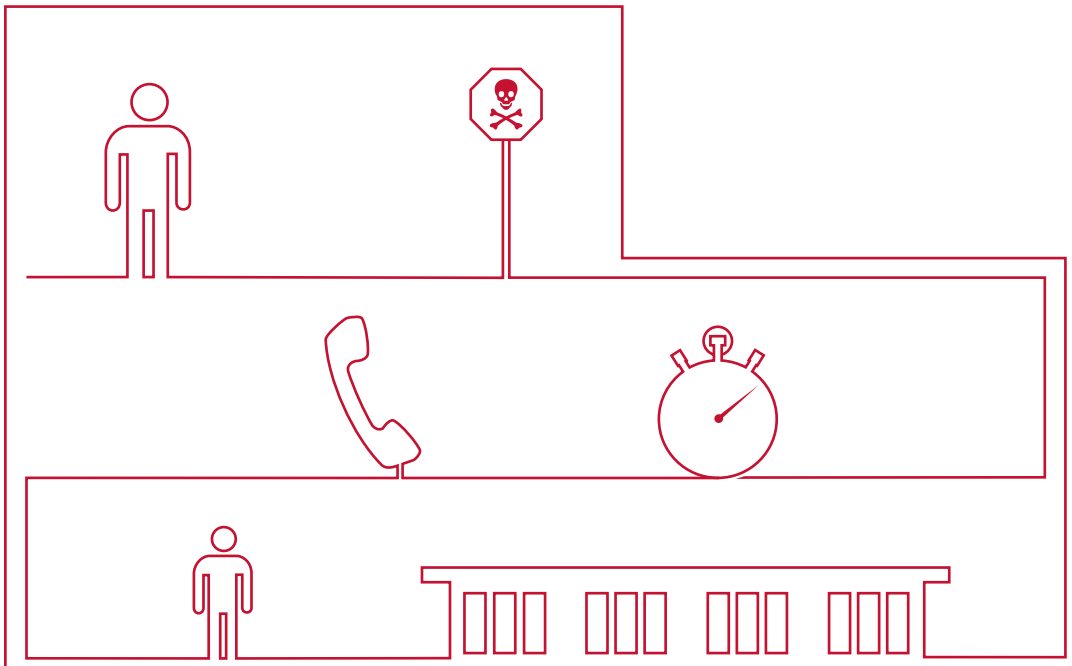

UTAH POISON CONTROL CENTER

2013

ANNUAL REPORT

UNIVERSITY OF UTAH
COLLEGE OF PHARMACY
L. S. SKAGGS PHARMACY INSTITUTE

A HIGHLY CHARGED SITUATION

Marcy
I was in the bedroom folding laundry when Michael, my three-year-old, ran in coughing and spitting and pointing to his mouth. I gave him a hug and asked him if he had swallowed something. He said, "money."

I know that money isn't toxic, so I gave him a drink of water, but Michael kept gagging. I asked him again what he had swallowed. This time he answered, "remote." My older son ran to get the remote. Sure enough, the back was off and the quarter-sized button battery was missing. I called my husband and started looking online to access the severity of the situation.

Spencer
After I hung up with Marcy, I immediately called the Utah Poison Control Center. They told me that we needed to get Michael to the hospital right away. While we were driving there, the poison center called ahead to make sure the emergency department was ready for Michael when we arrived.

Marcy
My few moments online led me to a case of a young child who had swallowed a button battery that had burned a hole through his esophagus and trachea, so I was in a bit of a panic.

Spencer
The doctors in Price took an X-ray that showed the battery lodged deep in Michael's esophagus. They determined that it would be better for specialists at Primary Children's Hospital to handle the case, so they called Life Flight.

Marcy
For me, the flight couldn't get to Salt Lake City soon enough. I had such a sense of urgency that the battery had to get out of Michael's throat now and that things weren't happening fast enough.

Spencer
The procedure took a couple of hours because the battery had already caused so much damage to the tissue in Michael's esophagus. The blackened tissue had to be flushed out before they could get to the battery. It turns out that it's not battery acid that causes the damage, but the positive/negative charge.

Marcy
Five hours after Michael swallowed the battery, it was finally out. We were in the hospital for three days and Michael had to eat through an NG tube for two weeks. He didn't get back to a regular diet for three months.

Spencer
I am so thankful to the Utah Poison Control Center. They helped every step of the way and called back many times to follow up. They even requested the battery that was taken from Michael's throat, so they could do some tests and better understand the danger.

Marcy
I tell people to call the poison center if their kids get into anything. They help you with no judgment when you are at your most panicked state as a parent. In our case, the battery was lodged close to Michael's aorta, so had it been stuck there for too long, it really would have been a life or death situation.

Marcy, Michael, and Spencer

MESSAGE FROM THE DIRECTOR

The Utah Poison Control Center (UPCC) is an essential part of the public health infrastructure in Utah. I am so proud of our excellent staff: the specialists who respond to the poisoning emergencies, the health educators who promote poison prevention strategies and raise awareness to the poison center, and the rest of the team that provide invaluable support to ensuring the UPCC provides exceptional service throughout the state of Utah.

In this annual report we highlight several calls to the poison center in 2013 that remind us of the everyday dangers lurking in and around our homes. Two stories involve plants with attractive fruits that look good enough to eat. One involves a child who ingested a disc battery. Poisonings happen quickly and these stories highlight the role of the poison center in rapidly assessing the poisoning risk and providing prompt referral and treatment recommendations when literally seconds count. The stories also highlight the fact that while the internet has a lot of information, by calling the poison center you get immediate information from experts—our specialists in poison information.

We also recognize our good friends Janet Brooks and Dr. Charles Pruitt who both work tirelessly and advocate for child safety each and every day. We are proud to partner with them on a variety of initiatives including training of pediatrics residents, participation in Utah Safe Kids Coalition, and conducting public health surveillance on emerging pediatric public health threats.

