

**WASHINGTON
POISON CENTER**

**ANNUAL
REPORT
2022**



**WASHINGTON
POISON CENTER
(800) 222-1222**

Washington Poison Center
155 NE 100th Street Suite #100,
Seattle, WA 98125
www.wapc.org

Administrative Office: (206) 517-2350
Emergencies: (800) 222-1222
TTY users dial 711 for the
Washington Relay service

501(c)(3) nonprofit (EIN 94-3214597)

FROM OUR BOARD PRESIDENT AND MEDICAL DIRECTOR

Nationally and locally, 2022 saw an escalation of two health crises with often fatal or severe outcomes: adolescent self-harm with a variety of legal and illegal substances, and fentanyl overdoses among all age groups. Sadly, what once was a trickle is now a prolonged deluge. The Washington Poison Center (WAPC) is committed to saving these and all lives by providing expert advice on toxicological emergencies, alleviating pressure on our region’s healthcare facilities and providers, and offering dynamic clinical and public training programs. We remain at the forefront of prevention and harm reduction efforts, building awareness of emerging trends and up-to-date strategies.

Although we have developed workarounds to lessen ongoing negative impacts from the COVID-19 pandemic on our tireless call center and community outreach staff, it is clear that we need to add more staff. This year, the WAPC plans to bolster and increase the numbers and capabilities of our staff so that we may continue our unwavering commitment to proactively and reactively meet the needs of Washington healthcare providers and community members.

We are sincerely grateful for the continued partnerships and financial support from the public, local agencies, and our legislators. Your support helps us save lives.

