

NMPDIC ANNUAL REPORT

FY
19

1650



COLLEGE OF
PHARMACY

NEW MEXICO POISON &
DRUG INFORMATION CENTER



NMPDIC FY19
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NMPDIC MISSION, SERVICES AND HISTORY



MISSION AND SERVICES

The mission of the New Mexico Poison & Drug Information Center (NMPDIC) is to improve the health of New Mexicans by reducing morbidity and mortality associated with poisoning, and by encouraging proper use of medications. The NMPDIC is a twenty – four hour emergency telephone service accessible to all residents of New Mexico. The Center assesses and makes treatment recommendations during possible poisonings, responds to drug information inquiries, and assists emergency personnel during hazardous material incidents. It also serves as a major teaching site for the University of New Mexico (UNM) College of Pharmacy and UNM School of Medicine. The NMPDIC coordinates poison prevention throughout the state, and operates New Mexico's only computerized toxicosurveillance system. The NMPDIC is certified as a Regional Poison Center by the American Association of Poison Control Centers.

HISTORY AND GENERAL OVERVIEW

During the early and mid-70s, the Bernalillo County Medical Center (now UNM Hospital) operated a poison control center. Although state funds supported this center, approximately 85% of its services were delivered to Bernalillo County. In July 1977, the center and its budget were transferred to UNM and the program was administratively attached to the College of Pharmacy. Since then, the program has been committed to providing the same level of service to all New Mexico residents 24 hours a day with a full-time, dedicated staff. The number of calls received by the Center has grown steadily over the years from 12,000 in 1977 to over 30,000 in 2013. Total calls have been declining while exposure calls have remained steady.

From the moment it was incorporated into the University, the New Mexico Poison and Drug Information Center has pursued compliance with all professional standards, especially the certification requirements of the American Association of Poison Control Centers (AAPCC). The quality of the Center, its staff and its services has resulted in its certification as a Regional Poison Center by AAPCC for six consecutive 5-year periods (the latest in 2015).

With the formation of the UNM Health Sciences Center (HSC) in 1994, it became possible for the Center to share faculty positions with other HSC units. The NMPDIC Director is shared with the UNM College of Pharmacy and the Medical Director is shared with the UNM School of Medicine's Department of Emergency Medicine.

The NMPDIC consists of two telephone-based services – a poison information service and a drug information service. The goals of the poison information service are to:

- Provide expert, 24-hour assistance to the citizens of New Mexico during possible poisoning emergencies.
- Reduce the costs associated with poisoning by treating less severe exposures at home with Center guidance.
- Train healthcare professionals in the field of clinical toxicology.
- Expand knowledge in the field of clinical toxicology through an active research program.
- Prevent poisonings through toxicosurveillance, education, regulation, and collaboration with local, state and federal agencies.
- Provide individualized, accurate, relevant, and unbiased information to consumers and healthcare professionals regarding medication-related inquiries.
- Help train pharmacists to be drug information providers.

From July 1, 2018 to June 30, 2019, the Center received 21,527 calls for assistance. There were 3,024 drug information inquiries during FY18. Poisoning-related calls totaled 21,254 with 20,091 of these calls involving possible human poisonings and 1,163 involving animal poisonings. The map on the first page shows human poisoning calls by county, and the graphs below shows total calls to NMPDIC since its inception, and hospital call trends.

The Center performs a risk assessment on each possible poisoning exposure. Each call results in the generation of a patient-specific treatment regimen, whether to the public, physicians, or to other healthcare professionals. The Center utilizes an extensive library of books, articles, and computerized information systems to provide the most current information available during

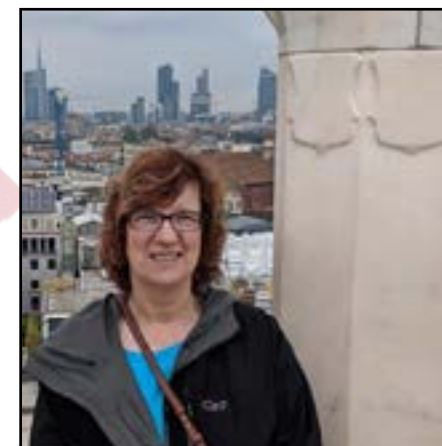
poison treatment. With these resources, the Center can quickly identify and assess the acute toxicity of more than 1,000,000 commercial products.