This year was a year with significant change. In March, the UPCC moved to our permanent home within the College of Pharmacy in a brand new secure, state-of-the art facility. I am grateful to Dean Ireland and the entire College of Pharmacy community for their warm embrace of the poison control center. In October, we welcomed Thomas G. Martin, MD, MPH as our new medical director. He brings a wealth of experience to our program.

Despite the fact that poisonings remain the leading cause of unintentional injury deaths in Utah and the United States, our nation's poison centers continually face funding challenges. In an era when health care costs are skyrocketing, poison centers provide a significant value to a variety of stakeholders (see pg. 22). After reading our annual report, I am sure you will agree that the UPCC plays a vital role in protecting Utahns from poisons and is an essential part of the public health infrastructure in this state.

—**Barbara Insley Crouch,** PharmD, MSPH, DABAT
Executive Director, Utah Poison Control Center

UNIVERSITY OF UTAH
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HERE WHEN YOU NEED US MOST

MISSION

Our mission is to prevent and minimize adverse health effects from a poison exposure through education, service and research.

ROUND-THE-CLOCK SERVICE

The Utah Poison Control Center is a 24-hour resource for poison information, clinical toxicology consultation and poison prevention education. The UPCC proudly serves the entire state of Utah and has responded to over 1.6 million cases. It has provided quality, unwavering support and assistance for Utahns since 1954.

WHEN TIME IS OF THE ESSENCE

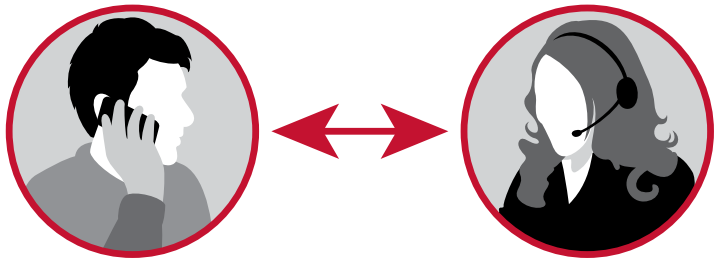
1-800-222-1222

Our nationwide toll-free number routes callers in Utah to the UPCC. UPCC staff is available to respond to calls from individuals with hearing impairment as well as individuals with limited or no English proficiency.

The UPCC serves the public as well as healthcare professionals, pre-hospital providers, public health officials, and law enforcement.

EVERY SECOND COUNTS

Poisons surround our daily lives. Anything can be a poison if it is used incorrectly or by the wrong person. The majority of calls to the UPCC involve ingestion of common household cleaners and medicines, but there are many other types of poisonings that our specialists manage. Internet search engines simply can't assess toxicity. When you call the poison center, you speak immediately with a specialist in poison information, an expert in toxicology who can quickly assess the situation. Don't guess, be sure.



Save Time – Call Us First for the Right Answer!

Janet Brooks
Child Advocacy Manager,
Primary Children's Hospital
Executive Director, Safe Kids Utah

Charles W. Pruitt, MD
Pediatric Emergency Medicine,
Medical Advisor for Child Advocacy,
Primary Children's Hospital

KEEPING CHILDREN **SAFE**

Janet Brooks
My job focuses on injury prevention for children. Even though I work at a hospital, one of the primary goals of Child Advocacy is to keep kids out of hospitals. We do everything we can to prevent tragedies. That's why our partnership with the Utah Poison Control Center is so valuable. The poison center is not only a 24/7 resource for Utah families, they also provide education and information to state and local organizations that protect the safety of our children.

Dr. Pruitt
If Utah families didn't have the poison center as a resource, there's no doubt that many more people would end up in hospital emergency departments. Wait times would increase and costs would go up. I don't think it's too dramatic to say that without the Utah Poison Control Center, some children would die.

Janet Brooks
Doctor's offices, hospital emergency departments, and even 911, all rely on the Utah Poison Control Center for information about poison exposures and drug interactions. They are the experts.

Dr. Pruitt
On just about every one of my shifts, I call the poison center for one thing or another.

Janet Brooks
And the poison center is so willing to go out into the community and work with Safe Kids Utah and other organizations, including schools, law enforcement, and even tribal leaders in rural areas of the state. They train the trainers, making sure organizations and agencies that deal with children are fully prepared to teach local communities about poison exposures and prevention measures.

Dr. Pruitt
The poison center also provides essential child safety advocacy training to University of Utah pediatric residents. The residents sit in on calls with the poison specialists and get the valuable real-world experience of learning how to work with parents who are panicked about the well-being of their children. This insight into a patient's point of view is knowledge that will greatly help residents as they move on to hospital emergency departments or start their own practices.

Janet Brooks
Through the data they compile, the Utah Poison Control Center is the first agency to spot dangerous trends in different geographic areas across the state. This information helps safety organizations, medical facilities, and law enforcement agencies develop plans to handle problematic trends and to prevent the danger from spreading. In short, for too many reasons to list, the Utah Poison Control Center is an irreplaceable resource that is absolutely vital to the safety of Utah's children.

A NEW PLACE TO CALL HOME

In 2013, the Utah Poison Control Center made the move to the 4th floor of the new L. S. Skaggs Pharmacy Institute building on the campus of the University of Utah. Every feature in the beautifully designed, highly sustainable 150,000-square-foot building was built to foster collaboration and creativity among scientists, students, and staff.

THE ATRIUM

The atrium serves as the entrance to the College of Pharmacy and was designed to "bump and buzz" with activity. A large conference room, visualization lab, computer lab, pharmacy café, and lounges foster interactions that drive innovation. A grand stair, ramps, and overhead walkways encourage circulation. On the west side, the floor drops down to create "Giant Steps" that act as an informal gathering space for special events and lectures. The steps also open to the outdoors to provide the College and visitors spectacular and inspiring views of the Salt Lake valley below.

CALL CENTER

The highly trained specialists in poison information (pharmacists and nurses) have ergonomically outfitted workstations that allow for standing or sitting. Each workstation is individually climate controlled—allowing the expert technical staff to function comfortably on long shifts. LCD panels provide up-to-the-moment information for emergency notification and incident management, along with status updates.