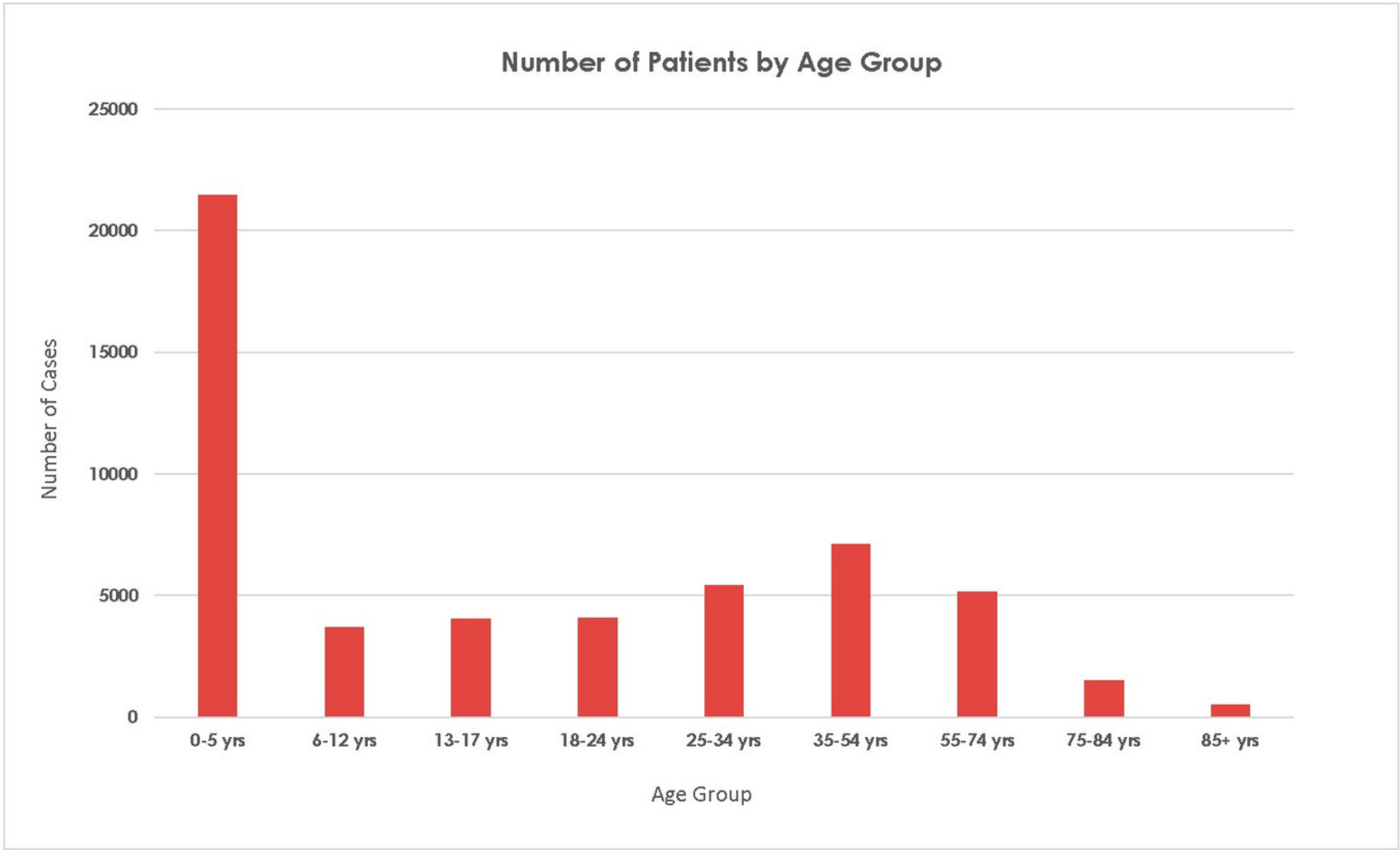


Anita Mires
Board President



Scott Phillips, MD,
FACP, FACMT, FAACT
WAPC Executive/Medical
Director

Calls to the Poison Center by Age Group



OUR MISSION: *To prevent and reduce harm from poisoning through expertise, collaboration, and education.*

OUR VALUES: *Compassion, Integrity, Growth, Drive, Innovation*

Reasons for Calling

Why Did Washingtonians Call Us?						
	Number of	Percentage			Number of	Percentage
Unintentional	Cases	of Total		Adverse reaction	Cases	of Total
General	20,845	38.3%		Drug	1,288	2.4%
Environmental	1,581	2.9%		Food	210	0.4%
Occupational	1,112	2.0%		Other	249	0.5%
Therapeutic error	9,784	18.0%		Subtotal	1,747	3.2%
Misuse	6,524	12.0%				
Bite/sting	276	0.5%		Other		
Food poisoning	872	1.6%		Contamination/tampering	525	1.0%
Unknown	82	0.2%		Malicious	336	0.6%
Subtotal	41,076	75.5%		Withdrawal	67	0.1%
				Subtotal	928	1.7%
Intentional						
Suspected suicide	6,987	12.9%		Unknown	435	0.8%
Misuse	1,928	3.6%				
Abuse	999	1.8%		Total	54,378	100.0%
Unknown	278	0.5%				
Subtotal	10,192	18.7%				



2022 All Cases by Call Type	
Exposures	54,246
Information*	5,589
Local Health Jurisdictions (LHJ) (a subset of information calls)	991
Total	60,826
*includes confirmed non-exposure cases and excludes LHJ calls	

CASE REPORTS

115,376 calls managed in 2022 (Many cases involve more than one call.)

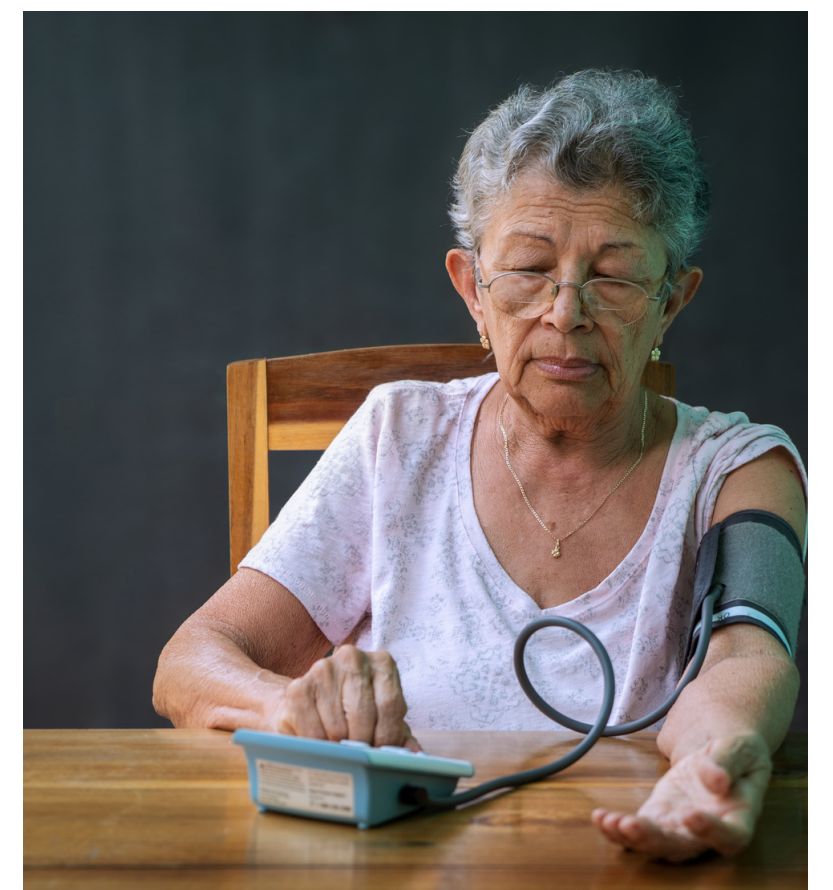
A middle school teacher called the WAPC for advice after a child found pepper spray in a mother's purse and sprayed it into another child's eyes. Fortunately, the science teacher had an eye wash in their room and so they irrigated



the child's eye for about 30 minutes. WAPC confirmed irrigation was appropriate and provided instructions on

how to do so more effectively, as well as advice on whether the child would need any follow up. The call center staff called back to check and see how the child was doing.