All cases are monitored with follow-up telephone calls until the patient is clearly out of danger. The average poisoning case generates 2.1 follow-up calls. 42% of the patients managed by the Center are less than six years of age. Medications account for 57% of the substances involved with poisoning. 81% of the poisoning exposures were managed safely at home with Poison Center assistance. By treating patients at home instead of in the emergency department, the cost of poisoning to New Mexicans was lowered by \$11.8 million statewide. In FY 18, the Center also consulted on 1163 animal exposures and responded to 3024 requests for drug information. The NMPDIC provided 4,878 telephone consultations to healthcare providers. The Center utilized physician toxicologists on 703 of these cases. At the University of New Mexico Hospital, the NMPDIC clinical service performed bedside consultations on 109 patients.

The Center's staff is among the finest in the nation. All of the Pharmacist Specialists in Poison Information that have met the time-in-service qualifications for the AAPCC Certification Examination, have passed the exam with excellent scores, and two had the highest scores in the country during their examination years. The NMPDIC uses a computerized data collection system to collect and compile poisoning and drug information data. The data are used by the state and national agencies to enhance product safety, to target poison prevention efforts and to improve poison treatments.

NMPDIC MESSAGE FROM THE DIRECTOR

Susan Smolinske



DR. SUSAN SMOLINSKE

NMPDIC Director

From the Director,

A poison center is only as good as the people answering the phones, so I want to give thanks for a fantastic year of effort by our talented and knowledgeable Specialists in Poison Information. Our pharmacists and pharmacy technician have extraordinary expertise and this year sustained our perfect 100% history passing the national certification exam. Also thanks to our amazing educator, who has exceeded her goals for outreach three years in a row. Preventing poisoning and promoting awareness of our services is a vital component of our mission. I am equally proud of the expertise of our medical staff. I congratulate Dr. Warrick for attaining board certification in Addiction Medicine, to add to his toxicology credentials. He has become a critical piece of

the statewide efforts to combat opioid addiction. I thank Dr. Seifert for his provision of statewide education regarding a new antivenom available for the 2019 snakebite season and for promoting education of our pharmacy and medical students and residents.

Last, but not least, thanks to our newest employee, Scott Roberts, our Administrative Assistant. Scott increases our depth of expertise in graphics design and all things computer. To maintain all of these activities, the poison center depends upon private philanthropy, in addition to state funding. We have some challenges ahead, in that a significant part of our funding is derived from the Tobacco Settlement fund, which has generated diminishing resources the last two years, and as a result has depleted our reserve funding considerably. To this end, I have created, along with Angela Lovato, the Dennis S. Peña Poison Center Endowment fund. Once fully funded, this endowment will become an enduring tribute to a legendary New Mexican pharmacist who was passionate about the New Mexico Poison & Drug Information Center. We will honor his memory by promoting education regarding poisoning to vulnerable populations in our state.

Click on this link to donate.

<https://www.unmfund.org/fund/dennis-s-pena-memorial-poison-center-endowment/>



NMPDIC
AT A GLANCE

ACTIVITY OF NMPDIC **FY19**

The NMPDIC takes various types of calls from Home to Hospitals through out New Mexico.

Fig. 1 Hospital calls to NMPDIC

NMPDIC took 5635 calls from hospitals in FY19.

Fig. 2 Call History per Fiscal Year

NMPDIC took 23,079 Calls during FY19, and 1,485,301 calls in the past 30 years.

Fig. 3 NMPDIC Program Summary

NMPDIC Program Summary and cost savings for last 5 Fiscal years.

Fig. 4 Calls by County of New Mexico

Calls to NMPDIC throughout New Mexico seperated by county.

Fig. 5 NMPDIC Poisonings by Substance

Top substances called in to NMPDIC and fatality total.

