

WHEN LIFE HAPPENS...

Poison centers are ready 24/7 with fast, free advice.

I ate something that made me sick!

I splashed cleaner in my eye.

My child swallowed a button battery.

A snake bit me.

Our carbon monoxide alarm is going off!

My baby ate rat poison.

I took my medicine twice.

WHEN YOU HAVE QUESTIONS, OUR EXPERTS HAVE ANSWERS

PREPARE

Save the Poison Control number 1-800-222-1222 in your phone in case of an emergency.

PREVENT

More than 90% of poisonings happen in the home. Take steps to make your home safer.

PROTECT

Seconds count! If you suspect a poisoning, don't take a chance. Call us right away.

2021 Annual Report

Wisconsin Poison Center, located in Milwaukee, is a valuable statewide resource that provides 24-hour, toll-free poison information. Statistics from 2020 illustrate our mission to consistently deliver comprehensive and accurate information to callers from any potential poison or drug. For more information, please visit wisconsinpoison.org.

24-hour hotline: 1-800-222-1222



**Wisconsin
Poison Center**

Wisconsin Poison Center Achieves National Reccreditation

In 2020 the Wisconsin Poison Center (WPC) was awarded national reccreditation by the American Association of Poison Control Centers. This reccreditation followed months of preparation and hundreds of pages of documentation. All members of the leadership team were involved in writing a portion of the application, each addressing their area of oversight.

Information required in the application was divided into the following subsections:

Center Infrastructure

- Description of communication technology adequate to receive calls statewide
- Demonstration of 24/7 operations
- Description of a process that could be implemented during unplanned loss of WPC telephone service to ensure callers could still receive expert recommendations
- Demonstration of the WPC's ability to upload patient data to a national poison data repository

Staffing

- Call center staffing: demonstration that the number of staff working reflects WPC case volumes and that the center had the appropriate mix of poison center specialists, adhering to national guidelines
- Documentation demonstrating the availability of physician toxicologist for WPC staff or physician-to-physician consultation

Patient Management and Oversight

- List of physician toxicologists available 24/7
- Availability of Micromedex, an important treatment resource, updated in-house medical guidelines providing treatment recommendations, electronic medical references
- List of local consultants (mycologists, herpetologists, occupational and environmental health experts) available to help with the determination of medical guidance for all callers
- In-house guidelines recommending follow-up of the patient to ensure most effective treatment and optimal patient outcome

Quality

- Explanation of how quality of patient management is monitored and achieved
- Demonstration that case documentation, management and follow-up in the medical record is appropriate
- Demonstration of updated clinical guidelines
- Documentation of process used to update policies and procedures in a timely fashion

Public Education

- Credentials of public educator
- Community assessment for poison prevention education
- How education was provided
 - dates and times of programs
 - program evaluation
 - description of network partner organizations, such as DHS, law enforcement, EMS, Safe Kids, etc.



Health Care Provider Education

- Credentials of individuals providing professional education
- Description of medical education curriculum and of those who participated
- Dates of external programs for health care professionals and credentials of those who provided them

Data and Surveillance

The National Poison Data System (NPDS) is a repository used to collect and store information from every poison center and patient case that is uploaded to its server. NPDS facilitates data sharing between organizations, such as other accredited poison centers, the Centers for Disease Control (CDC) and state public health organizations, which may help to identify the emergence of poison hazards. The information can also be used to guide poison education programs for the public.

- The WPC must demonstrate that the electronic health record used in the center is compatible with NPDS, that each staff member knows how to enter data into the

health record and that the technology exists to update the electronic health record process.

Leadership and Management

Credentialing ensures that the required educational level has successfully been attained for each role. This may include the following credentials:

- **MD** – a physician who is board certified in toxicology. The physicians teach the toxicology students and other learners, while providing backup to staff who answer the emergency calls.
- **DABAT** – a nurse or pharmacist who has earned credentials from the American Board of Applied Toxicology. These individuals work in conjunction with the physicians.
- **CSPI** – RN or pharmacist that is a nationally Certified Specialist in Poison Information. Each CSPI is required to re-certify every 7 years and earn 16 hours of continuing education annually. Most of the staff who answer the emergency phone calls are CSPIs.
- **SPI** – RN or pharmacist Specialist in Poison Information who has not yet met the criteria to qualify to take the national certification exam. A SPI must work 2000 hours in order to qualify to take the exam and earn 16 hours of continuing education annually. These individuals also answer the emergency phone calls.
- **MBA** – Master's degree in Business Administration, held by the WPC Manager
- **MPH** – Master's degree in Public Health, held by the WPC Educator
- **RN** – a registered nurse or RPh, registered pharmacist, degree required for those hired to answer the emergency phone calls