A 79 year old mistakenly took her evening blood pressure medication in the morning, putting the doses too close together. She called the WAPC, where she was advised to monitor her blood pressure with her blood pressure cuff throughout the day. WAPC provided information on when to check her pressure, to increase her fluid intake slightly, and to call back if her symptoms or readings were below a certain level. WAPC also recommended avoid taking further doses of this medication for 24 hours. The poison center checked back with the patient and she was doing fine.



"I absolutely love that this service is available especially when kiddos get into something us parents are unsure about. It saves thousands in [unnecessary] visit fees ...and more importantly we have someone to help without having to worry if we should or shouldn't call 911. This service definitely saves lives and helps people in so many ways. Thank you for always being there for my family, myself and our communities."-from a caller

An adult caller was cleaning their bathroom and accidentally mixed a cleaner containing bleach and a toilet bowl cleaner containing hydrochloric acid. They started to cough, so they opened the



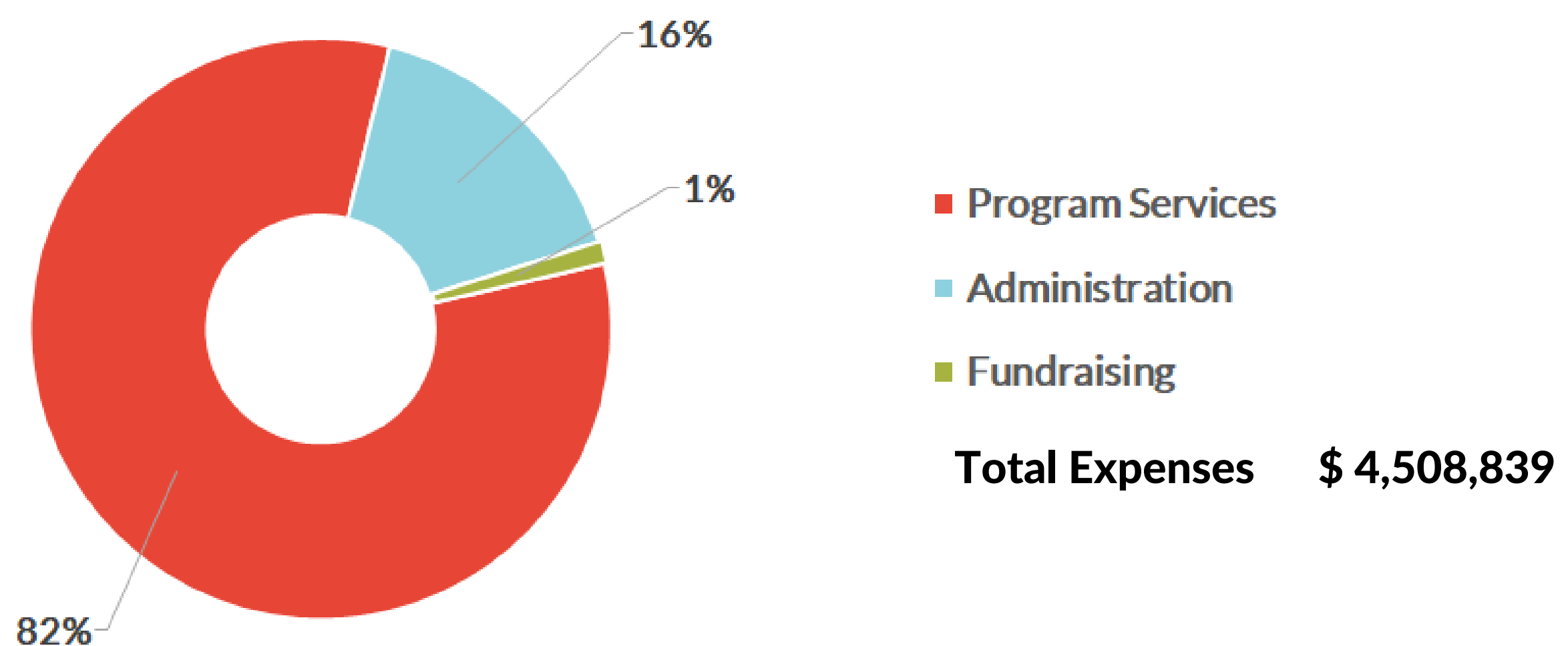
windows of the bathroom and got outside into the fresh air. When they called, the WAPC explained that mixing a product containing a base (the bleach cleaner) with a product containing an acid (the toilet bowl cleaner) creates chlorine gas. Breathing in chlorine gas can cause symptoms from coughing to chest pain and vomiting. They were advised to air out the bathroom, get fresh air, and drink fluids to help with throat irritation. Luckily their symptoms were mild, and they were told to call back if their symptoms persisted.

Visit wapc.org to see annual statistics on the top 10 most common exposures, seasonal health alerts, data reports, to check out Yukboxes, and to order materials.

