, social media, and print news outlets. In 2009, the UPCC staff were featured in 37 news stories.

# POISON EDUCATION

An important part of the Utah Poison Control Center's mission is education. Through education, the UPCC can empower Utah residents with information necessary to implement poison prevention strategies. Outreach education efforts focus on prevention, both primary and secondary. Primary prevention efforts focus on how to prevent poisonings and secondary prevention efforts focus on raising awareness about the services of the poison control center. The UPCC's outreach efforts reach a broad audience and include caretakers of small children and Utah's underserved and high-risk populations. Education efforts include

a variety of methods such as: presentations to diverse audiences, one-on-one education at health fairs, printed brochures, electronic newsletters, and through community safety advocates.

Printed materials are available in English, Spanish, Russian, and Vietnamese. The UPCC recently held focus groups with Hispanic/Latino groups and will soon have an updated Spanish version of its Emergency Action Card that better meets the needs of the Hispanic/Latino community. The following materials are available to download or order online at [www.utahpoisoncontrol.org](http://www.utahpoisoncontrol.org).



## EDUCATION MATERIALS

### Brochures

- Your Poison Center
- In Your Hands or Out of Reach
- Babysitters Brochure
- House Plant Guide
- What Does Your Child See?
- Emergency Action

### Posters

- Child See
- Senior
- Ask First
- Prescription Label
- Expert Help
- Keep Her Safe
- Poison Purse

### Newsletters

- Poison Antidote
- Toxicology Today

# MORE ABOUT EDUCATION

The Utah Poison Control Center has used its Train-the-Trainer program to educate safety advocates in all 12 health districts in the state. We appreciate the efforts of all our partners. To build on this concept, the UPCC has partnered with two health districts to provide targeted poison prevention education. Thank you to the Bear River and Southeastern Utah Health Districts for support in this new outreach education partnership.

## **The UPCC has several age-appropriate educational programs:**

- Poison Safety  
(Pre K through 6<sup>th</sup> grade)
- Medication Safety and Poison Prevention (Seniors)
- Inhalant Prevention  
(4<sup>th</sup> grade through 7<sup>th</sup> grade)
- Young Parent (Teen mothers)
- Keeping Families Safe (Adults)

*Education programs include complete lesson plans with activities, worksheets, and presentation slides. All materials can be downloaded from the UPCC website free of charge.*

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

## **Topics covered in 2009**

**included:** *DEET Facts, Look-alikes, and Child Resistant Containers. This newsletter is available on the UPCC website.*

## PROFESSIONAL EDUCATION

The UPCC participates in education of health professionals and health professional students throughout the state. As a program of the College of Pharmacy, University of Utah, the UPCC plays a pivotal role in the training of future pharmacists in the classroom as well at the UPCC. As a member of the University of Utah Health Sciences, the UPCC staff also plays a key role in the training of emergency medicine residents and pediatric emergency medicine fellows as well as participates in

the training of a variety of health professional undergraduate and graduate students.

UPCC staff precept senior doctor of pharmacy students, emergency medicine residents, and pediatric emergency medicine fellows regularly. In 2009, UPCC staff logged a total of 3,360 contact hours with doctor of pharmacy students as well as 41 contact weeks with residents and fellows including two family practice residents as well.

UPCC education staff also

provides an Outreach Poison Prevention elective to pharmacy students. Since its initial offering in 2002, 167 students have taken the elective providing over 2356 outreach education hours in the community.

The UPCC's professional education programs extend throughout the state. *Toxicology Today* is a newsletter distributed statewide providing health care professionals across the state access to up-to-date and timely toxicology topics.

## TIP

**Want a fun, interactive way to teach children about poisons at home?**

Check out the Tox Mystery House online from the National Library of Medicine at:

<http://toxmystery.nlm.nih.gov>

Sign up on the UPCC home page to receive an electronic copy of *Poison Antidote* and *Toxicology Today*.



"I appreciate that the Utah Poison Control Center is not judgmental. The specialist I spoke with was very understanding and so good to explain things to me. I felt so bad that Nate had gotten into the pills again, but the specialist was so kind and didn't make me feel embarrassed at all."

—Rebecca





## NATE & REBECCA'S STORY

I have an older child that takes seizure medication both day and night. One morning, he forgot to take his pill and left it on his breakfast plate. My younger son, Nate, found the pill and swallowed it. I immediately called the Utah Poison Control Center. The poison specialist told me that Nate would be okay, he'd just be dizzy for about six hours.

About a week later, Nate came into the kitchen with the pill dispenser in his hands—to my horror, it was empty. I tried to remember how many pills had been left in the bottle. I started to panic when I realized he had taken six to nine pills. If one pill had made Nate dizzy for six hours, what would nine pills do to him?