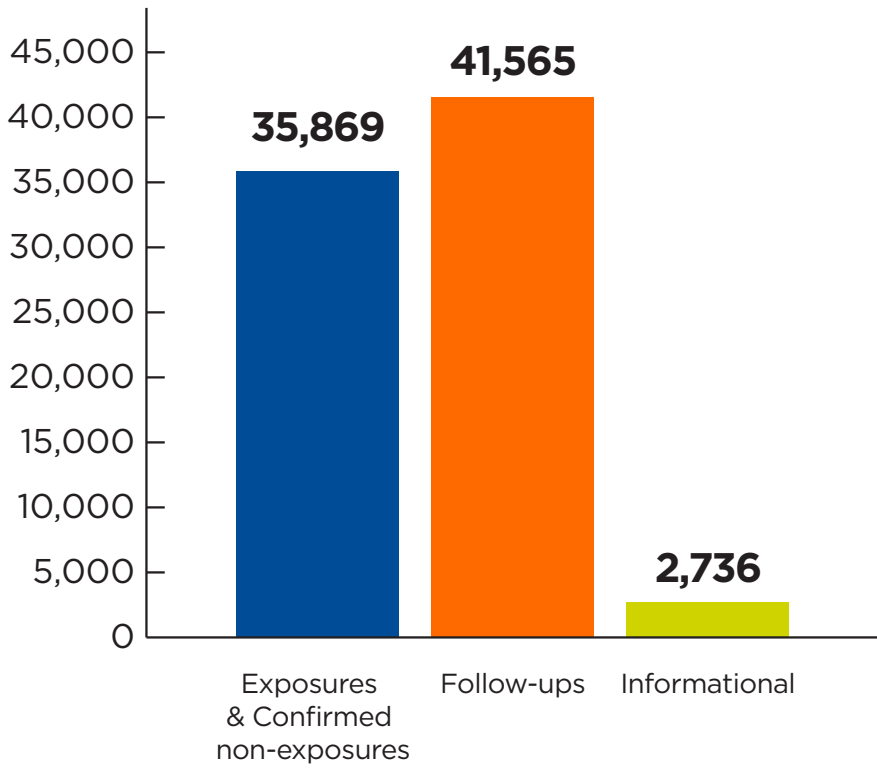
The WPC has been successfully accredited since 2005. There are currently 55 nationally accredited poison centers in the U.S.

Poison Center Case Volumes in 2020

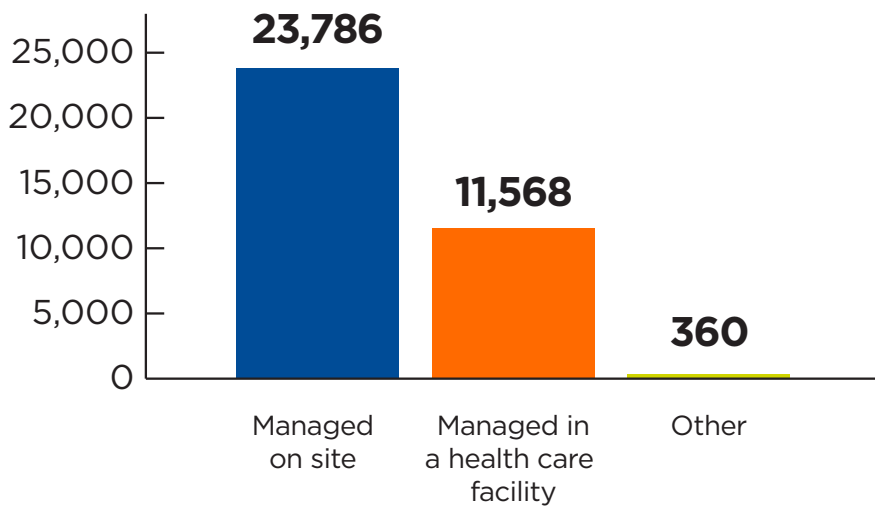
Wisconsin Poison Center (WPC) managed 35,869 exposure and confirmed non-exposure cases in 2020, but that number tells only half the story.

