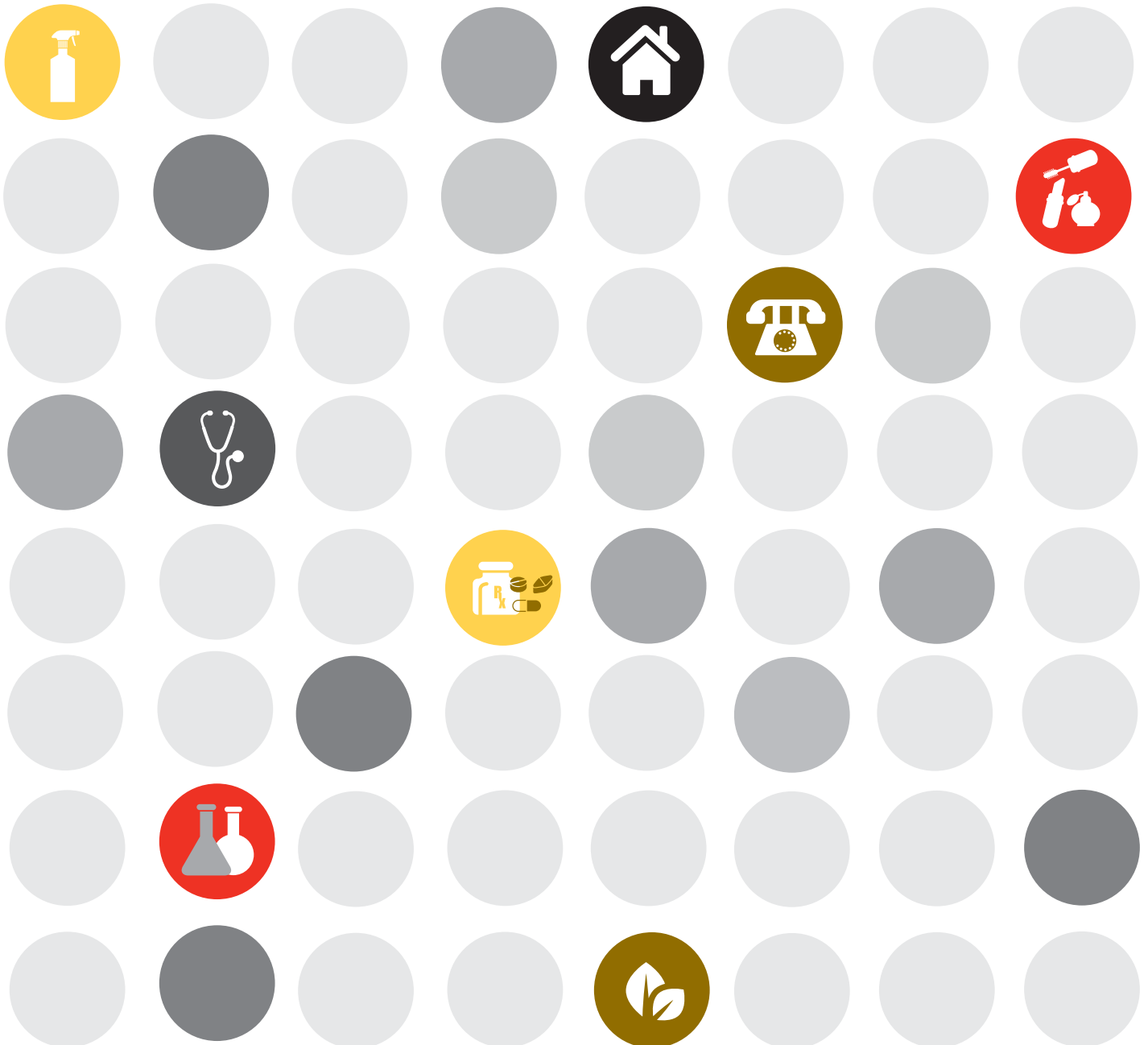




2012-2013 ANNUAL REPORT

CHILDREN • ADULTS • EDUCATORS • BITES & STINGS • HEALTHCARE PROFESSIONALS
MEDICINE • HOUSEHOLD CHEMICALS • PLANTS & MUSHROOMS • DRUGS OF ABUSE





FROM THE DIRECTOR

You've got to find what you love. Your work is going to fill a large part of your life, and the only way to be truly satisfied is to do what you believe is great work. And the only way to do great work is to love what you do. – Steve Jobs

Dear friends,

As I write this at the end of 2013, a year that crystallizes the shared success documented in this annual report, I am reminded what people often tell me: “it’s not just your job--it’s your passion.” Truer words were never spoken. Over thirty years ago I found my niche as an ER nurse answering the “poison phone” at which time a poison center wasn’t much more than a phone and a textbook. I attended my first national toxicology meeting in the late 80s and the rest, as they say, is history.

Very few people are fortunate enough to have a career that engages their passion. I am fortunate to be surrounded by a team of nurses and doctors who are equally engaged and enthusiastic for their work. They share a common vision and showcase their commitment to this vision through dedication to their work and continuous learning to achieve excellent patient outcomes, quality and service. Each and every day in the poison center brings new challenges. The learning process is never complete, no two calls are ever alike, and variety is what keeps it interesting, exciting and challenging.

Together, staff of the IPCC house one of the greatest assemblages of toxicology expertise available in Iowa. Lives are saved every day. And, our services save money too. Last year 90% of the public calls were managed at home, saving Iowans millions of dollars in medical costs by eliminating the expense of unnecessary trips to an emergency department.