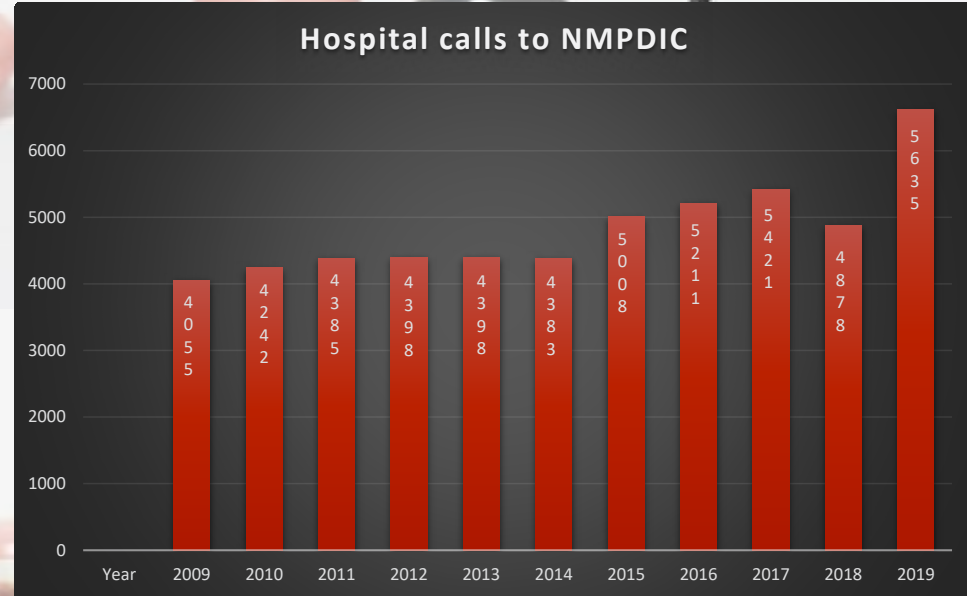


Fig. 1 Hospital calls to NMPDIC

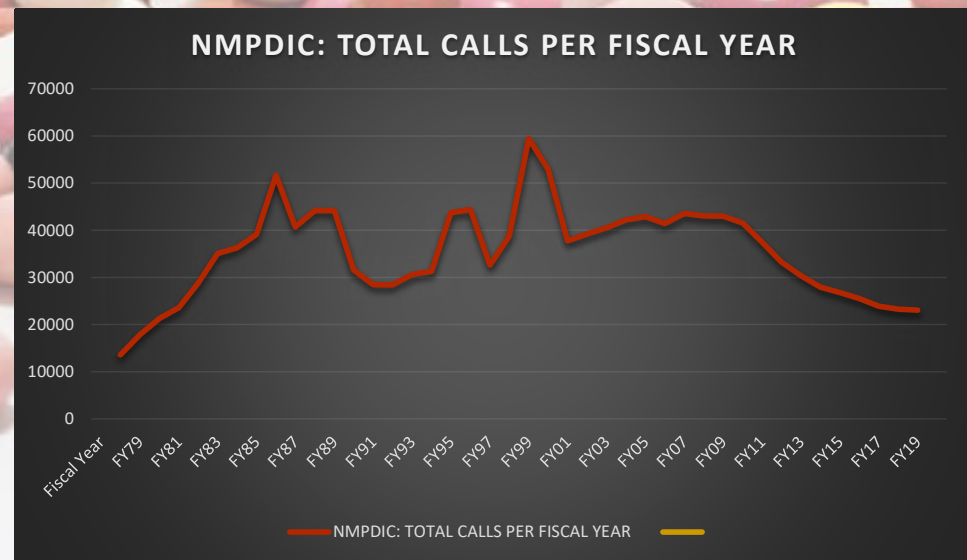


Fig. 2 Call History per Fiscal Year

NMPDIC PROGRAM SUMMARY FOR FY19

Program Performance Measure	FY19	FY 18	FY 17	FY 16	FY 15
Number of total calls	23,079	23,298	23,930	25,534	26,794
Number of drug information calls	1,336	3,024	3,746	4,392	5,236
Number of poisoning exposure calls	19,576	21,254	20,184	21,023	21,556
Number of poisoning exposure calls from home	13,472	13,732	14,566	1,527	15,765
Number of poisoning exposures treated safely at home*	11,053	11,260	11,798	12,358	12,927
Percentage of exposures treated at home	82%	82%	81%	81%	82%
Cost savings associated with home treatment (assuming each emergency dept. vist costs \$1,050)**	\$11.6M	\$11.8M	\$12.4M	\$13M	\$13.5M
Number of health care facility consultations with a toxicologist or specialist	6,637	4,878	5,000	4,847	5,212
Cost savings associated with poison center toxicologist involvement in exposures treated in health care facility (assuming each consult saves \$2,361/day x 3.2 days)***	\$50.1M	\$36.9M	\$37.8M	\$36.6M	\$39.4M
Total cost savings	\$61.7M	\$48.7M	\$49.6M	\$52.9M	\$42.4M
Number of students taught	67	80	60	62	65

*Caller from non-health-care facility treated or observed at non-health-care facility
**2010 DHHS Medical Expenditure Panel Survey extrapolated to 2015