I again called the UPCC. My embarrassment over Nate getting into the pills again was far outweighed by my concern for my son. The specialist never once made me feel bad, he instead calmed me down and told me to take Nate to the emergency room. I asked if I should wait until Nate showed some symptoms, but the specialist told me that there was a chance he could stop breathing and that having a medical professional look at him immediately was the best course of action.

I jumped in the car and got to the emergency room. The poison control center had called ahead, so the doctor was all ready for us. After monitoring Nate for a few hours and letting me know what to expect, the doctor let us go home. Nate was constantly dizzy and didn't sleep for two days, but there was no long-term damage.



## DID YOU KNOW

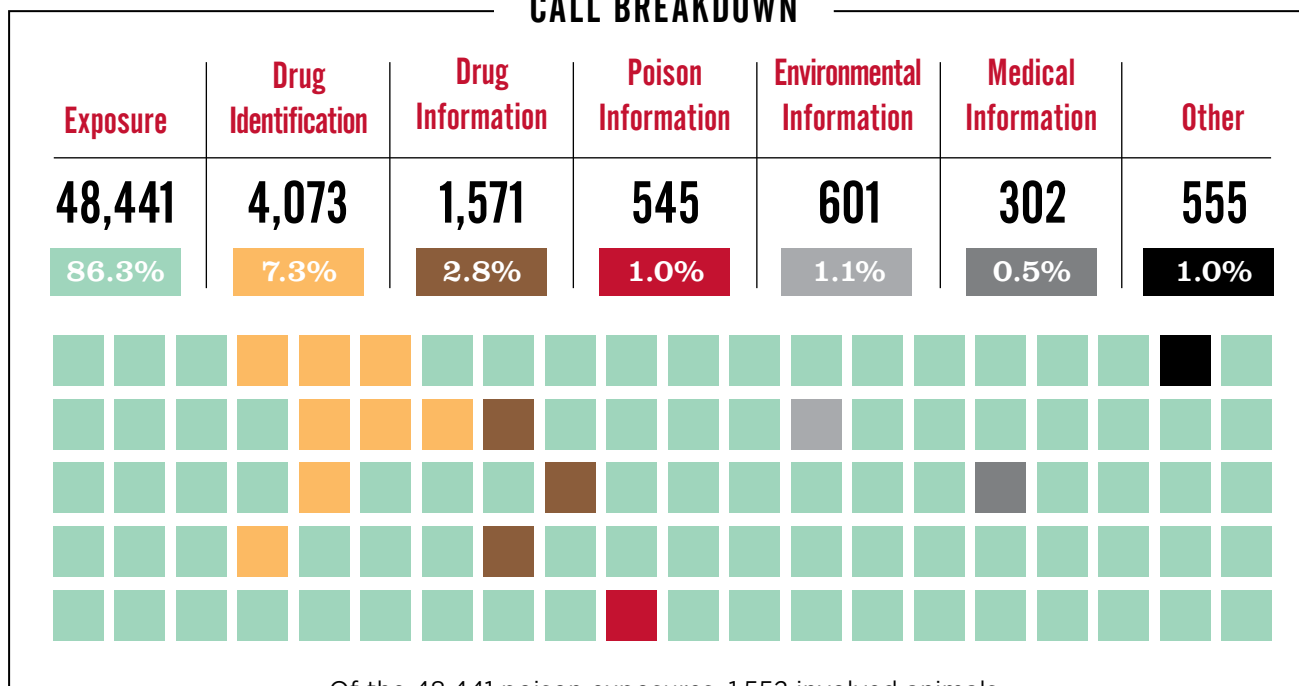
- The majority of veterinary drugs prescribed for small animals are the same or similar to human prescription drugs. Always ask your veterinarian to use child-resistant packaging.
- Magnets in children's toys may be swallowed or aspirated. If more than one magnet is swallowed, the magnets can attract each other through the intestine and potentially cause a blockage, which can be fatal.
- The UPCC receives 500 calls a year regarding glow sticks and other glow products. Glow products contain a chemical that can be very irritating. Handle glow products with care and avoid skin and eye contact with the chemical. Contact the UPCC if someone inadvertently swallows the chemical or it gets on the skin or in the eyes.

# 2009 HIGHLIGHTS & STATISTICS

The Utah Poison Control Center receives an average of 154 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 2009, the Utah Poison Control Center received 56,135 calls.**

## CALL BREAKDOWN



## 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 proportion of poison exposures, it is important to note which substances are most common in this group.