Besides receiving an average of 106 reported cases per day, toxicology-trained pharmacists and nurses also follow up by calling back to monitor exposed patients to ensure their safety and the highest quality of care. Hospital patients throughout the state are checked an average of twice a day until they are discharged. This provides continuity of care and allows for adjustment of treatment recommendations as needed.

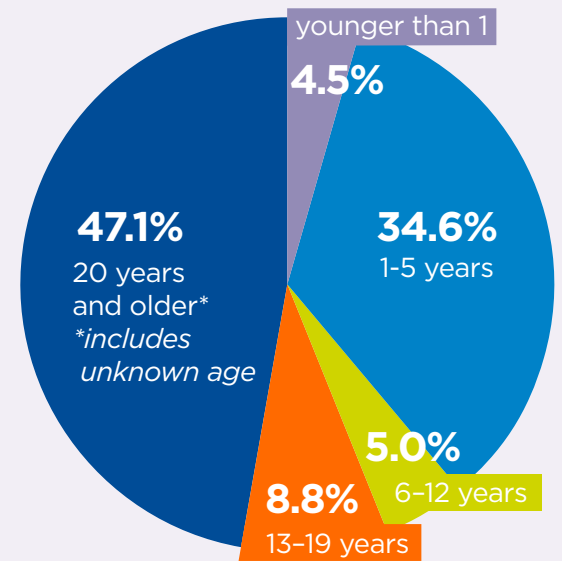
2020 CALL/CASE VOLUMES



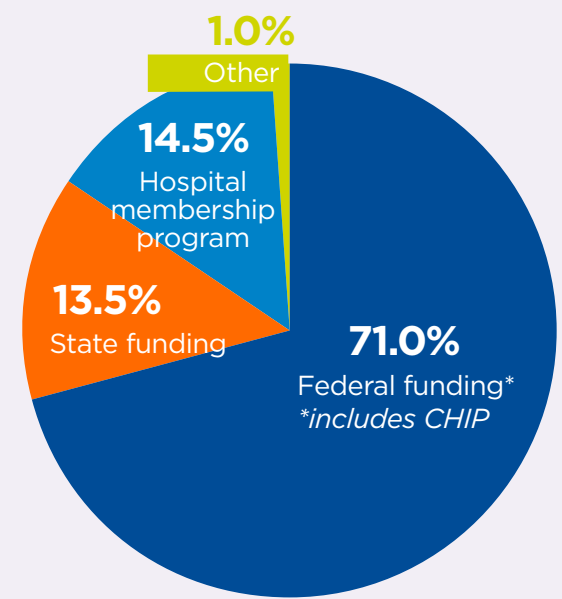
2020 NUMBER OF CASES/TREATMENT SITE



2020 AGE OF EXPOSED PATIENT



TOTAL EXTERNAL FUNDING SOURCES FOR 2020

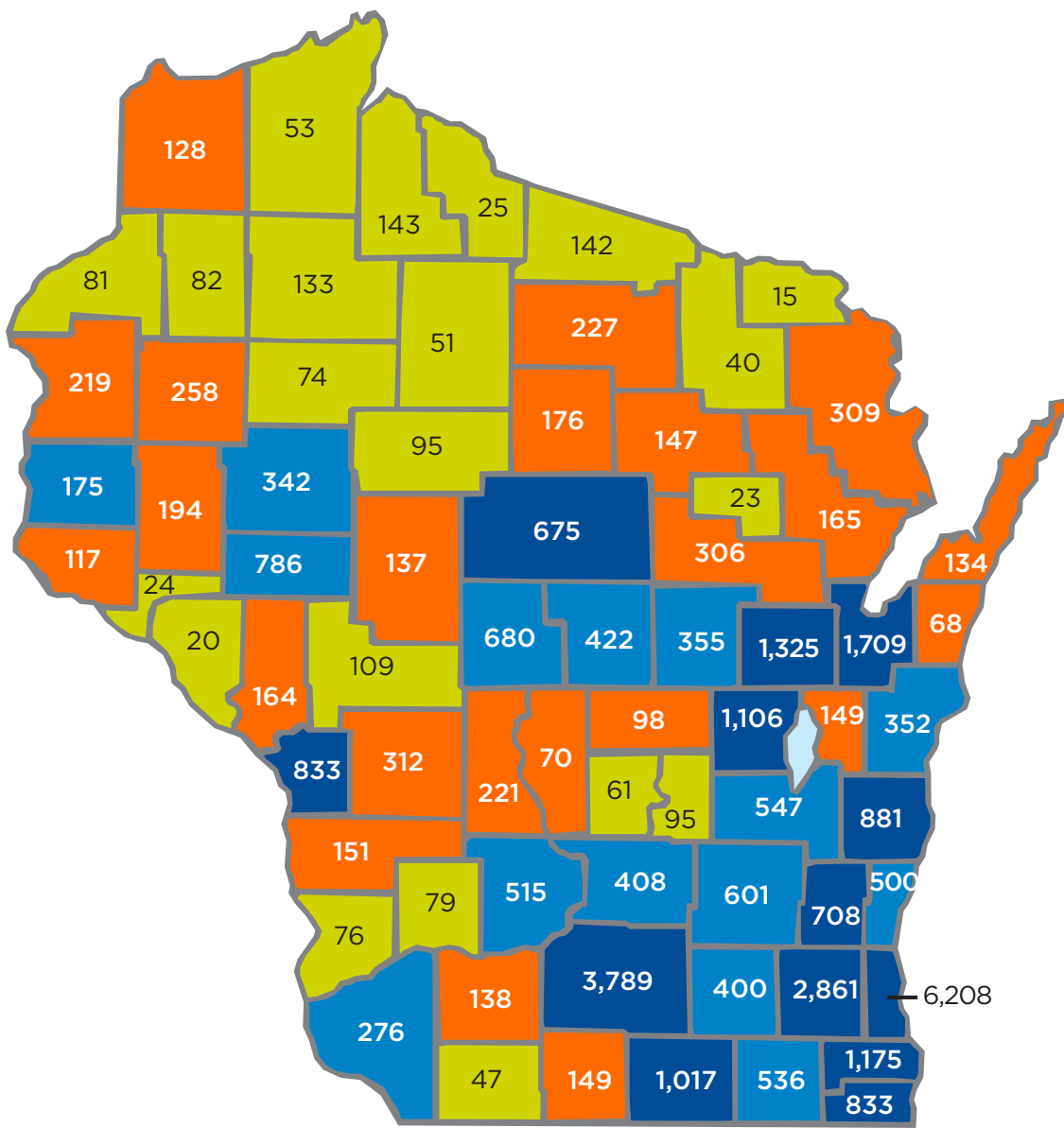


Hospital membership program update

This program allows patient providers from all hospitals throughout the state of Wisconsin an opportunity to collaborate with toxicologists to ensure the best treatment and outcomes for the poisoned or drug overdosed patients. In exchange for a membership fee, all member facilities gain 24/7/365 access to board-certified toxicologists, toxicology-trained nurses and pharmacists. The program is in its sixth year, and over 99 percent of Wisconsin hospitals chose to be members in 2020.