A WORTHWHILE INVESTMENT

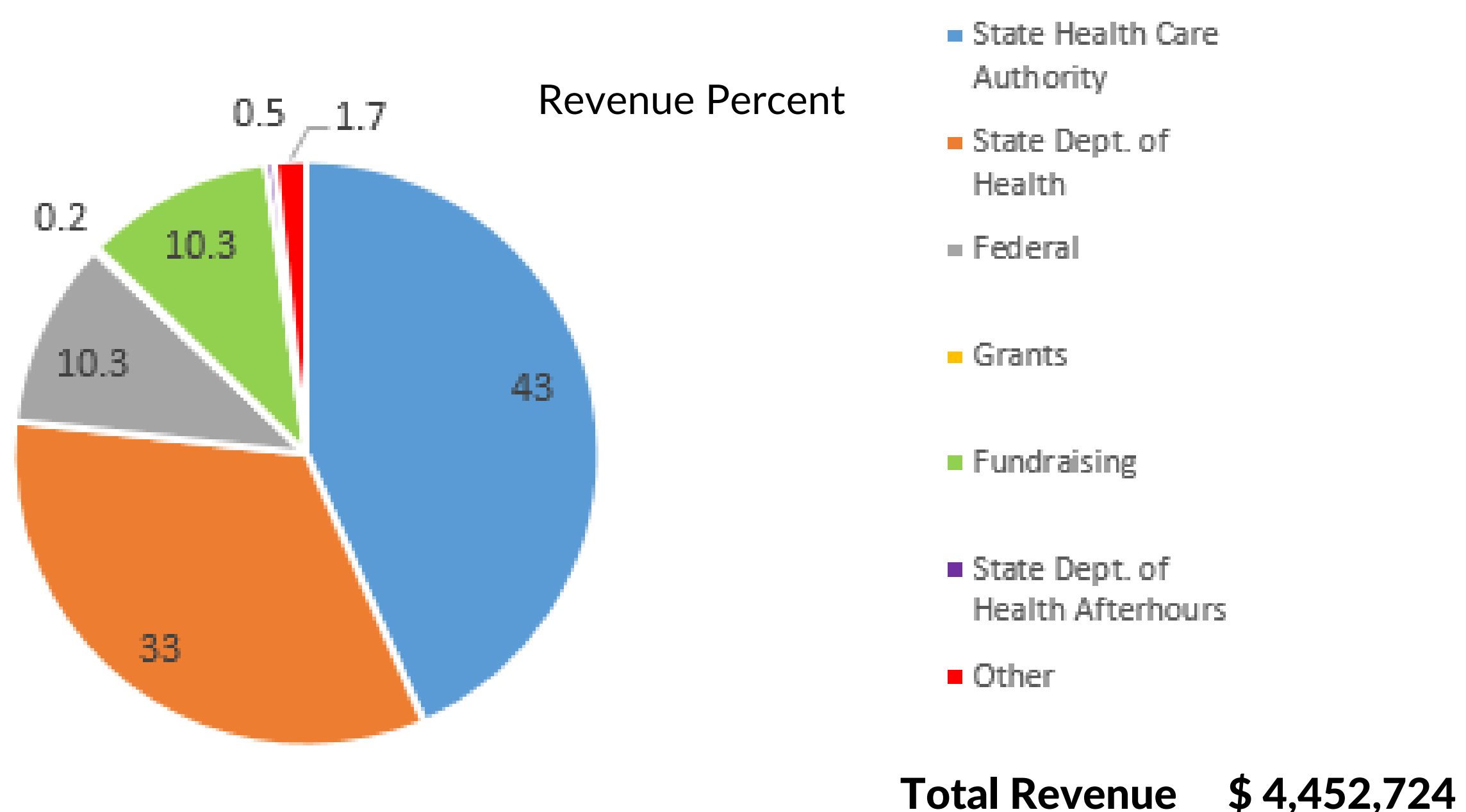
Allocation of Expenses by the WAPC

(Fiscal Year Data)



Sources of Funding for the WAPC

(Fiscal Year Data)



Meet one of our Board Members

Scott Hogan, MHA
Board Member Emeritus



In the early 1990's, I was a Health Administrator and planner in the Department of Health and was asked to work with a small group, including the Seattle, Spokane, Tacoma, and Yakima poison centers, studying how best to keep the vital public health activities of the centers viable in Washington. It led to the 1994 formation of the Washington Poison Center.

Diving into this world of poisons, toxins and drugs was fascinating and I quickly saw how important this free service of emergency care and treatment provided was to Public Health. Listening to the anxious calls coming in seeking help for overdose or poisoning was compelling. The calm, assuring and knowledgeable staff answering the calls was impressive. I knew I couldn't do that, but I could help the Poison Center to maintain its purpose and mission: "To prevent harm from poisoning through expertise, collaboration, and education." It is an honor to have worked over the years with the Board and this dedicated team of physicians, pharmacists, nurses, and others to make an impact and contribution to the public health arena in Washington.



