



# Poison HOTLINE

Partnership between UnityPoint Health and  
University of Iowa Hospitals and Clinics

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*Did you know .....*

In order to accurately assess risk of liver toxicity after an acetaminophen (APAP) ingestion, an APAP level needs to be obtained at least 4 hours post ingestion. APAP levels obtained before 4 hours post-ingestion may not reflect complete absorption of the APAP and cannot be used to predict the toxic effects of APAP or the need for antidotal therapy with n-acetylcysteine. Repeat APAP levels may be needed if medications that slow GI tract motility, such as opioids or anticholinergics (e.g. diphenhydramine), were co-ingested with the APAP, or if a sustained-release APAP product was ingested. Repeat levels may be needed if the time of ingestion is unknown to make sure the APAP level is not rising.

## Wild Mushrooms

Wild mushrooms are common in the Midwest. Mushrooms grow during cool, moist weather and are most abundant in spring and fall. The IPCC receives the majority of its calls about the ingestion of wild mushrooms in the late spring and early summer. Many of the calls to the IPCC involve children who taste or ingest mushrooms they find in the yard. Any time an unidentified mushroom is ingested, there is the potential for serious, possibly life-threatening poisoning since dangerous mushroom species exist in Iowa.

Definitive identification of a wild mushroom takes a trained mycologist. Poison center nurse specialists cannot identify a mushroom over the telephone. No studies have been published that prove that a mushroom can be definitively identified by non-mycologists using pictures from a book or from the internet. Most children who ingest unknown mushrooms found outside the home are referred into the emergency department for a dose of activated charcoal, provided that it has been a recent ingestion. If the child remains asymptomatic, the poison center nurse specialists will continue to follow the patient after their discharge from the ED. Any child who develops symptoms will be referred to the ED and needs to be monitored until resolution of symptoms. Depending upon the type and duration of symptoms, further follow up may be needed as certain poisonous mushrooms can have a delayed onset of effects.

Adults can also be the victim of mushroom poisoning. Most of the time, the adult has intentionally eaten the mushrooms because they have mistaken a poisonous mushroom for an edible mushroom. Sometimes adults will eat wild mushrooms after being dared to do so. These cases have the potential to be quite serious because the patient may have eaten a large quantity of one or more different types of poisonous mushrooms. These patients, not realizing a poisonous mushroom has been ingested, may not seek medical attention until they have become severely ill. Treatment in these cases is mainly supportive. Specific therapies may be indicated if certain specific types of mushrooms are suspected to have been ingested.

For questions regarding the ingestion of wild mushrooms or management of a wild mushroom ingestion, contact the Iowa Poison Control Center immediately at **1-800-222-1222**.

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Certified Specialist in Poison Information*

**POISON**  
**Help**  
  
**1-800-222-1222**

Post and share this edition of **Poison Hotline** with your colleagues. Send comments or questions to Poison Hotline, 712-234-8775 (fax) or [Tammy.Noble@UnityPoint.org](mailto:Tammy.Noble@UnityPoint.org). To subscribe or unsubscribe from this distribution list, contact the IPCC education office at 712-279-3717. Read past issues of **Poison Hotline** at [www.iowapoisson.org](http://www.iowapoisson.org).