We continue to provide responsible stewardship delivering on our promise to provide services for Iowans efficiently and effectively. We answered 47,585 calls and provided an additional 48,480 follow-up calls using the fewest resources possible. A board-certified medical toxicologist is available 24/7 and provides clinical supervision and back-up for the nurses. Additionally, the IPCC employs Poison Information Providers, pharmacy technicians or nursing students, who field information calls that do not involve toxicity. Since payroll makes up over 80% of IPCC’s operating costs, our lean staffing structure and skills-based routing has brought value and efficiency, while maintaining high quality service delivery and excellence in caller satisfaction.

Our financial sustainability takes center stage. It is no secret that the past few years have been very challenging for the IPCC. While increases in state funding over the past couple years was helpful and has brought the level back to our 2009 appropriation, this still fell short of filling the deficit caused by earlier declines in state funding, and more recent declines in federal funding and state grants. We are making progress to strengthen financial stability through new long-term public-private partnerships. We gratefully recognize the Iowa hospitals who have made financial contributions to the IPCC. Efforts to pursue increased funding from state government and private insurance payers have already begun which is critical to ensuring Iowa’s poison center can continue to operate.

The IPCC provides a high return on investment to taxpayers. For every dollar spent on the IPCC, at least \$16 is saved in health care costs. At a time when the focus is on decreasing health care costs while maximizing quality of care, the poison center is a program that epitomizes value, proven efficiency and health care savings.

Finally, I want to extend my sincere thanks and gratitude to our Board of Directors for their valued service and strong leadership. We are also grateful to all of our partners for their continued support. Passion is what drives us to deliver high performance and high quality poison control center services for our state. We look forward to continuing to serve you. •

With Appreciation and Best Wishes in 2014,

Linda B. Kalin

OUR MISSION
TO REDUCE ILLNESS,
DEATHS AND COSTS
ASSOCIATED WITH
POISONING THROUGH
PROVIDING STATEWIDE
24-HOUR EMERGENCY
TELEPHONE ADVICE,
POISON PREVENTION
INFORMATION AND
EDUCATION.

SAVING LIVES AND SAVING MONEY

America's 56 poison centers improve patient outcomes and help reduce health care costs. Poison center staff are uniquely trained to assess, triage, manage and continually monitor patients with a poison exposure at no direct cost to the caller. Multiple studies have demonstrated poison centers save health care dollars by eliminating or reducing the expense of unnecessary trips to an emergency department.

To determine the impact in Iowa, a study was conducted in 2013 (Value of the Iowa Poison Center: Impact on Health Care Costs 2013)* comparing the operating costs of the Iowa Poison Control Center with the costs of alternative sources of poisoning advice and care if the IPCC did not exist. The key findings in this study present clear evidence that the IPCC provides significant health and economic benefits to the State of Iowa and its residents.

- Nearly 90% of calls from the general public are safely managed at home eliminating the unnecessary use of emergency departments, physician offices, and ambulance transports resulting in an annual net savings to Iowa and its taxpayers over \$12 million through cost avoidance.
- If the IPCC was not available, 70% of Iowans would go to emergency departments and 5% would have called an ambulance. 50% of IPCC callers carry private health insurance providing a savings of \$6.2 million to private insurance companies. 46% of callers are covered by Medicaid, Medicare or HAWK-I. Their seeking alternative care would result in additional charges of \$5.7 million to Iowa's Medicaid and Medicare health insurance programs.
- Iowa's health care providers recognize the IPCC is a valuable life-saving resource. Last year 100% of Iowa hospitals utilized IPCC services for expert consultation in poisonings and overdoses. Patients managed with poison center expertise experience shorter hospitalizations on average, helping health care providers serve more patients, improving health outcomes and decreasing health care costs.
- Every dollar spent on the Iowa Poison Control Center saves at least \$16 in health care costs. Based on current data, this is probably an underestimate. Poison centers are as cost-effective as childhood immunizations in their ability to provide cost avoidance in public health delivery.
- The IPCC is funded through a public-private partnership. •

* A copy of the full study can be obtained by emailing Linda Kalin at Linda.Kalin@unitypoint.org. The first cost effectiveness study done in 2004, as commissioned by the Iowa Department of Public Health, specifically focused on the financial effects on Iowa's health care system if PCC services were not available. The study has been repeated intermittently since 2004, and this report represents the 2013 study results.

THE IPCC IS PROVIDING A VITAL SERVICE FOR ALL IOWANS

- Physicians, hospitals, public health departments and the public depend on the IPCC to provide expert medical advice 24 hours a day.
- 75% of calls to the IPCC come from the public and 25% from health care providers.
- 50% of the poisoning cases involve children younger than six years of age.
- Over half of the calls relate to prescription medications, reflecting the nationwide epidemic of abuse, emergency room visits and deaths from such products.
- As the only medical toxicology resource in Iowa, the IPCC educates health care providers in the management of poisonings and drug overdoses.
- Poison center data is used to identify emerging public health threats. In the past few years, poison centers were the first to raise the alarm about synthetic drugs; identified health issues associated with energy drinks and packets of concentrated laundry detergent; and tracked the incidence of specific food-borne illnesses. •

Value of the Iowa Poison Center: Impact on Health Care Costs 2013

Edward Bottei, MD, FCCP, FACMT
Medical Director, Iowa Poison Control Center
State Medical Toxicologist, Iowa Department of Public Health