2020 NUMBER OF CASES HANDLED BY COUNTY



County populations

● Less than 20,000 ● 20,001 to 50,000 ● 50,001 to 100,000 ● More than 100,000

Top 10 substances involved in poisonings in 2020

Age 5 and younger

1. Personal care products
2. Household cleaning products
3. Pain medications
4. Dietary supplements
5. Foreign bodies/toys
6. Vitamins
7. Topical preparations (creams and lotions)
8. Plants
9. Antihistamines
10. Pesticides

Age 6 to 19

1. Pain medications
2. Antidepressants
3. Antihistamines
4. Sedatives/antipsychotics
5. Street drugs/stimulants
6. Household cleaning products
7. Cardiovascular medications
8. Dietary supplements
9. Personal care products
10. Anticonvulsants

Age 20 and older

1. Pain medications
2. Antidepressants
3. Cardiovascular drugs
4. Sedative hypnotics/antipsychotics
5. Household cleaning products
6. Alcohols
7. Anticonvulsants
8. Antihistamines
9. Personal care products
10. Hormones and hormone-blocking agents

Since 2009, the U.S. Centers for Disease Control and Prevention's National Center for Injury Prevention and Control reports the No. 1 cause of injury deaths for adults ages 25-64 as unintentional poisoning. Health care facilities are treating increasing numbers of severely overdosed patients.