Fig. 3 NMPDIC Program Summary for last 5 Fiscal Years

NMPDIC Calls by County, FY19

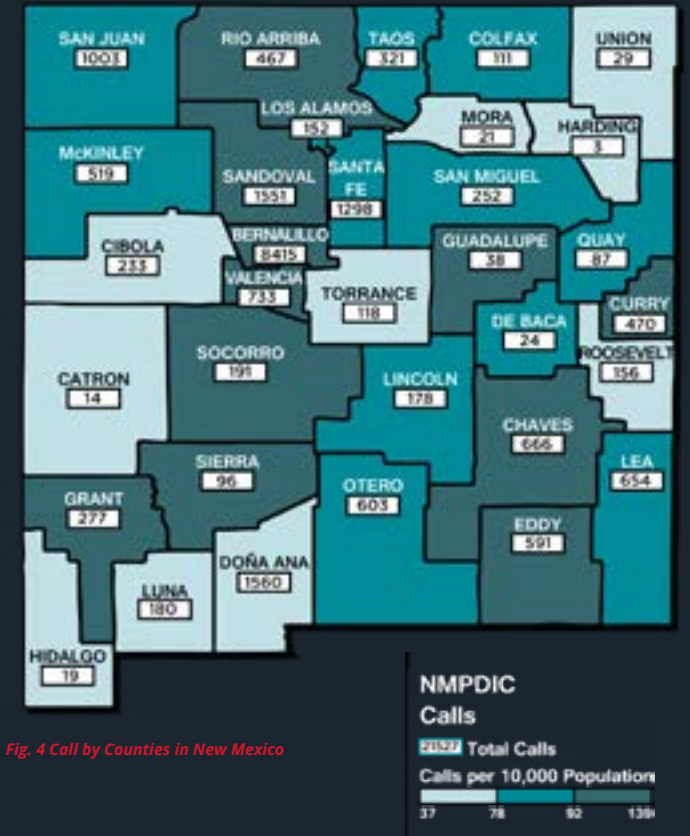


Fig. 4 Call by Counties in New Mexico

NMPDIC: FY19 Poisonings by Substance

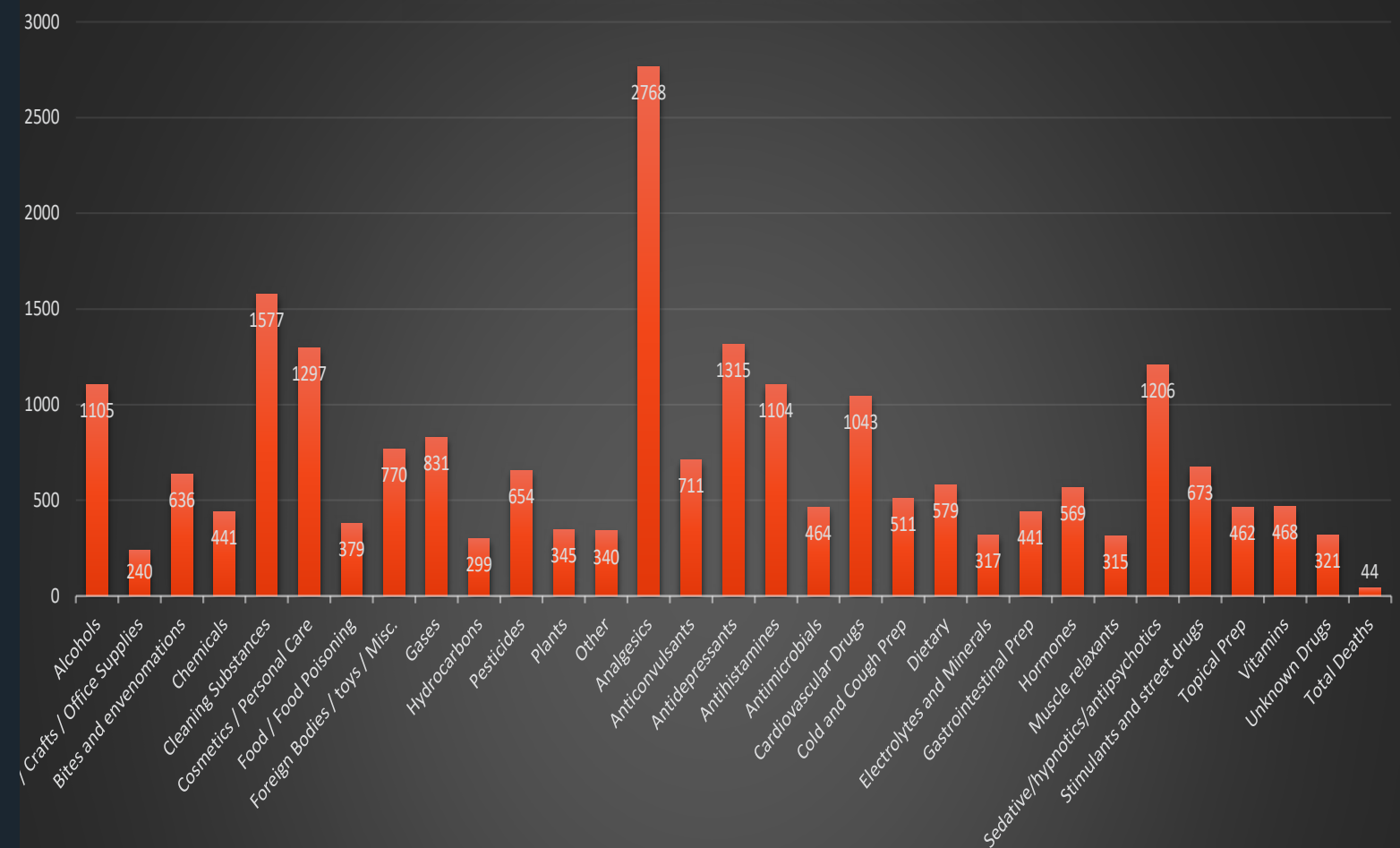


Fig. 5 Substance Calls to NMPDIC



BITES AND STINGS

American Association of Poison Control Centers

Did you know your local poison control center has the expertise to help you prevent and treat bites and stings? No matter where you live, the best prevention is to keep the Poison Help hotline number (1-800-222-1222) programed in your phone.

How to Prevent a Snake Bite

The species of venomous snakes in the U.S. include copperheads, rattlesnakes, cottonmouths, and coral snakes, though not all of these species occur everywhere in the country. Most calls to poison control centers about snakes and snake bites occur between May and September. Most snakebites occur when people accidentally step on or come across a snake, frightening it and causing it to bite defensively. By practicing extra caution in snake-prone environments, many of these bites are preventable.