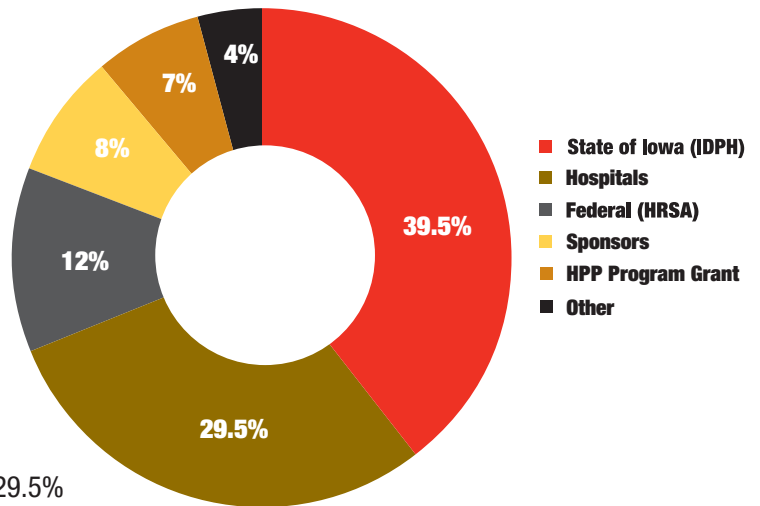
Linda B. Kalin, RN, BS, CSPH
Executive Director, Iowa Poison Control Center

Abstract

Poison control centers are unstably funded and financially threatened despite their proven health and economic benefits. This study compares the operating costs of the Iowa Poison Control Center (IPCC) providing 24-hours-a-day, 7-days-a-week poison control services to the state of Iowa with the costs of alternative sources of poisoning advice and care if the IPCC did not exist. More than 1,600 people who called the IPCC for poisoning advice and were appropriately managed at home were asked what alternative action they would have taken had the IPCC not been available. In order to determine who would be liable for any costs incurred in their management, callers were also asked for their type of insurance coverage. Emergency departments and private physicians' offices were surveyed to determine how they would respond to calls about a poisoning case. The average cost of an emergency department visit, a physician's office visit, and ambulance transportation were determined. Overall, 69% of the callers would eventually arrive at an emergency department (5% of all callers being transported by ambulance), 8% would have gone to their physician's office, and 23% would have been managed at home. It was conservatively estimated that the total charges for these medical services would be \$13,317,038. Comparatively, the costs incurred by the IPCC for managing these same cases was estimated to be \$800,769. This shows a remarkable 16.6 to 1 return on investment. Extrapolating from this data, the IPCC saved the Iowa health care system \$12,516,269 during fiscal year 2012-2013. Access to the IPCC reduces health care costs in Iowa associated with poisonings by appropriately treating the majority of exposures at home.

FINANCIAL REVIEW

Funding shortfalls have continued to take its toll on the Iowa Poison Control Center. We had a lean FY 2013 operating budget of \$1.5 million with year-end operating expenses totaling \$1,247,233 as revenue sources didn't come in as anticipated. While this looks efficient as it is currently operating, it is not fiscally sustainable and puts the IPCC at risk. The Iowa center already operates on a lean and agile staffing model and continues to keep resource use low. The IPCC is working hard on its public-private funding model in order to sustain operations.



State funding through the Iowa Department of Public Health provided 39.5% of IPCC funding. Iowa hospitals contributed to 29.5% of IPCC's revenue. Corporate sponsors, UnityPoint Health and University of Iowa Hospitals and Clinics, provided an additional 8% to fill the budget deficit. Sponsors give considerable in-kind support as well. A federal grant awarded by the Department of Health and Human Services, HRSA, funded 12% and the IPCC received its last year of grant funding from the Hospital Preparedness Program (HPP) to maintain telephone and computer systems.

As a 501(c)(3) nonprofit organization, our annual federal income tax return, IRS form 990, is available for review on our website, www.iowapoison.org.

IPCC'S TOXICOLOGISTS: TWO RARE FINDS

Two physician toxicologists provide daily medical oversight to the IPCC. The medical director, Edward Bottei, MD, is the only board-certified medical toxicologist in the state of Iowa and the associate medical director, Howard Burns, MD, is the only board-certified medical toxicologist in the state of South Dakota. Dr. Bottei is also board certified in internal medicine and critical care and Dr. Burns is also board certified in emergency medicine.

As the full-time medical director, Dr. Bottei provides the day-to-day clinical supervision of the IPCC's 14 toxicology-trained nurses and 4 poison information providers. He also reviews in real-time all of the center's hospital cases and many of the non-hospital cases. Many of the triage and treatment guidelines used by the IPCC staff were developed and are regularly reviewed by Dr. Bottei.

As the associate medical director, Dr. Burns shares on-call responsibilities with Dr. Bottei. One of the two physician toxicologists is available 24-7 for consultation with the poison center's staff or with any health care provider wishing to speak directly with a physician toxicologist.

Dr. Bottei assists in the education of pharmacy students and resident physicians on rotation at the IPCC by reviewing toxicology cases on a daily basis and providing lectures covering a broad range of toxicology issues.

WE ARE ON FACEBOOK



The Iowa Poison Control Center uses Facebook to let Iowans know about current events and interesting facts and how to stay safe from poisons.

Like us – and tell your friends



Poison Center - Call for Help!

Call your Poison Center



Click here to call your poison center

iPhone App available

ALL IN A DAY'S WORK

Are you curious about who calls the Iowa Poison Control Center, and why? The IPCC serves the 3.1 million residents and all 99 counties in Iowa. Each year, our poison specialists handle approximately 50,000 calls. A call can last anywhere from a few seconds to over 10 minutes. Most of the time, the caller can be guided to treat their poisoning at home, avoiding a costly trip to the doctor.