WHITE BOARDS

Circulation zone walls are covered in white boards and conceal closets to both maximize storage and provide a place for impromptu sessions of team-based theorizing and problem solving through sparks of creativity.

Collaborative areas with whiteboard

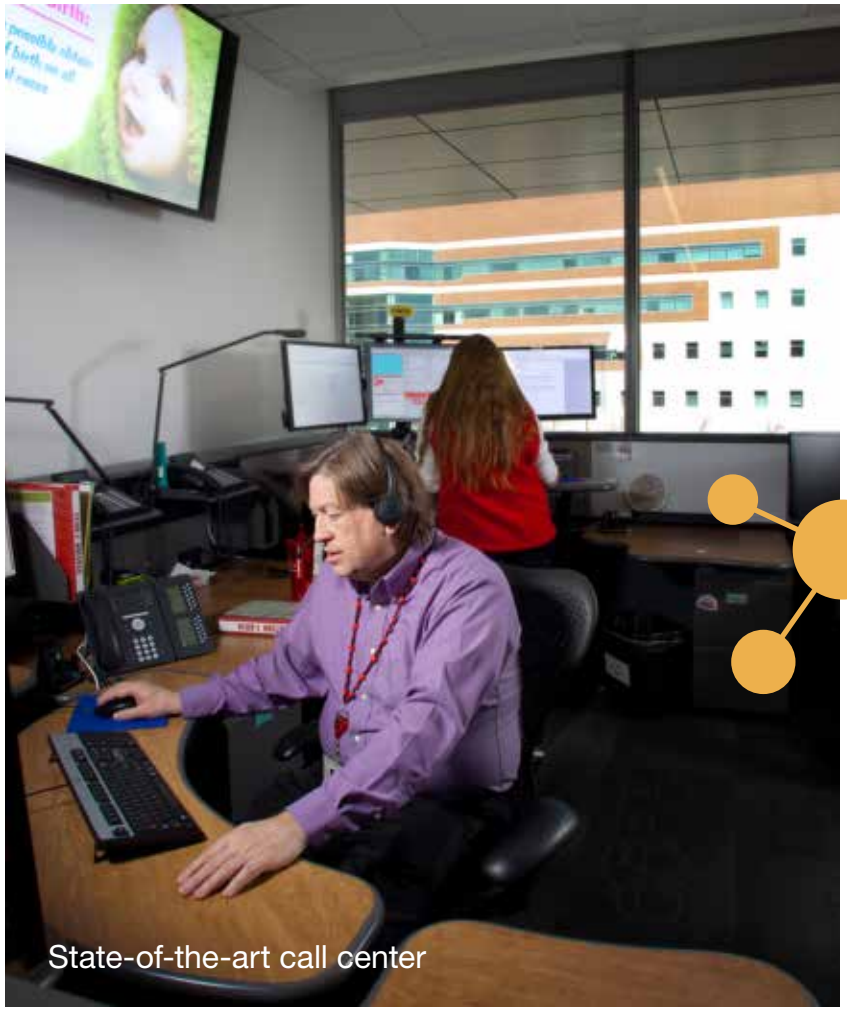
UNITED WE STAND

The Utah Poison Control Center is excited to be in the same building as the College of Pharmacy. The close proximity creates a myriad of opportunities for collaboration, which greatly benefits both entities and ultimately serves the best interests of Utah residents.

The UPCC's safe and secure new home has allowed the center to run with more efficiency. The heart of the new poison control center is the state-of-the-art call center manned by poison specialists who assist Utah families 24/7, 365 days a year. Other highlights of the new space include innovative collaborative areas with white boards and video conferencing capabilities that allow the center's staff and pharmacy students to share information—and even conduct rounds—with other facilities.

The poison control center gains immediate access to the cutting-edge research and clinical applications of the College of Pharmacy. This access allows the poison specialists to have the most up-to-date information, so they can better respond to calls from Utah citizens regarding exposures, drug interactions, and other poison-related issues.

Pharmacy students now have constant contact with the poison center, where they learn about poison prevention and education from the center's expert toxicologists/poison specialists. The information and experience the students gain helps them to become better prepared for their careers as pharmacists and researchers.

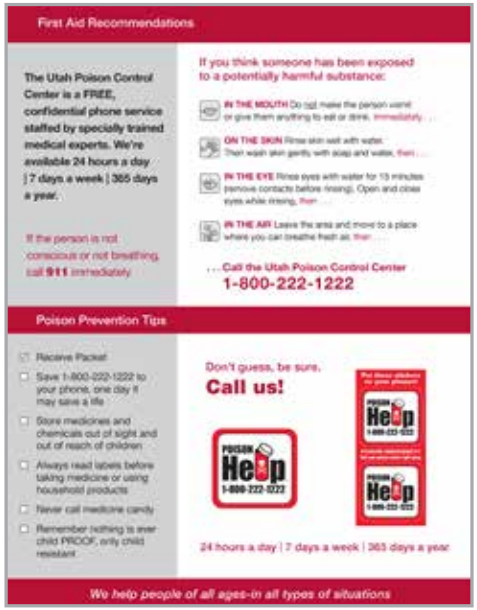

State-of-the-art call center

MAKING A DIFFERENCE ACROSS **UTAH**

A vital part of the UPCC's mission is education. Outreach education efforts focus on ways to prevent poisoning as well as generating awareness to the poison center services. Poisoning remains the most common cause of unintentional injury death, well ahead of motor vehicle crashes. Outreach education efforts are critical to reducing this trend. Understanding community needs is key to successful education programs. Annually, the UPCC analyzes a variety of data sources and published literature to understand the poisoning trends both in Utah and nationally. It's vital that outreach education efforts address current poisoning trends and messages are targeted to the appropriate audiences.

SOCIAL SERVICE

Social media has become a highly utilized communication venue and a great tool that allows us to reach our target audience, including caregivers of small children. That's why the UPCC launched a Facebook® page in November—to interact with Utah citizens and to post important poison prevention messages. Two-thirds of our Facebook® fans are female, but we are hoping more men will follow our poison prevention messages in the future.