## POISON EXPOSURES

| <6 yrs. | 6-12 yrs. | 13-19 yrs. | 20-59 yrs. | 60+ yrs. |
|---------|-----------|------------|------------|----------|
| 29,692  | 2,473     | 2,487      | 9,629      | 1,835    |
| 63%     | 5%        | 5%         | 21%        | 4%       |

*This table does not include 773 cases with unknown ages.*

## RANKING OF TOP 10 SUBSTANCES

|          |       |                                       |    |                                    |       |                    |
|----------|-------|---------------------------------------|----|------------------------------------|-------|--------------------|
| ALL AGES | 6,870 | Analgesics                            | 1  | Cosmetics & Personal Care Products | 3,747 | CHILDREN UNDER SIX |
|          | 4,364 | Household Cleaning Substances         | 2  | Analgesics                         | 3,597 |                    |
|          | 4,313 | Cosmetics & Personal Care Products    | 3  | Household Cleaning Substances      | 3,401 |                    |
|          | 2,663 | Vitamins & Minerals                   | 4  | Topical Preparations               | 2,190 |                    |
|          | 2,530 | Topical Preparations                  | 5  | Vitamins & Minerals                | 2,183 |                    |
|          | 2,380 | Sedatives, Hypnotics & Antipsychotics | 6  | Foreign Bodies, Toys, Misc.        | 1,763 |                    |
|          | 2,225 | Foreign Bodies, Toys, Misc.           | 7  | Gastrointestinal Preparations      | 1,052 |                    |
|          | 1,989 | Pesticides                            | 8  | Cold & Cough Preparations          | 1,044 |                    |
|          | 1,812 | Cold & Cough Preparations             | 9  | Antihistamines                     | 999   |                    |
|          | 1,725 | Antidepressants                       | 10 | Pesticides                         | 836   |                    |

## TIP

### Disposal of Prescription Drugs

- Do not flush prescription drugs down the toilet unless the label indicates.
- Take advantage of community drug take-back programs.
- If a community program is not available: mix the drug with an undesirable substance such as used coffee grounds, put the mixture in a sealable plastic bag, place in the trash the morning of garbage pick-up.

[www.whitehousedrugpolicy.gov](http://www.whitehousedrugpolicy.gov)

“The Utah Poison Control Center greatly enhances the effectiveness of the services we as a local health department offer to the community.”

—Farrin Wiese





# USEFUL COMMUNITY RESOURCE

It seems like the Bear River Health Department has been associated with the Utah Poison Control Center forever. They have always been so great about providing us with resource materials for our community.

This past year, we've been able to really focus on educating different populations within our community on poison and medication safety issues, specifically the elderly, young mothers, and school children. The UPCC has been invaluable in providing us with information and resources to get the message out. They have helped us with lesson plans, materials, and information for presentations on prescription safety and poison safety in the home, which have been given to retirement homes, schools, and to young mothers.

The UPCC can always answer specific and detailed questions about plants, pills, prescription drugs, or drug interactions. They're always positive and friendly. At the Health Department, we don't have the backgrounds in chemistry or pharmacy to answer specific questions that come up during our presentations or interactions with the community. But we do have a tremendous resource—the Utah Poison Control Center. We can always confidently refer members of our community to the UPCC. I feel 100% confident to hand out poison control's phone number knowing that people will get the answers they need and be treated well.

**—Farrin Wiese**

*Health Promotion Director, Bear River Health Department*

**— Justine Johnson**

*Health Promotion Intern, Bear River Health Department*



## 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 <b>46,889</b> |                 |             |             |             |                             |                      |                   |
|-------------------------------------|-----------------|-------------|-------------|-------------|-----------------------------|----------------------|-------------------|
| Own Residence                       | Other Residence | Workplace   | Public Area | School      | Restaurant/<br>Food Service | Health Care Facility | Unknown/<br>Other |
| <b>41,357</b>                       | <b>2,819</b>    | <b>724</b>  | <b>653</b>  | <b>222</b>  | <b>160</b>                  | <b>116</b>           | <b>838</b>        |
| <b>88.2%</b>                        | <b>6.0%</b>     | <b>1.5%</b> | <b>1.4%</b> | <b>0.5%</b> | <b>0.3%</b>                 | <b>0.3%</b>          | <b>1.8%</b>       |

## TIP

Radon is the second leading cause of lung cancer in the United States. Testing is easy and inexpensive. Order a home testing kit from the Utah Safety Council: [www.utahsafetycouncil.org](http://www.utahsafetycouncil.org)

## 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 (62%). Adult unintentional exposures involved therapeutic errors (taking the wrong dose or wrong medication) as well as eye and skin 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 (79%) 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 (90%). Treatment in a health care facility was provided in 18% of the exposures and recommended in another 2% of patients who refused the referral.