The list below shows real exposure calls from a real 24 hour period chosen at random from the past year. All personal details have been removed to protect our callers' privacy. The people who answer these calls are nurses and doctors who are specially trained to treat all sorts of poisonings: from medicines, plants, household products, industrial chemicals, envenomation, and more.

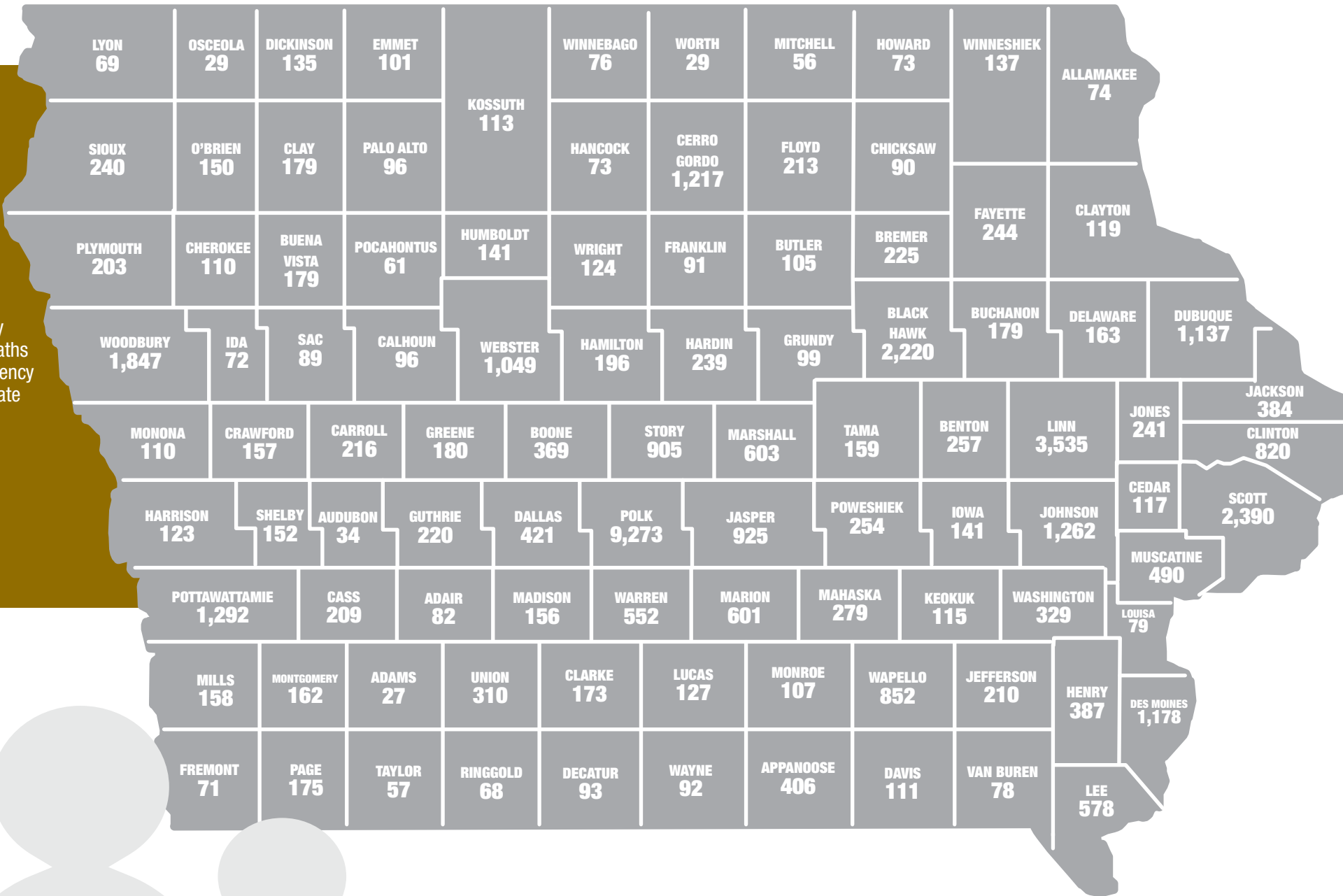
In addition to the 76 incoming exposure calls below, our specialists also made 98 follow-up calls this same day regarding recent cases. The poison specialists routinely follow up with our clients to see if their condition has changed and if further advice is necessary.