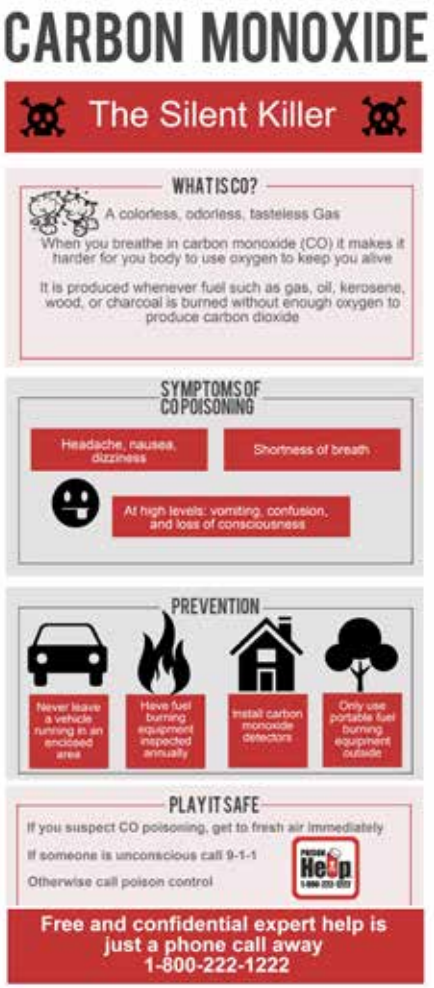
EXPERT ADVICE

The UPCC launched a new brochure called "Expert Advice" that consolidates a number of important prevention messages, including tips and first aid information, into one document. The brochure is available in English and Spanish.

ACTIVE IN THE COMMUNITY

The UPCC provides information to local health districts on poisoning trends in their areas. Examples of health district specific surveillance reports provided in 2013 include: e-cigarettes, opioids, bites and stings, and pediatric poisonings.

An important part of our education program is responding to the needs of the community. In November, a significant carbon monoxide leak at an elementary school in Blanding sent many students, teachers, and staff to the local hospital and clinics for evaluation. The poison center assisted the health care professionals treating the exposed victims. Soon after, the San Juan School District asked for our assistance in helping to educate the community on the dangers of carbon monoxide. Two UPCC staff traveled to Monument Valley and provided a presentation to the community and distributed educational materials, including an infographic on carbon monoxide created specifically for this event.



OUTREACH EDUCATION

The UPCC outreach education efforts are ongoing and include a variety of tools and modalities to meet the needs of the state. In 2013, the UPCC participated in over **175** education events, provided over **775** hours of in-person education through presentations and health fairs and distributed over **225,000** educational materials.

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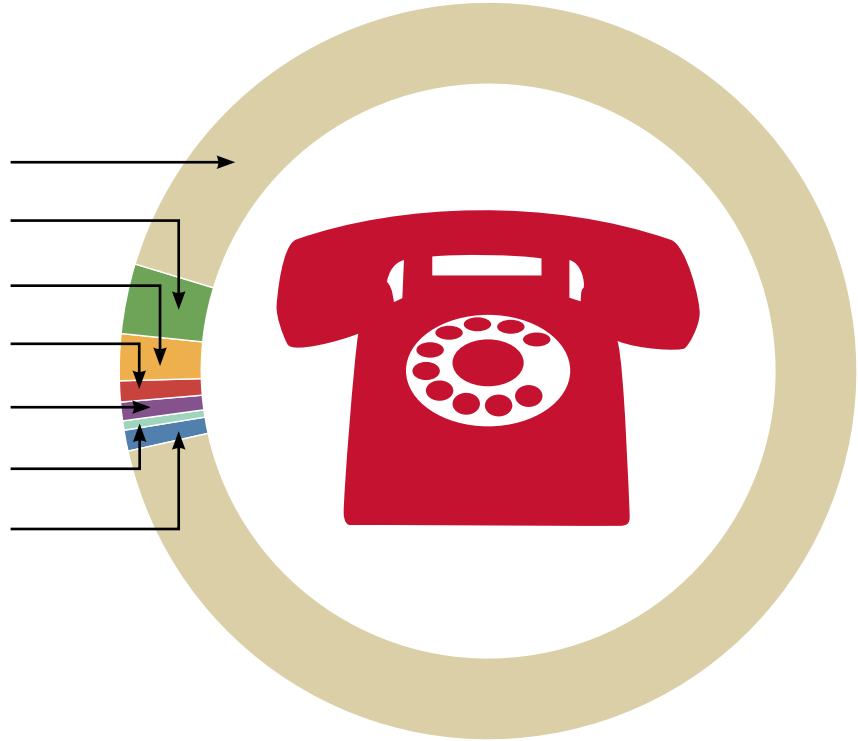
IN 2013, THE **UTAH POISON CONTROL CENTER HANDLED 44,627** CASES

The Utah Poison Control Center receives an average of 122 cases per day. Some are from callers seeking information about the proper use, storage, and precautions regarding drugs and chemicals. But most of the cases are from concerned Utahns and health professionals regarding a poison exposure.