The UPCC was involved in the care of 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.

| BREAKDOWN OF <b>8,502</b> 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 |
| <b>5,508</b>  | <b>1,122</b>   | <b>805</b>                       | <b>750</b>                           | <b>317</b>                       |
| <b>64.8%</b>  | <b>13.2%</b>   | <b>9.5%</b>                      | <b>8.8%</b>                          | <b>3.7%</b>                      |



## MEDICAL OUTCOME

**46,889**

Human exposure  
calls received  
in 2009

**22,451**

Cases judged as  
minimally toxic  
or nontoxic

**24,438**

Cases were  
re-contacted  
for continued  
evaluation

### OF THE 24,438 CASES:

22,669 had minimal or no effect

1,730 had a moderate to major effect  
that usually required treatment in a  
health care facility

39 resulted in death, 21 of these  
were reported by the state medical  
examiner or law enforcement.

*A small percentage of cases were judged potentially toxic, but lost to follow-up due to lack of 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 16.7 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       | 93              | 0.2%             | 14.1       |
| Box Elder    | 813             | 1.7%             | 16.5       |
| Cache        | 1,871           | 4.0%             | 16.4       |
| Carbon       | 428             | 0.9%             | 21.7       |
| Daggett      | 15              | 0.0%             | 15.2       |
| Davis        | 5,283           | 11.3%            | 17.2       |
| Duchesne     | 433             | .9%              | 24.9       |
| Emery        | 204             | 0.4%             | 18.8       |
| Garfield     | 79              | 0.2%             | 15.3       |
| Grand        | 115             | 0.3%             | 12.1       |
| Iron         | 652             | 1.4%             | 13.9       |
| Juab         | 157             | 0.3%             | 15.4       |
| Kane         | 89              | 0.2%             | 13.2       |
| Millard      | 166             | 0.4%             | 12.1       |
| Morgan       | 113             | 0.2%             | 11.4       |
| Piute        | 18              | 0.0%             | 12.2       |
| Rich         | 56              | 0.1%             | 24.0       |
| Salt Lake    | 16,156          | 34.5%            | 15.5       |
| San Juan     | 112             | 0.2%             | 7.2        |
| Sanpete      | 439             | 0.9%             | 15.9       |
| Sevier       | 310             | 0.7%             | 14.9       |
| Summit       | 453             | 1.0%             | 11.2       |
| Tooele       | 1,094           | 2.3%             | 18.5       |
| Uintah       | 555             | 1.2%             | 17.7       |
| Utah         | 9,656           | 20.6%            | 18.2       |
| Wasatch      | 345             | 0.7%             | 14.7       |
| Washington   | 1,880           | 4.0%             | 12.9       |
| Wayne        | 94              | 0.2%             | 34.9       |
| Weber        | 3,641           | 7.8%             | 16.0       |
| Out of State | 1,569           | 3.3%             | -          |
| Total        | 46,889          | 100%             | 16.7       |

## DID YOU KNOW

When asked how prescription narcotics were obtained for nonmedical use, 52% of 12th graders said they were given the drugs or bought them from a friend or relative.

60% of teens who have abused prescription painkillers did so before age 15.

—Partnership for a  
Drug-Free America

# BRADY & BRANDY'S STORY

I had just given my six-year-old son his seizure medication when the phone rang. I put the bottle on the counter for just one moment to answer the call. When I turned back to put the medicine away, I saw my three-year-old, Brady, taking the bottle down from his mouth. He had a white ring around his lips and acted like he had just taken a big swig of the medicine because he let out an exaggerated exhale, “aaahhh.”

I didn't know what to do. Should I take Brady to our doctor or go directly to the emergency room? Then it hit me to call the Utah Poison Control Center. I was in a bit of a panic when I called, but the poison specialist on the line calmed me down and helped me figure out how much medication had been in the bottle.

Together, we figured that Brady had not ingested too much. The specialist assured me that Brady would be okay, but told me to watch him closely for the next few hours, looking for excessive tiredness and stomach aches. I think I finally felt that everything was really going to turn out all right when the specialist called me back in a couple of hours to check on Brady's condition and he was feeling fine.

The Utah Poison Control Center is such a valuable resource. They always have the answers you need and can tell you what you should do in any situation.





“Even when I have called over little silly things that I would be too embarrassed to call my doctor, the UPCC has never been judgmental. They are great to take your worries away or tell you what to do if your kids get into anything.”

—Brandy

## DID YOU KNOW

.....  
Poisonings happen more  
often than car crashes!

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

# THANK YOU STAFF AND

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:

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## In a customer satisfaction survey taken in 2009:

- **98.2%** of the respondents  
rated the UPCC  
specialists as good or  
excellent in terms of  
courtesy, knowledge,  
understanding, and  
helpfulness.
- **98.7%** of the  
respondents rated the  
UPCC overall as good  
or excellent.
- **100%** will call the  
UPCC again.





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