ER nurse calling with adult who took intentional OD with cetirizine • 13 month old given double dose of acetaminophen
Adult bitten yesterday by a "poisonous" snake • Nurse calling from ER with intentional lorazepam OD • Nurse calling from ER with adult intentional clonazepam and alcohol OD • ER calling with adult intentional poly-drug OD 2 days ago • Nurse calling from ER with poly-drug OD • 4 y/o drank mouthful of dish soap • Adult sprayed with Round-up 2 days ago and now sick • 18 y/o took extra large dose of Ex-lax for constipation and now sick • Adult calls with questions about anabolic steroid causing acne on his legs • ER nurse calling with adult enroute after getting pool chemical sprayed in face and eyes at work • Mom calling about 19 y/o who took zolpidem instead of fexofenadine and now is hallucinating • Pregnant caller worried about the chemicals at work using to strip the floors with • 4 y/o playing in the seed corn coated with insecticide • 2 y/o ate an Adderall tab • Babysitter calling with 7 y/o with insect bite/sting • 2 y/o spilled lawn fertilizer and playing in it • 23 month old got into pill box and ate a fish oil tab, a vitamin and a nifedipine tab • Doctor calling with 5 day old given adult dose of tetanus/pertussis vaccine by injection • 21 y/o calling about the sanitizer at work causing red skin • Dr. calling from ER with adult who took intentional overdose of oxcarbazepine • Mom calls with 2 y/o eating ibuprofen tab • 2 y/o ate 6 tabs of guaifenesin cough expectorant • 2 y/o drank hair detangler • Nurse line transfers parent of 4 y/o who brushed teeth with acne cream • 11 month old got taste of ant killer • Adult calling about carbon monoxide and sewer gas exposure • Adult calling about brake cleaner in the eye • 2 y/o ate 6 gas relief tabs • 2 y/o ate some silica gel beads • 3 y/o ate 10 acetaminophen melt-away tabs • Dr. calls from the ER with 3 y/o who ate a clonidine tablet • 16 month old drank out of bottle of 91% isopropyl alcohol • 2 y/o ate some toothpaste • senior citizen may have taken her allergy pill twice today • 10 y/o killed a spider and may have gotten a piece of the spider in her mouth • 2 y/o ate some silica gel beads • 20 month old may have put the brush of the topical antifungal liquid in mouth • 3 y/o ate 15 tabs of children's acetaminophen • 14 month old got taste of the powder dishwasher soap • 13 month old got taste of diaper rash cream • senior citizen swallowed some gasoline while siphoning • senior citizen stung by a wasp • ER nurse calling about an intentional poly-drug OD by an adult • 20 month old drank unknown amount of veterinary medicine used to treat animal ear infection • 3 y/o drank the ink out of an ink pen • resident of a chronic care facility took 1 Tbsp. instead of 1 tsp. of cold medicine • 2 y/o drank mouthful of bleach water • ER nurse calling with intentional OD of OTC cough suppressant by a teen • 16 month old spilled can of gasoline and got it on skin and in eyes and mouth • resident of a chronic care facility ate ½ tsp. of pottery plaster • 3 y/o broke the glow stick and got liquid in her eyes • 19 month old ingested 5 tabs of melatonin • Mom calling about 3 y/o and 5 y/o who ingested naproxen • EMT calls from the ER about two 4 year olds who each ate a sertraline tab • Mom calling about 12 month old sprayed by 2 y/o sibling with all-purpose kitchen cleaner • 19 month old got taste of diaper rash cream • 17 month old sucking on nozzle of all-purpose cleaner • ER nurse calling with 10 y/o child who is intention abusing prescription narcotics and ketorolac • 6 y/o child took another dose of 4 tabs acetaminophen for unresolved headache • 2 y/o drank one-fourth of an energy drink • ER nurse calling with intentional OD of irbesartan by adult • adult having shortness of breath after cleaning toilet with bleach and toilet bowl cleaner generating chlorine gas • Mom calling about family of 5 persons that ate chicken not cooked thoroughly • Nurse calling from ER with 14 y/o intentional poly-drug OD • 3 y/o ate 5 tabs of mom's prenatal vitamin • Mom and dad both gave 1 tsp. of acetaminophen to 3 y/o • 7 y/o child took double-dose of his clonidine medicine • 4 y/o child got into grandma's metoprolol, aspirin and bupropion • 17 month old got taste of diaper rash cream • Adult ate a bite of moldy bread • senior citizen took 28 units of his short-acting insulin instead of his long-acting insulin • 62 y/o took her husband's evening meds instead of her own • 10 y/o took ½ tab of acetaminophen with diphenhydramine instead of an extra strength acetaminophen • 2 y/o chewing on the plug-in air freshener packet • adult intentionally took unknown amount of insulin for her high blood sugars

POISON CENTER UTILIZATION BY COUNTY*

Poison Center utilization and awareness of its services directly results in decreased injury or deaths and reduces unnecessary emergency department visits and inappropriate use of medical resources. •

*Human exposures cases and information calls



CAUSES OF POISONING TOP 5



BOARD OF DIRECTORS

FY 12-13

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UnityPoint Health
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Ted Townsend
President and Chief Executive Officer
UnityPoint Health – St. Luke's
Cedar Rapids, IA

Brian White
Assistant Director/Legal Counsel
University of Iowa Hospitals & Clinics
Iowa City, IA

THANK YOU

We would like to thank the Iowa State Legislature, Iowa Department of Public Health, U.S. Health Resources and Services Administration, and our sponsoring organizations Unity Point Health and University of Iowa Hospitals and Clinics for their support this past year. We are also grateful to our hospitals partners listed below who have joined the effort to sustain Iowa's poison control center. Your support will help us continue to advance our mission to improve patient outcomes and reduce overall health care costs to our communities.