CASE BREAKDOWN

	Number	Percent
Total Exposures	41,048	89.9
Drug Identification	1,333	3.0
Drug Information	897	2.0
Poison Information	406	0.9
Environmental Information	336	0.8
Medical Information	163	0.4
Other	444	0.9

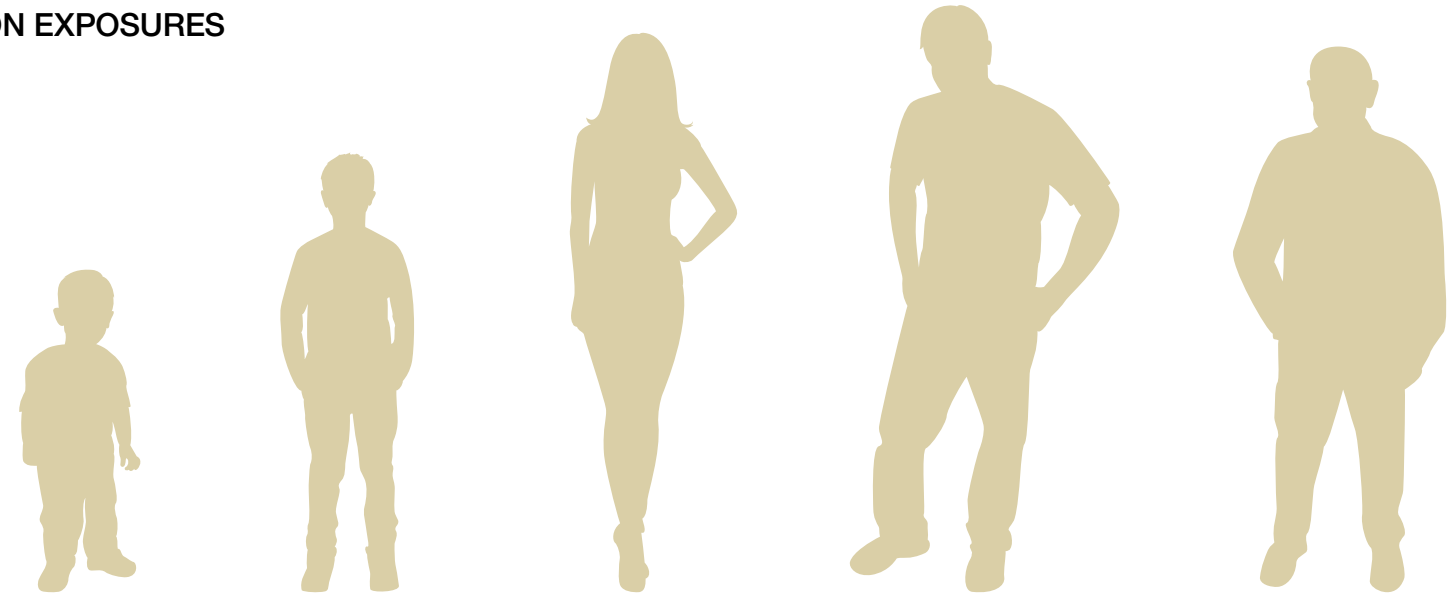


Of the 41,048 poison exposures, **909** involved animals.

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 a poison exposure.

POISON EXPOSURES



< 6 years	6-12 years	13-19 years	20-59 years	60+ years
24,216	**2,365**	**2,268**	**8,367**	**1,891**

TOTAL
39,107

This method does not include the following human exposures:
Unknown age: **145** | Unknown child: **111** | Unknown adult: **776**

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 the substances most common in this group.

RANKING OF TOP **10** SUBSTANCE CATEGORIES

CHILDREN UNDER SIX

	TYPE OF SUBSTANCE	#	%
1.	Cosmetics & Personal Care Products	3,598	14.2%
2.	Household Cleaning Substances	2,925	11.5%
3.	Analgesics	2,824	11.1%
4.	Vitamins and Minerals	1,754	6.9%
5.	Topical Preparations	1,609	6.3%
6.	Foreign Bodies, Toys, Misc.	1,512	6.0%
7.	Antihistamines	920	3.6%
8.	Gastrointestinal Preparations	759	3.0%
9.	Dietary Supplements/Herbals/Homeopathic	720	2.8%
10.	Pesticides	710	2.8%

ALL AGES

	TYPE OF SUBSTANCE	#	%
1.	Analgesics	5,579	12.0%
2.	Cosmetics and Personal Care Products	4,125	8.9%
3.	Household Cleaning Substances	3,897	8.4%
4.	Vitamins and Minerals	2,199	4.7%
6.	Foreign Bodies, Toys, Misc.	1,992	4.3%
5.	Sedatives, Hypnotics, and Antipsychotics	1,957	4.2%
7.	Topical Preparations	1,920	4.1%
8.	Antidepressants	1,758	3.8%
9.	Antihistamines	1,606	3.5%
10.	Pesticides	1,269	2.7%

COUNTY DISTRIBUTION

Poison exposures are a statewide concern. Human exposure calls originated in all 29 Utah counties as shown in the table. Penetrance is the rate of reporting based on the population of each county (rate is per 1,000 population). The UPCC's penetrance of 14.1 is double the national average. This means that Utah has a high utilization of the poison center, thus affording more cost-effective, quality care for Utah residents.

County	Human Exposures	Percent	Penetrance
Beaver	64	0.2%	9.7
Box Elder	534	1.3%	10.5
Cache	1,582	3.9%	13.7
Carbon	289	0.7%	13.5
Daggett	12	0.0%	10.8
Davis	4,448	11.1%	14.0
Duchesne	404	1.0%	20.6
Emery	139	0.3%	12.8
Garfield	77	0.2%	15.0
Grand	95	0.2%	10.1
Iron	514	1.3%	11.0
Juab	123	0.3%	11.8
Kane	71	0.2%	9.8
Millard	174	0.4%	13.8
Morgan	103	0.3%	10.4
Piute	16	0.0%	10.4
Rich	38	0.1%	16.9
Salt Lake	13,706	34.1%	12.9
San Juan	143	0.4%	9.4
Sanpete	346	0.9%	12.3
Sevier	256	0.6%	12.2
Summit	360	0.9%	9.5
Tooele	895	2.2%	14.9
Uintah	466	1.2%	13.5
Utah	7,665	19.1%	14.2
Wasatch	280	0.7%	11.0
Washington	1,450	3.6%	10.1
Wayne	22	0.1%	8.1
Weber	2,945	7.3%	12.5
Out of State	2,922	7.3%	
Total	**40,139**	**100%**	**14.1**

Jessica and Ellie

NOT ALL FUN AND GAMES

Ellie and I always have a lot of fun together. We love to play games, practice the piano, eat, and laugh. Last year, we were out in the backyard at my mom's house. Mom always grows the most wonderful plants and vegetables, so it wasn't a surprise when Ellie found some peas and started eating them. She even shared some with me.