My introduction to the poison center began with my first day of a hospital pharmacy internship in 1979.

Meet one of our Call Center Staff

Noemi Hastings, Pharmacist, CSPI

I found I could use my pharmacy education for the good of real patients and help providers on the phone. It was rather shocking to me, as a pharmacy student, that drugs cause so many poisonings AND treat many poisonings. As a pharmacist, I jumped at it. I also enjoy talking with parents, patients, nurses and doctors, and getting involved almost 'real time' patient care. Then, after graduation, the poison center hired me. Years later, I lectured to pharmacy students about 'the role of the pharmacist at the poison center,' and now, today, there is no doubt we belong here.

We have grown from the tiny room in the back of a pharmacy to the Washington Poison Center of today, thanks to thousands of supporters and heroes of all types. I am still here, more than 40 years later, because our poison center evolved, and today, we are needed more than ever. We continue to save lives.

When I am on the phone ['on-line'] my mind is 'out there' connecting with the callers. In a matter of minutes, I can move between an ER provider with a complex poisoning then on to the next call, I am with someone on the street - the fentanyl crisis, and food shortages [figuring out if their food bank food is ok to eat] - some callers are people experiencing homelessness, and then, the next call can might be someone at home mixing cleaners in the bathroom, or elderly who made a drug mistake. Who is calling next? You never know until you answer the next ringing phone.

**91 % of patients were kept at home when we were called first,
saving over \$44 million in healthcare costs**

"I have never had such great customer service...The 1st operator was calm... he didn't make me feel like an idiot for double dosing my mother...he explained what to watch for, told me what med not to give mom for her night meds. He then asked if someone could call me back. I remember saying 'sure' thinking 'that's [not] gonna happen.' By golly a young woman called that evening. Also very concerned asking questions. I also received yet another call the next day. Also asking how mom was feeling and any changes. I have never had even a doctor be so concerned or thorough. Thank you poison control."-from a caller

"You were SO helpful and really calmed my anxiety I was so nervous to go to the emergency [room, but] scared not to. I was able to give an exact account of what happened, what medication was possibly ingested and what to look for. If not for the WAPC, we would have spent hours clogging up another room in the hospital ... or not sleeping all night sick with worry. This was a very helpful experience...The person who took my call took personal care of us by agreeing to a call back time, and treated us like our kiddo was also her kiddo. It was very appreciated!"-from a caller

"My husband and I called twice for different situations with our 4 year old and both times they were helpful and we did not have to call 911 or go to the hospital. Thank you so much for all your work."- from a caller

"...I had accidentally squirted distilled vinegar into my nose instead of distilled water. I had never been in such agony before and receiving your help was a lifesaver... The fact that you answered my call at midnight and then called me back a few days later to check on my wellbeing comforted me deeply. I have fully recovered and learned to safekeep the vinegar jar elsewhere. Thank you."-from a caller

EDUCATION

146 public and health care education events were held in 2022



2022 was an exciting year, as our Public Health Education Team reengaged communities through in person events and explored different strategies to reach new audiences.

- We reached 18,648 people through 115 community fairs, presentations, trainings, social media livestreams, and other events.

- While the majority of our public education continued to be held online, because of COVID waning we increased the number of in person events by 600% (from 11 to 66 events). Many of these events were community resource fairs, where we engaged families, kids, and older adults around poison prevention and harm reduction.
- Our Western Washington educators supervised 3 Master of Public Health students in capstone projects to expand poison center awareness and educational resources in middle school, high school, and university settings. We also developed interactive lesson plans for elementary age children covering poison safety basics like look-a-like products, common household hazards, medicine safety, and how to use Mr. Yuk stickers.
- We received funding from America's Poison Centers to begin a study with the Oregon Poison Center on barriers to poison center utilization among Spanish-speaking communities in our two states. This study will take 2 years to complete.

27 medical and pharmacy students and physicians were trained by WAPC staff in 2022

Every year students from local universities complete a toxicology rotation with the poison center. Students attend lectures given by the center's Medical Directors and consulting toxicologists, and in some cases work at the center. We have medical residents and pharmacy students from the University of Washington, Washington State University, Seattle Children's Hospital, and Madigan Army Medical Center. EMTs also receive guidance on how to utilize our services. Some of our current staff began their careers by doing rotations as part of their college education.

"This rotation is a really great unique experience you won't get at any other Advanced Pharmacy Practice Experiences (APPE) site. You get to observe real time patient calls and even have the opportunity to participate in a research project. There are also many interprofessional opportunities as you will be able to attend medical resident's lectures on toxicology. I really enjoyed this rotation and learned so much!" - from a pharmacy student who completed a rotation at the WAPC.