Alegent Creighton Health Community Memorial Hospital - Missouri Valley
Alegent Creighton Health Mercy Hospital – Corning
Alegent Creighton Mercy Hospital - Council Bluffs
Allen Hospital, Unity Point Health – Waterloo
Audubon County Memorial Hospital, Audubon
Avera Holy Family Health, Estherville
Baum-Harmon Mercy Hospital, Primghar
Blank Children's Hospital, Unity Point Health - Des Moines
Boone County Hospital, Boone
Broadlawns Medical Center, Des Moines
Buchanan County Health Center, Independence
Buena Vista Regional Medical Center, Storm Lake
Cass County Memorial Hospital, Atlantic
Central Community Hospital, Elkader
Cherokee Regional Medical Center, Cherokee
Clarinda Regional Health Center, Clarinda
Clarke County Hospital, Osceola
Community Memorial Hospital, Sumner
Covenant Medical Center, Waterloo
Crawford County Memorial Hospital, Denison
Dallas County Hospital, Perry
Davis County Hospital, Bloomfield
Decatur County Hospital, Leon
Ellsworth Municipal Hospital, Iowa Falls
Finley Hospital, Unity Point Health – Dubuque
Floyd County Medical Center, Charles City
Floyd Valley Hospital, Le Mars
Fort Madison Community Hospital, Fort Madison
Franklin General Hospital, Hampton
Genesis Medical Center, Davenport
Genesis Medical Center, DeWitt
Grape Community Hospital, Hamburg
Great River Medical Center, W. Burlington
Greater Regional Medical Center, Creston
Greene County Medical Center, Jefferson
Grinnell Regional Medical Center, Grinnell
Grundy County Memorial Hospital, Grundy Center
Guthrie County Hospital, Guthrie Center
Guttenburg Municipal Hospital, Guttenburg
Hancock County Memorial Hospital, Britt
Hawarden Community Hospital, Hawarden
Hegg Memorial Health Center Avera - Rock Valley
Henry County Health Center, Mt. Pleasant
Horn Memorial Hospital, Ida Grove
Humboldt County Memorial Hospital, Humboldt
Iowa Lutheran Hospital, Unity Point Health - Des Moines
Iowa Methodist Medical Center, Unity Point Health - Des Moines
Iowa Specialty Hospital – Belmond
Iowa Specialty Hospital – Clarion
Jackson County Regional Health Center, Maquoketa
Jefferson County Health Center, Fairfield
Jennie Edmundson Hospital, Council Bluffs
Jones Regional Medical Center, Anamosa
Keokuk County Health Center, Sigourney
Knoxville Area Community Hospital, Knoxville
Kossuth Regional Health Center, Algona
Lakes Regional Healthcare, Spirit Lake
Loring Hospital, Sac City

Lucas County Health Center, Chariton
Madison County Memorial Hospital, Winterset
Mahaska Health Partnership, Oskaloosa
Manning Regional Healthcare Center, Manning
Marengo Memorial Hospital, Marengo
Marshalltown Medical & Surgical Center, Marshalltown
Mary Greeley Medical Center, Ames
Mercy Des Moines
Mercy Hospital of Franciscan Sisters, Oelwein
Mercy Iowa City
Mercy Medical Center - Cedar Rapids
Mercy Medical Center – Centerville
Mercy Medical Center – Clinton
Mercy Medical Center – Dubuque
Mercy Medical Center – Dyersville
Mercy Medical Center - N. Iowa, Mason City
Mercy Medical Center - New Hampton
Mercy Medical Center - Sioux City
Mercy West Lakes, West Des Moines
Methodist West Hospital, Unity Point Health - West Des Moines
Mitchell County Regional Health Center, Osage
Montgomery County Memorial Hospital, Red Oak
Myrtue Memorial Hospital, Harlan
Orange City Area Health System, Orange City
Osceola Community Hospital, Sibley
Ottumwa Regional Health Center, Ottumwa
Palmer Lutheran Health Center, West Union
Palo Alto County Health System, Emmetsburg
Pella Regional Health Center, Pella
Pocahontas Community Hospital, Pocahontas
Regional Health Services of Howard County, Cresco
Regional Medical Center, Manchester
Ringgold County Hospital, Mount Ayr
Sanford Hospital Rock Rapids, Rock Rapids
Sanford Sheldon Medical Center, Sheldon
Sartori Memorial Hospital, Cedar Falls
Shenandoah Medical Center, Shenandoah
Sioux Center Comm Hospital & Health Center, Sioux Center
Skiff Medical Center, Newton
Spencer Hospital, Spencer
St. Anthony Regional Hospital, Carroll
St. Luke's Hospital, Unity Point Health - Cedar Rapids
St. Luke's Hospital, Unity Point Health - Sioux City
Stewart Memorial Community Hospital, Lake City
Story County Medical Center, Nevada
Trinity Bettendorf, Unity Point Health - Quad Cities
Trinity Muscatine, Unity Point Health - Quad Cities
Trinity Regional Medical Center, Unity Point Health - Fort Dodge
University of Iowa Hospitals & Clinics, Iowa City
Van Buren County Hospital, Keosauqua
Van Diest Medical Center, Webster City
Veterans Memorial Hospital, Waukon
Virginia Gay Hospital, Vinton
Washington County Hospitals & Clinics, Washington
Waverly Health Center, Waverly
Wayne County Hospital, Corydon
Winneshiek County Memorial Hospital, Decorah •

THE BEST DEFENSE AGAINST POISON EXPOSURES IS EDUCATION

The IPCC conducts multiple outreach activities aimed at educating Iowa populations who need poison prevention information most. Educational materials, presentations, and safety fairs are specifically targeted toward parents with children under age six, educators, health care professionals, law enforcement personnel, and underserved populations including multicultural populations and seniors.

The IPCC partners with other organizations to provide education to their patients, customers, clients, and students. These organizations include hospitals, physician clinics, fire departments, police departments, childcare agencies, pharmacies, Red Cross, Head Start, and school nurses. In all, nearly 75,000 pieces of poison prevention materials (brochures, phone stickers, magnets, posters teachers' packets, videos, and other pieces) were distributed across the state.