After we had both eaten about four or five, I realized that they didn't really taste like peas. I asked my mom what they were. Luckily, she still had the card that came with the plant, so we found out they were wisteria peas. I had no idea if they were edible or not, but by this time, Ellie started having a tummy ache. I immediately called the Utah Poison Control Center.

The specialist who answered the phone was so calming. I talked through what had happened and how many peas we had eaten. What a blessing to know that we were going to be okay—that I could stop worrying and not take an unnecessary trip to the emergency room. If we had eaten 20 or so, it could have been a much more serious situation. But, with the small amount that we had ingested, we were going to be fine. The specialist did talk me through some symptoms that Ellie and I might feel over the next few hours, which was good to know, so that when we started to feel a little achy, we understood why.

I can't say enough about the amazing customer service of the poison center. I've worked in customer service for 15 years, so I know about great customer service. The poison center exceeded every expectation. They even followed up with a few calls to make sure we were feeling okay—you don't get that from the ER!

It's hard to put into words what the UPCC does for Utah families. It's one of the state's greatest resources. I don't hesitate to call. You can't call your doctor or pharmacist and get immediate, accurate information. Most of the time it's hard to even get them on the phone. In fact, I think most doctors call the poison center when they need quick information about an exposure.

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 39% 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 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, poison exposures happen. As it turns out, the majority of exposures occur when the product is in use.

Exposure Site	Number	Percent
Own Residence	35,152	87.6%
Other Residence	2,249	5.6%
Workplace	697	1.7%
Public Area	545	1.4%
School	314	0.8%
Health Care Facility	111	0.3%
Restaurant/Food Services	86	0.2%
Unknown/Other	985	2.4%

Reason for Exposure	Number	Percent
Unintentional General	23,366	59.21%
Therapeutic Error	4,444	11.07%
Unintentional Misuse	2,721	6.78%
Environmental	1,442	3.59%
Bite/Sting	717	1.79%
Occupational	576	1.44%
Food Poisoning	474	1.18%
Unintentional Unknown	17	0.04%
Total Unintentional	**33,757**	**84.1%**
Suicide	2,700	6.73%
Intentional Misuse	1,162	2.89%
Abuse	598	1.49%
Intentional Unknown	128	0.32%
Total Intentional	**4,588**	**11.43%**
Drug Reaction	778	1.94%
Food Reaction	144	0.36%
Other Reaction	158	0.39%
Total Adverse Reaction	**1,080**	**2.69%**
Tampering	309	0.77%
Malicious	153	0.38%
Withdrawal	65	0.16%
Total Other	**527**	**1.31%**
Unknown Reason	187	0.47%
TOTAL	**40,139**	**100%**

EXPOSURE MANAGEMENT AND TREATMENT

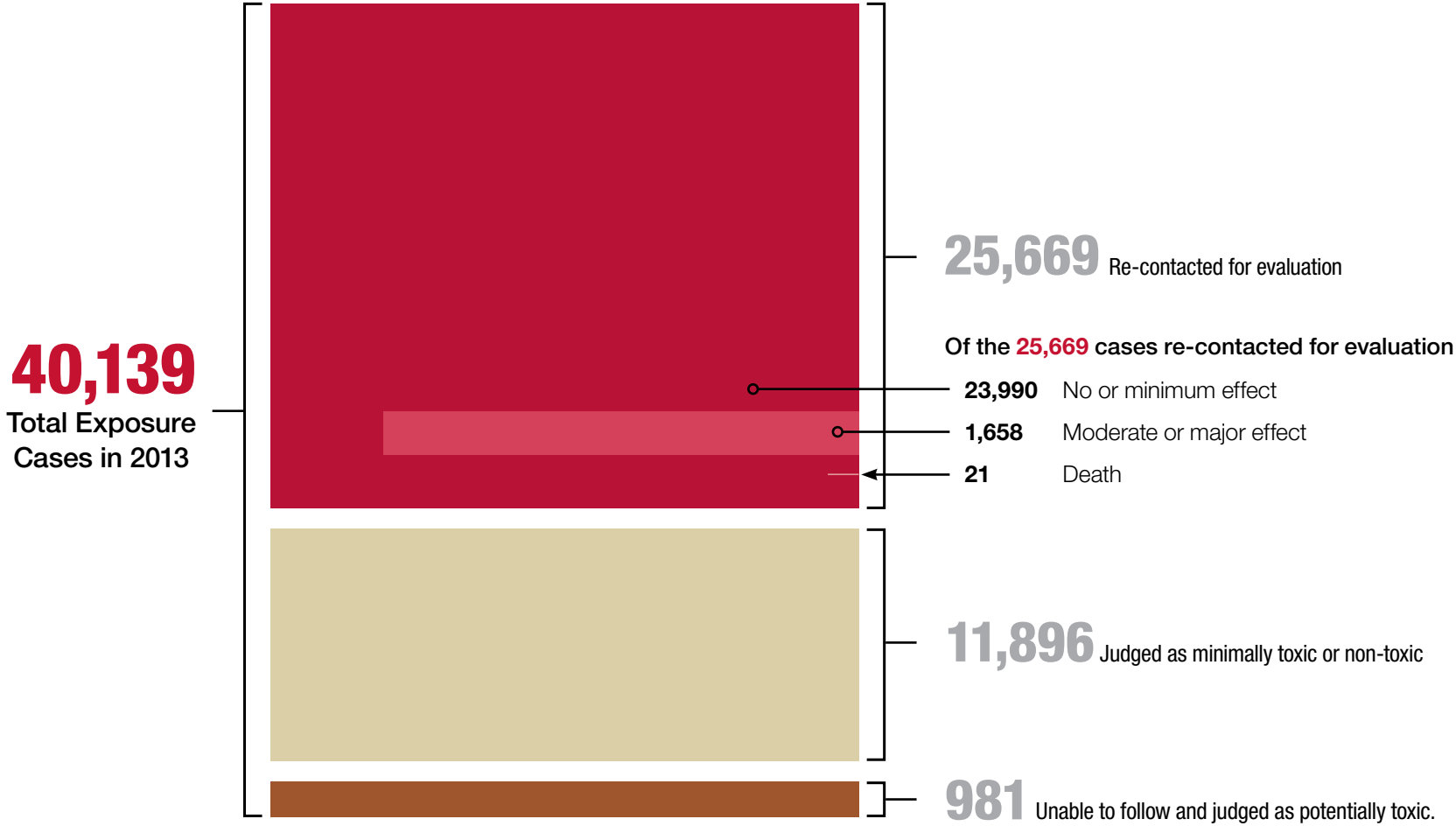
Due to the expertise and efficiency of the UPCC call center, the majority of poison exposures (77%) were managed on site with telephone follow-up. Children less than six years old are even more likely than older children or adults to be managed on site (90%). Treatment in a health care facility (hospital, clinic, and doctor's office) was provided in 20% of the exposures and recommended in another 2% of patients who refused the referral.