10 LEADING CAUSES OF INJURY DEATHS, UNITED STATES - 2019

RANK	AGE GROUPS										All Ages
	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	
1	Unintentional Suffocation 1,095	Unintentional Drowning 378	Unintentional MV Traffic 340	Unintentional MV Traffic 420	Unintentional MV Traffic 5,867	Unintentional Poisoning 15,595	Unintentional Poisoning 16,063	Unintentional Poisoning 14,105	Unintentional Poisoning 11,856	Unintentional Fall 34,212	Unintentional Poisoning 65,773
2	Homicide Unspecified 115	Unintentional MV Traffic 281	Unintentional Drowning 133	Suicide Suffocation 317	Unintentional Poisoning 4,346	Unintentional MV Traffic 6,643	Unintentional MV Traffic 5,248	Unintentional MV Traffic 5,089	Unintentional MV Traffic 5,603	Unintentional MV Traffic 8,033	Unintentional Fall 39,443
3	Unintentional MV Traffic 69	Unintentional Suffocation 139	Unintentional Fire/Burn 71	Suicide Firearm 172	Homicide Firearm 4,339	Homicide Firearm 4,498	Suicide Firearm 3,187	Suicide Firearm 3,616	Suicide Firearm 4,266	Suicide Firearm 6,392	Unintentional MV Traffic 37,595
4	Homicide, Other Spec., classifiable 59	Homicide Unspecified 103	Homicide Firearm 68	Homicide Firearm 144	Suicide Firearm 2,800	Suicide Firearm 3,507	Suicide Suffocation 2,782	Suicide Suffocation 2,303	Unintentional Fall 2,922	Unintentional Unspecified 4,979	Suicide Firearm 23,941
5	Undetermined Suffocation 57	Unintentional Pedestrian, Other 79	Unintentional Suffocation 33	Unintentional Drowning 100	Suicide Suffocation 2,153	Suicide Suffocation 3,113	Homicide Firearm 2,660	Suicide Poisoning 1,398	Suicide Suffocation 1,834	Unintentional Suffocation 3,994	Homicide Firearm 14,414
6	Undetermined Unspecified 34	Unintentional Fire/burn 76	Unintentional Other Land Transport 30	Unintentional Other Land Transport 57	Suicide Poisoning 482	Undetermined Poisoning 800	Suicide Poisoning 958	Homicide Firearm 1,359	Suicide Poisoning 1,385	Unintentional Poisoning 3,727	Suicide Suffocation 13,563
7	Unintentional Drowning 34	Unintentional Natural/Environment 56	Homicide Unspecified 24	Unintentional Fire/burn 40	Unintentional Drowning 415	Suicide Poisoning 714	Undetermined Poisoning 836	Unintentional Fall 1,206	Adverse Effects 894	Adverse Effects 3,576	Unintentional Suffocation 7,076
8	Adverse Effects 29	Homicide Other Spec., classifiable 53	Homicide Other Spec., classifiable 16	Suicide Poisoning 30	Undetermined Poisoning 243	Unintentional Drowning 451	Unintentional Fall 537	Undetermined Poisoning 775	Unintentional Suffocation 859	Unintentional Fire/burn 1,273	Unintentional Unspecified 6,369
9	Homicide Poisoning 23	Homicide Firearm 47	Unintentional Struck by or Against 16	Unintentional Suffocation 28	Homicide Cut/pierce 227	Homicide Cut/Pierce 409	Unintentional Drowning 415	Unintentional Drowning 466	Homicide Firearm 824	Suicide Poisoning 1,157	Suicide Poisoning 6,125
10	Homicide Suffocation 23	Unintentional Poisoning 27	Two Tied 15	Adverse Effects 23	Suicide Fall 200	Unintentional Fall 330	Homicide Cut/pierce 341	Unintentional Suffocation 425	Undetermined Poisoning 750	Suicide Suffocation 1,049	Adverse Effects 5,329

■ Poisoning deaths

Data source: National Center for Health Statistics (NCHS), National Vital Statistics System.

Produced by: Office of Statistics and Programming, National Center for Injury Prevention and Control, CDC using WISQARS™.

Wisconsin Poison Center

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