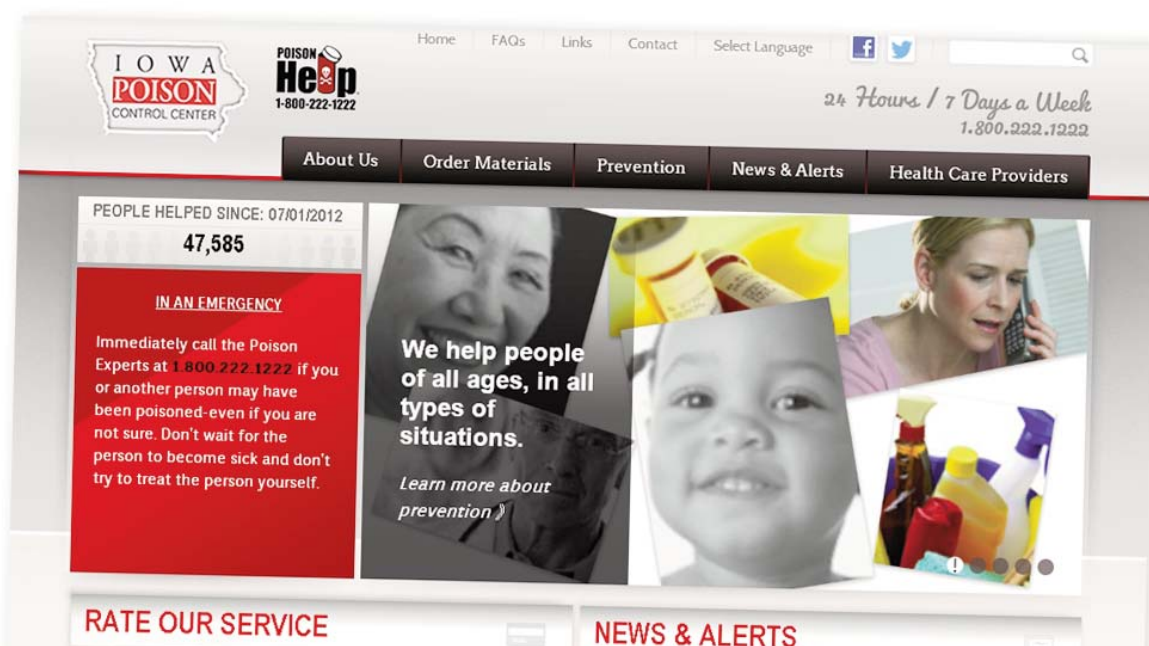
Television, radio, and print news outlets across the state assist in communicating vital information to Iowans. In FY13, IPCC staff conducted 10 media interviews on topics including heroin, mercury, bath salts, carbon monoxide, inhalant abuse, caffeine, national poison prevention week, cinnamon challenge, and summer poison hazards.

With the growing use of prescription and synthetic drug abuse, educational trainings were provided to clinicians from a variety of work and educational backgrounds including medical staff, law enforcement, prosecutors, social workers, substance abuse/mental health clinicians, educators, and parents. 44 Tox Talks were provided to clinicians from a variety of work and educational backgrounds including medical staff, law enforcement, prosecutors, social workers, substance abuse/mental health clinicians, educators, and parents in FY13. Dates of upcoming Tox Talks are posted at www.iowapoin.org under the health care provider tab.

The IPCC also serves as a five-week clinical rotation site for Doctor of Pharmacy students from Drake University and University of Iowa. IPCC staff also assists in the training of nursing students, resident physicians, and visiting physicians in various subspecialties of medicine.

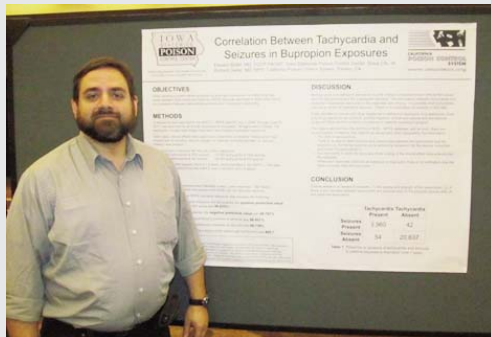
A monthly electronic newsletter "Poison Hotline," distributed to over 700 health care providers statewide, provides timely information on clinical toxicology topics. Past Poison Hotline articles are archived on the website under the health care providers tab. Contact the IPCC Education Coordinator to subscribe to the e-newsletter. •

The IPCC website, www.iowapoin.org, has recently been updated. The new design and improved functionality enhances our visitor's experience. On the home page, a feature box rotating through three large photos and captions calls visitors' attention to prominent and timely news items. The improved design and content organization also helps visitors better navigate the site to find the information they need. In the event of a local or national poisoning emergency, a "news and recalls" feature has been added to quickly notify visitors of situations involving a poison hazard. •



TOXICOLOGY POSTER PRESENTED AT THE NACCT CONFERENCE

Ed Bottei, MD, FCCP, FACMT, Medical Director of the Iowa Poison Control Center presented a poster to his peers at the annual meeting of the North American Congress of Clinical Toxicology (NACCT) conference held in Las Vegas, NV October



1-6, 2012. Co-Author, Richard Geller, MD from the California Poison Control System, provided statistical analysis for the study. The NACCT annual conference provides an opportunity for physicians, pharmacists, nurses and scientists from around the world to participate in the sharing of information on a wide variety of toxicological issues. The poster was titled "Correlation Between Tachycardia and Seizures in Bupropion Exposures"

FY 12-13 FATALITIES

The deaths listed below (<1% of all human exposures) are those cases reported by health care facilities to the IPCC for management of a suspected poisoning where the IPCC received confirmation of a fatal outcome. In those cases where several substances were ingested, the cause of death is ascribed exclusively to the substance that was deemed to have had the most toxic effect. The relatively small number of deaths reported to the IPCC does not accurately represent the true extent of poisoning as a cause of acute injury and death in the state. Poisoning-related deaths continue to rise at the national level. There are several reasons that the majority of death cases may go unreported to the IPCC. Patients that are found dead on arrival or whose history indicates treatment with a known EMS protocol may not be reported to the IPCC by first responders, law enforcement, medical examiners or other health care providers. Overdoses of abused substances may also go unrecognized as a poisoning case.