The UPCC was involved in the care of more than 8,100 poison exposures that were managed in a health care facility. The majority were successfully treated and released from an emergency department.

Breakdown of 8,103 cases managed in a health care facility.

Management Site	Number	Percent of All Exposures
Treated and released from emergency department	4,968	12.4%
Lost to follow up and or left AMA	1,026	2.6%
Admitted to a non-critical care unit	868	2.2%
Admitted to a critical care unit	792	2.0%
Admitted to a psychiatric facility	449	1.1%
Total	**8,103**	**20.3%**

MEDICAL OUTCOME



THE BEST HEALTH CARE **DEAL** AROUND

The health care debate has spurred a lot of conversation about the high cost of medical care. You may not know that your poison center is the best health care bargain around. Most poison exposures can be treated successfully at home, without a costly emergency department (ED) visit. So, the next time you or a loved one has a possible adverse reaction or poison exposure, a call to the Utah Poison Control Center may save you time and money.

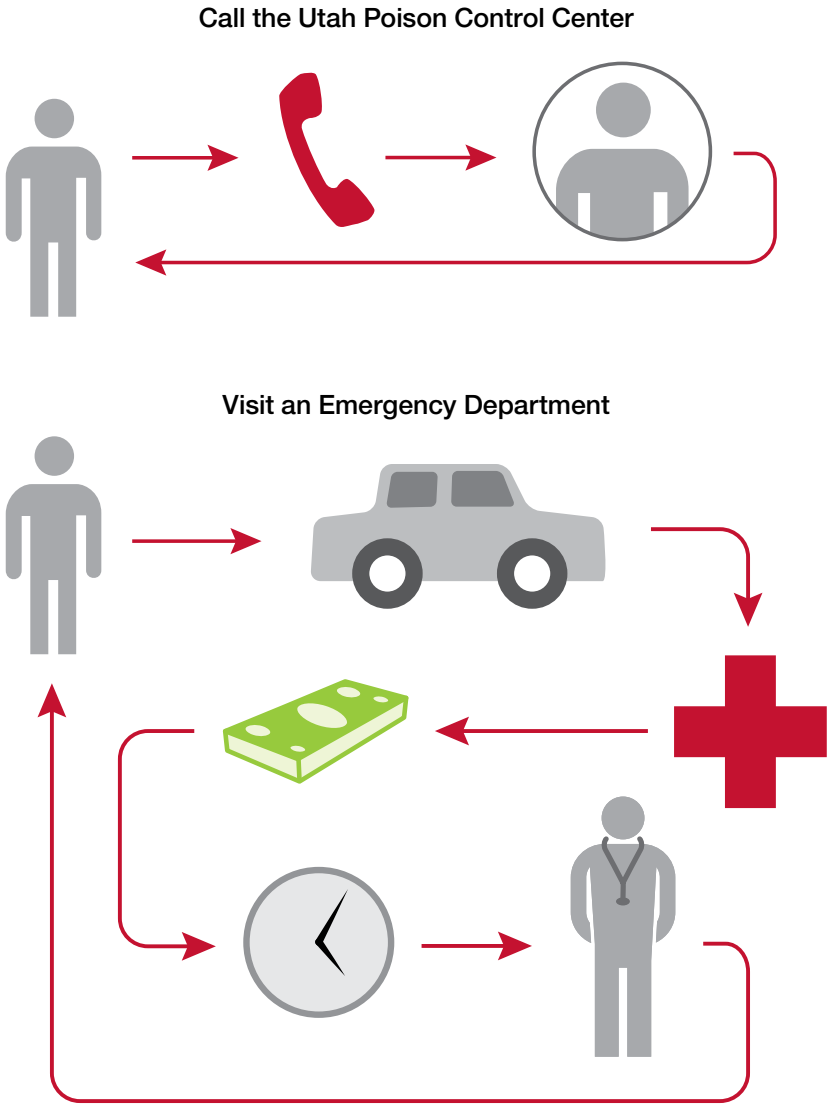
POISON CENTERS SAVE MONEY

For every $1 SPENT ⟶ $13.39 SAVED

Every dollar invested in poison centers saves $13.39 in health care costs and lost productivity!

UTAH SAVES **$24–48Million** EACH YEAR

Assuming $1,000-$2,000 per ED visit.



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*
Brad D. Dahl, PharmD, CSPI*
Thomas J. Davies, PharmD, CSPI*
Michael L. Donnelly, RN, BSN, CSPI*
Brittanie Hatch, PharmD, MS, CSPI*
Christy Hunter, RN, ASN, SPI
Ann S. Lystrup, RN, BSN, CSPI*
Jeannett E. Madsen, RN, BSN, CSPI*
Sandee Oliver, RN, BSN, CSPI*
Cathie Smith, RN, BSN, CSPI*
John R. Stromness, BS Pharm, CSPI*
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*CSPI denotes Certified Specialist in Poison Information

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Stephanie Keller, BA
Kelly Teemant, BS, CHES

Clinical Toxicology Fellow

Amberly Johnson, PharmD, SPI

Additional Medical Toxicology On-Call

E. Martin Caravati, MD, MPH, FACMT
New Mexico Poison and Drug Information Center Medical Toxicologists
Oregon Health Sciences University Medical Toxicologists

SATISFACTION GUARANTEED

99.0% Rated the specialists as good or excellent in terms of courtesy, knowledge, understanding, and helpfulness.