"The EMTs learn a lot from the [practice call]; none of them had ever called before. The best thing they learned was ...to state what the possible poisoning was and then answer the questions from the SPI,... and that we need to supply the patient's name and birth date." - EMT Instructor

MEET OUR NEW ASSOCIATE MEDICAL DIRECTOR



Sasha Kaiser, MD

In 2022 The Washington Poison Center welcomed Dr. Sasha Kaiser as its Associate Medical Director. Dr. Kaiser grew up on Camano Island, and came to us after completing her medical toxicology fellowship in Denver. Dr. Kaiser started as a pharmacy technician, then attended nursing school. She later became an emergency medicine physician and is board certified in Emergency Medicine and in Medical Toxicology. Dr. Kaiser additionally completed the American College of Medical Toxicology Fellows in Industry Rotation, which focused on product development and regulation for safety.

Dr. Kaiser provides medical oversight to WAPC's call center specialists in poison information, ensuring the WAPC continues its provision of high-quality poisoning treatment advice and consultations. Dr. Kaiser also supports clinical education and outreach to healthcare providers, as well as the WAPC's toxicology training programs for emergency medicine physicians, pharmacists, nurses, and EMTs.

Our Board consists of community members with backgrounds including healthcare, law, education, leadership, and business, who support our mission. Board Members have participated in calls to legislators, helped at public health education events, as well as provided support to a Capstone student's project.

2022 BOARD OF DIRECTORS



President Anita Mires, Anita Mires & Associates, Inc.

Vice President/President Elect Danica Pytte, MBA, BSN, Seattle Children's Hospital

Treasurer Erika Allen, CPA, Harrison Berkman Claypool and Guard

Secretary Janessa Graves, PhD, MPH, WSU College of Nursing

Immediate Past President Steve Burgon, JD, Ogden Murphy Wallace, PLLC

Jenny Arnold, PharmD, BCPS

Aneet Bains, Northshore School District

Mark Martzen, PhD, Bastyr University

Faith Njeri, FNS Consulting

Mary Selecky, Retired Secretary of Health

Stacy Tarango, MD, Spokane Emergency Physicians

Captain Joseph Wubbold III, Captain, US Coast Guard, Retired

Biruk Yitbarek, Microsoft

Non-Voting Members

Scott Hogan, MHA, Board Member Emeritus

Jennifer Landacre, MPA, WA State Department of Health

Terms ended:

The Rev. Dr. Sarah Colvin, Church of the Holy Spirit

Ian Corbridge, MPH, WA State Department of Health

Ryan Keay, MD, North Sound Emergency Medicine

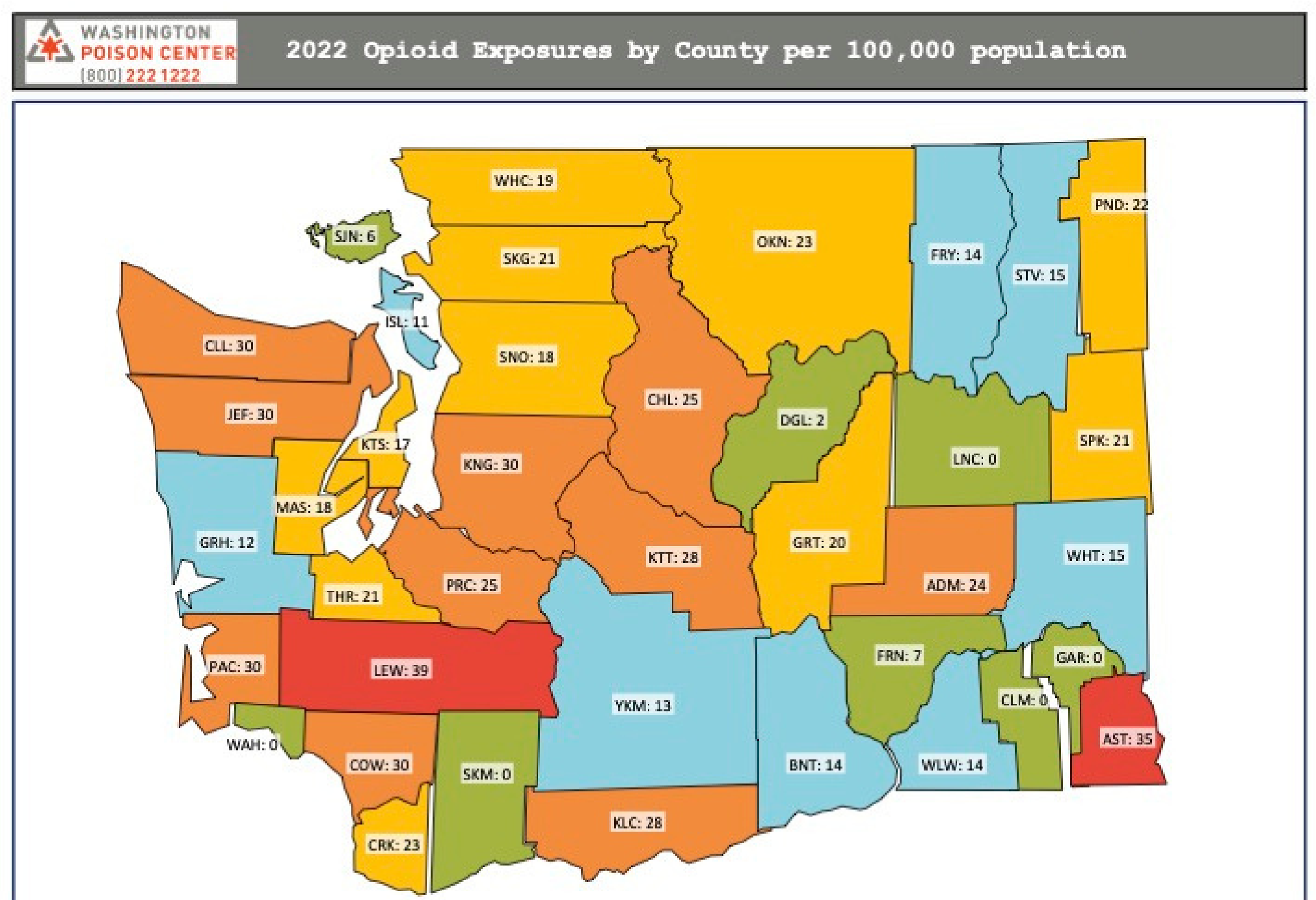
OPIOID OVERDOSES ESCALATING

This year we saw a record number of opioid-related exposure cases, most involving the synthetic opioid fentanyl. The poison center was not alone in this trend—in 2022, there were increases across our state and country in police interdictions and, unfortunately, deaths due to fentanyl.

In Washington, fentanyl is most often found pressed into blue pills that resemble legitimately prescribed medications. These pills are commonly referred to as M30's or Mexi-30's, based on the pill imprint code. Fentanyl can also be present in any pill or powdered drugs bought on the street or online, such as cocaine or benzodiazepines. Because of the potency of fentanyl, it only takes a very small amount to cause overdose and death. The Drug Enforcement Administration uses the example that a packet of artificial sweetener is about 1,000 milligrams. Approximately 2 mg is the dose of fentanyl commonly thought to cause a fatality. Thus, the volume of one packet of fentanyl would be enough to kill 500 people.

Often, users of illicit substances do not know fentanyl is present or are unaware of how much fentanyl is in the substance they are taking, resulting in overdoses. Each day in the United States, there are 295 deaths a day due to synthetic opioids, mostly fentanyl. This is a tragedy for patients and families. In 2022, the WAPC has seen an increase in opioid exposure in each age group, with a corresponding dramatic increase in fentanyl deaths. The use of naloxone has also increased. Greater availability of naloxone and CPR training are crucial to respond to this crisis.

Key Color: Range (Cases per 100,000 pop)		
	0	7.9
	8	15.9
	16	23.9
	24	31.9
	32	40



The fentanyl epidemic has resulted in much concern among the public and healthcare providers, which provided us with many opportunities in 2022 for education and outreach. We presented to school nurse organizations, public health professionals, and community members on prevention and harm reduction, and produced materials to counteract misinformation around responding to overdose. For healthcare providers, we provided education on the diagnosis, treatment of intoxication, and treatment of opioid withdrawal. As this epidemic shows no signs of ending, and as trends in the drug supply continue to shift, we will remain active in helping the public and healthcare providers with resources and treatment recommendations.

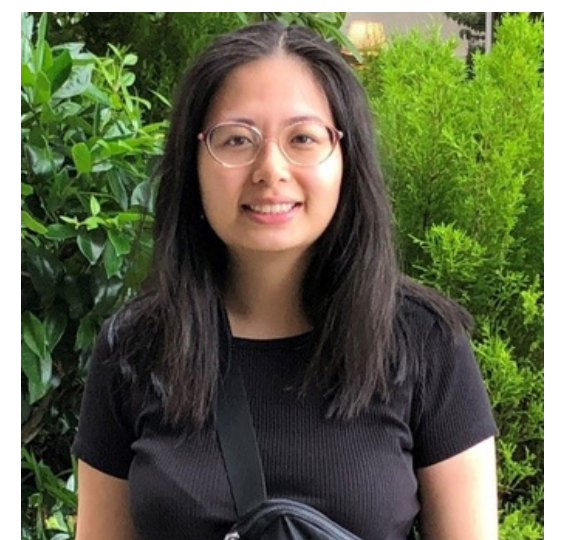
WASHINGTON POISON CENTER LAUNCHES NEW AFTER HOURS PROGRAM

The Washington Poison Center, through a single contract with the Washington State Department of Health, is piloting a centralized after hours phone answering service for participating Local Health Jurisdictions (LHJ). Although all WAPC call staff can answer these calls, we have a dedicated Public Health Answering Service Team (PHAST), comprised of healthcare and public health students, who are trained specifically to handle these calls and work part time when not in school. This combination of professional call staff and PHAST ensures we are able to meet call demands, for both the poison center and the answering service.