- 61 y/o female, bupropion, amitriptyline, citalopram
- 86 y/o female, natural gas
- Unknown age male, hydrogen sulfide
- 54 y/o male, losartan, lorazepam, metformin, hydroxyzine, potassium, famotidine, clindamycin, aspirin
- 19 y/o male, tramadol, sulfamethoxazole/trimethoprim
- 52 y/o male, hydrocodone/acetaminophen, alprazolam
- 55 y/o male, verapamil, lisinopril, alcohol
- 53 y/o female, diltiazem
- 86 y/o female, hydrocodone/acetaminophen, isosorbide, amlodipine, doxazosin, escitalopram, warfarin, furosemide, levothyroxine, potassium
- 75 y/o female, flecainide
- 45 y/o female, ephedrine, venlafaxine, hydrocodone, duloxetine
- 61 y/o male, ropinirole, ethylene glycol, metoprolol, clonazepam, lorazepam
- 50 y/o female, quetiapine, hydrocodone/acetaminophen
- 24 y/o male, diphenhydramine, melatonin
- Unknown age adult male, chloroform
- 60 y/o male, paroxetine
- 55 y/o male, aspirin, olanzapine, naproxen
- 40s female, methadone, alprazolam
- Unknown age female, morphine, alprazolam
- 35 y/o male, tramadol
- 89 y/o female, strychnine
- 32 y/o male, zolpidem, alcohol, methamphetamine, carbon monoxide, escitalopram



47,585
CALLS ANSWERED by
Iowa's Poison Center

24%

Calls MADE BY A DOCTOR, NURSE OR PHARMACIST seeking treatment advice related to poisoning exposures



5 to 10 p.m.
Peak call volume



49%
Calls concerning a CHILD UNDER 6 YEARS OLD

87%

Calls from the public MANAGED AT HOME



48,480

FOLLOW UP CALLS made by Iowa's Poison Center

\$12.5 million

COST SAVINGS to Iowa and its residents

CONSULTANTS

The IPCC maintains a relationship with a number of expert consultants in many areas related to toxicology should a question be found that our usual and customary resources cannot handle. We would like to acknowledge their contributions to the program.

Iowa Department of Public Health

Michele Catellier, MD
Rebecca Curtiss
Randal Dahlin
Ann Garvey, DVM, MPH, MA
Rita Gergely
Julia Goodin, MD
Dennis Klein, MD
John Kraemer
Patty Quinlisk, MD, MPH
Stuart Schmitz, MS, PE
Ken Sharp, REHS

Iowa Department of Natural Resources

Kathy Lee

Iowa State University

Steve Ensley, DVM
Leonor Leandro, PhD

Siouxland District Health Department

Michelle Clausen-Rosendahl, MPH,
REHS
Kevin Grieme

State Hygienic Laboratory

Chris Atchison, MPA
Don Simmons, PhD
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St Luke's Regional Medical Center (Sioux City) Pathologists

Mike Kafka, MD
Julie Breiner, MD
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James Quesenberry, MD

TESTIMONIALS

"The poison center is very, very helpful. You kept me from rushing to the emergency room and I'm grateful for that." – Father, Plymouth county

"I would be lost without the poison center. In situations when you need answers right away it is good to have the poison center available." – EMT, Humboldt county

"Every time I have called, they know what they are talking about and they know how to keep me calm when I'm freaking out." – Grandma, Delaware county

"The poison center is my first resource when I need help identifying a pill, and the majority of the time they can identify the pill for me. They make my job much easier." – Police Officer, Wapello county

"I am a nurse so I have a background with medications but I didn't have my 'nurse' hat on, I had my 'Mom' hat on and I was in a panic. The poison specialist I talked to was fantastic, very reassuring and calming. Please let her know that." – Mother, Jefferson county

"A BIG thank you to everyone at the poison center for your assistance in the care and treatment recommendations for this patient (with a life-threatening overdose)." – Critical Care Nurse, Dubuque county

DID YOU KNOW?

One tablet of some medicine or a small mouthful of some chemicals is enough to cause life-threatening injury or death to a toddler. Some particularly dangerous drugs and chemicals include:

- Pain medicine
- Blood pressure and heart rhythm medications
- Antidepressants
- Oral diabetic medications
- Iron supplements
- Anti-freeze and windshield washing fluid



The Iowa Poison Control Center is available to every Iowa resident through a toll-free telephone number, 1-800-222-1222. Non-English speaking callers are supported by interpreters who are conferenced in by phone on a moment's notice.

IOWA POISON CONTROL CENTER
401 Douglas St., Suite 215
Sioux City, Iowa 51101

24-HOUR POISON INFORMATION AND EMERGENCY
1.800.222.1222

ADMINISTRATION 712.279.3710

FAX 712.234.8775

EDUCATION
Sioux City 712.279.3717

WEB SITE
<http://www.lowapoison.org>

Nationally accredited by the American Association of Poison Control Centers

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