99.5% Rated the UPCC overall as good or excellent.

99.6% Will call the UPCC again.

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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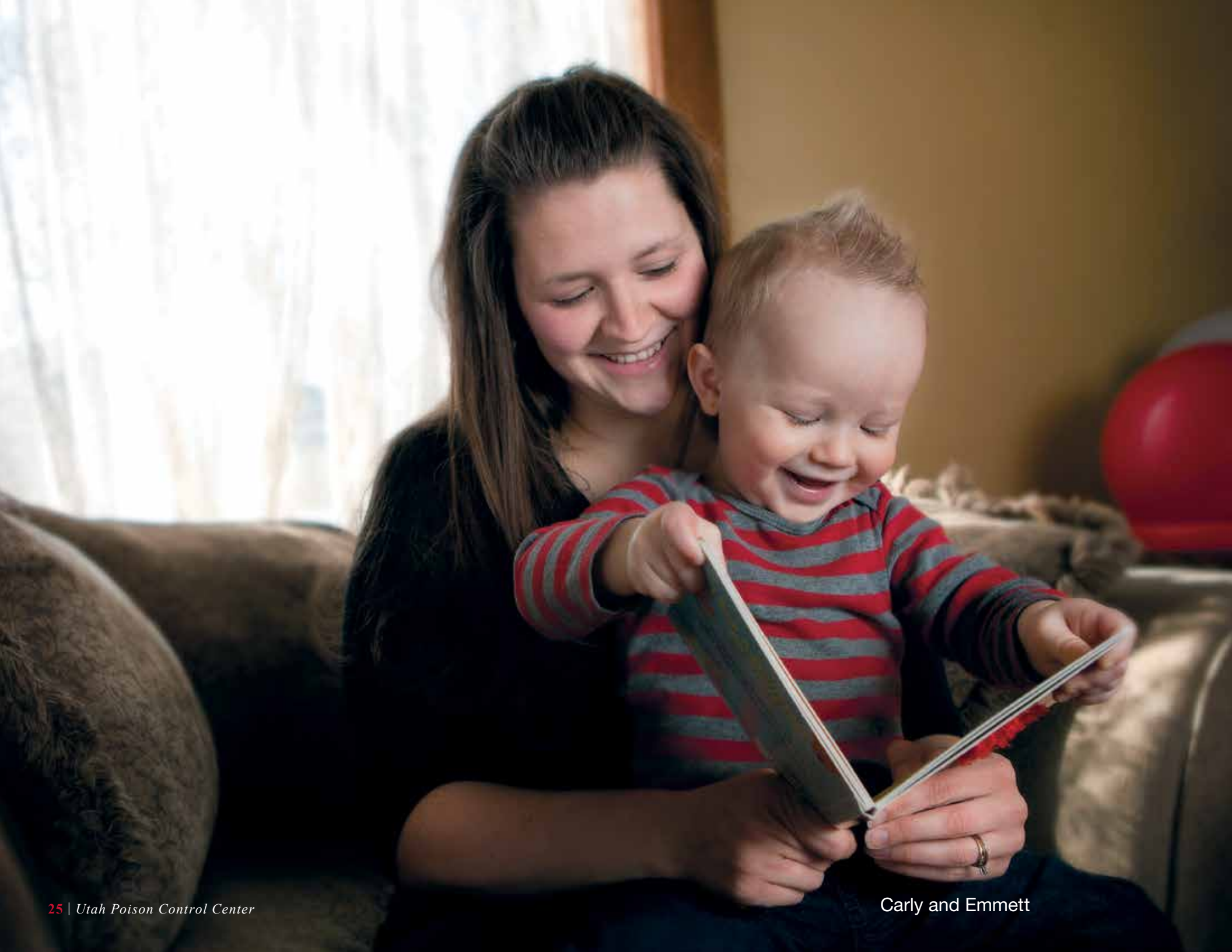

Carly and Emmett

STRAIGHT TO THE SOURCE

My back was turned for maybe 20 seconds. But that's all it took for my one-and-a-half-year-old, Emmett, to find some yew berries and stick them in his mouth. We had stopped by my mom's house to visit and decided to run some errands. As I was buckling my older son in his car seat, Emmett grabbed the berries. First thing I did was get the berries out of his mouth, then I ran inside to look up the berries online and see if they were poisonous.

I knew Emmett hadn't eaten very many, if any, but I was still in panic mode. My online search didn't clear things up. Turns out there are many different kinds of yew berries. Plus, as with most things on the internet, there was contradictory information. Some sites claimed yew berries were very toxic, others not so much. It seemed impossible to tell what was reliable information, so I called the Utah Poison Control Center.

I should have called immediately without wasting a few minutes online. Growing up, we had a magnet on our fridge that had the poison control center's phone number on it, so I've always known what a great resource they can be for situations like mine. I had even called the center a couple years ago when my older son had eaten some grape hyacinths.

The specialist who answered the phone calmed me down, but also got right to business asking me questions about what had happened. After I explained the situation, the specialist told me everything would be okay. I was so relieved. I was told to keep an eye on Emmett for the next few hours and have him drink plenty of fluids, but that he would be just fine. Different people from the center even called me back two or three times throughout the day to check up on Emmett. It was so sweet.

The poison control center is such a valuable resource. It's fast and, unlike the internet, you get reliable information that you can trust. I will definitely continue to call again when I need answers. I even have their number programmed into my phone.

POISON Help®

1-800-222-1222

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