The pilot has effectively shown that having one answering service for the state provides more consistent responses to the public and healthcare providers who call their local health department outside of business hours. We reduce the administrative and financial burden of participating LHJ by decreasing the number of calls transferred to their on call staff. Since we answer calls from multiple health districts, we are able to easily identify multi-jurisdictional public health threats should they occur.

The feedback from the 12 Local Health Jurisdictions participating in the pilot has been favorable and we hope to expand the program in 2023 to include all 39 counties in the state. The WAPC has successfully demonstrated that public health services are a shared responsibility.

"This program has allowed me to experience more about what goes on behind the scenes with public health, which is a really unique opportunity as a pharmacy student. I enjoy the flexibility that the program provides in supporting my education and the knowledge I gain from handling a breadth of calls." Nghi N., UW Pharmacy Student and PHAST member



The Washington Poison Center is a 501(c)(3) Nonprofit and relies upon a combination of state contracts; federal, corporate, and foundation grants; and donations from people like you to sustain our core services and expand our reach to provide public and clinical education promoting prevention, intervention, and harm reduction.

To make a donation go to: www.wapc.org/support-us/donations

Find us on social media:



FUNDRAISING



HOSPITAL FAIR SHARE

Washington Poison Center
partner in healthcare

The Washington Poison Center relies on a combination of state and federal funds, as well as hospital donations and grants, to sustain our core services. We provide free telehealth support, which often includes physician to physician medical toxicology consultations, to hospitals and healthcare providers for complicated overdose patients. Our Hospital Fair Share program is vital and provides financial support for this increasing demand in specialized toxicology services.

Please see the list of participating hospitals.

Thank you to our partners for their
ongoing support!

"I'm a retired EMT, first time using this resource for my own needs. Extremely professional. Equivalent to Trauma Center operation care level." - from a caller

"I realized I had likely been taking way too much Tylenol. I called Poison Control on a Sunday evening about 9pm and the pharmacist calmly took my information, dosages I had taken and instructed me to go the ER. She asked where I'd be going. When I got to the ER they already had info that I had spoken to Poison Control. Turns out, I had to have an IV antidote. The doctors relied on Poison Control for instructions on exactly what to do. Poison Control saved me from long term liver problems. Thank you!! - from a caller

Fair Share Participants

Arbor Health Morton Hospital Astria Health •Sunnyside Community Hospital •Toppenish Community Hospital Cascade Medical Center Columbia Basin Hospital Coulee Medical Center Columbia County Health System Confluence Health • Wenatchee Valley Hospital • Central Washington Hospital East Adams Rural Healthcare EvergreenHealth EvergreenHealth Monroe Ferry County Memorial Hospital Forks Community Hospital Garfield County Public Hospital Island Hospital Jefferson Healthcare Kadlec Regional Med. Center Kaiser Permanente Kittitas Valley Healthcare Lake Chelan Community Hospital Lincoln Hospital Mason General Hospital Mid-Valley Hospital MultiCare Health System • Allenmore Hospital • Auburn Medical Center •Capital Medical Center •Covington • Deaconess Hospital • Good Samaritan Hospital • Mary Bridge Children's Hospital • Tacoma General Hospital • Valley Hospital North Valley Hospital Ocean Beach Hospital Odessa Memorial Healthcare Ctr. Olympic Medical Center Othello Community Hospital Overlake Medical Center PeaceHealth Columbia Network •Southwest Medical Center •St. John Medical Center	PeaceHealth Northwest Network • Island Medical Center • St. Joseph Medical Center • United General Med. Center PMH Medical Center Providence Regional Medical Center Everett Providence Healthcare SW • Centralia Hospital • St. Peter Hospital Providence Health Services SE Region • St. Mary Hospital Providence Health Care Eastern WA Region • Mount Carmel • Holy Family • St. Joseph • Sacred Heart Medical Center Pullman Regional Hospital Quincy Valley Medical Center Samaritan Healthcare Seattle Children's Hospital Skyline Hospital Swedish Health Services • Swedish Ballard • Swedish Cherry Hill • Swedish Edmonds • Swedish First Hill • Swedish Issaquah • Swedish Mill Creek • Swedish Redmond Tri-State Memorial Hospital Three Rivers Hospital UW Medicine • Harborview Med. Center • UW Medical Center • Northwest Hospital & Med. Center • Valley Medical Center Virginia Mason Franciscan Health • St. Anne Medical Center • St. Anthony Hospital • St. Clare Hospital • St. Elizabeth Hospital • St. Francis Hospital • St. Joseph Hospital • St. Michael Medical Center • Virginia Mason Medical Center Whitman Hospital Willapa Harbor Hospital
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**19% of cases involved a patient
in the hospital in 2022**

"...THANK YOU on behalf of the Seattle Children's ED team for the talk you gave on Common Overdoses: Management and Trends for the ED team. Your presentation was not only extremely informative, but also kept everyone engaged even through the details of pharmacology. ...The WA Poison [Center] is now forever in my speed dial for reference all thanks to you."-from an RN at Seattle Children's