-Prevent a snake bite by wearing protective clothing and using a stick to scare away snakes hiding in tall grass. Never touch or handle a snake.

-If you are bit, do not apply a tourniquet or attempt to suck out or cut out the venom. Call the Poison Help line (1-800-222-1222) right away and seek additional medical help if advised by a poison expert.

Moreover, not all bites from venomous snakes result in the injection of venom. This is often called a “dry bite.” By calling a poison control center for help right away, the poison experts will advise you the proper first aid for your situation.

How to Treat a Bee Sting

Stings from bees, wasps, and yellow jackets can be painful. Along with a stinger, these insects may inject a venom under the skin! The result is generally a painful, itchy bump, but someone who is allergic to the venom may have a stronger, life-threatening reaction. Here are first aid tips for these stings:

-If someone is experiencing an allergic reaction (trouble breathing, chest tightness, or swelling somewhere other than the sting site), call 911 right away.

-Use a dull, firm surface, like the edge of a credit card, to gently push the stinger out of the skin.

-Do not pinch or use tweezers. This can squeeze more venom to enter the skin.

How to Prevent Bites from Disease-Carrying Insects

There are many infectious diseases that people can get from biting or stinging insects, especially mosquitoes and ticks. According to the CDC, some of the most notable diseases include Rocky Mountain Spotted Fever and Lyme Disease from ticks, and West Nile and Zika Viruses from mosquitoes. Preventing these bites in the first place can protect you and your family from disease.

One of the best ways to prevent bites from disease-carrying insects is to apply insect repellent whenever you spend time outdoors, especially during the warmer months. Here are some tips for safely using insect repellents:

-Concentrations of up to 30% DEET have been shown to be safe for use on children older than 2 months, but be sure to follow application instructions carefully.

-Only use bug spray that is meant to be used on skin; never use household insect or pest killer on the skin.

-Be sure to follow application instructions carefully, and wash off the product once returning indoors.

-If anyone ingests, inhales, or sprays insect repellent into the eyes, call Poison Help at 1-800-222-1222 immediately. If you have general questions about selecting, storing, or using insect repellent and other pesticides, visit the National Pesticide Information Center's website or call them at 1-800-858-7378 (Mon-Fri, 8am-12pm Pacific Time).

Other Biting or Stinging Creatures

Depending on where you live and the time of year, there may be other creatures to be aware of scorpions in the southwest, jellyfish along the coasts, and even a few venomous spiders. Review the educational materials provided by your local poison control center to learn more about other biting and stinging creatures in your area.

TOBACCO AND LIQUID NICOTINE



Graphic Illustration by Scott M. Roberts

American Association of Poison Control Centers

Each year, America's poison control centers answer thousands of calls about exposures to tobacco products like cigarettes, e-cigarettes, and chewing tobacco. Exposures to these and other products containing nicotine can cause nausea, vomiting, and dizziness. In serious cases, exposure can lead to life-threatening and severe symptoms like seizures, decreased heart rate, and decreased blood pressure. These symptoms can happen to anyone of any age, but the risk is greatest in children due to their size. While nicotine in any form can cause poisonings, since 2011 poison control centers have been most concerned about exposures to e-cigarette products and liquid nicotine. This is because the concentration of nicotine in liquid products is higher than most other tobacco products.

One could be exposed to the liquid nicotine in an e-cigarette or e-liquid (vape juice, smoke juice) by drinking it, spilling it on the skin, or breathing in too much vapor. To prevent exposure to e-cigarettes and liquid nicotine, AAPCC recommends the following: Always store products up, away, and out of sight of kids. Because these products may smell or look like kid-friendly foods, kids may be tempted to touch or taste them. Use caution when refilling or handling liquids. Wash your hands with soap and water, and clean up any spills immediately. Talk to your teens about the health effects using e-cigarettes or “vape” products. If someone has been exposed to nicotine, especially a child, call the Poison Help hotline at 1-800-222-1222 right away.

American Association of Poison Control Centers

DAYCARE & SCHOOLS

While the end of summer is an exciting time for kids, parents, and educators, it is also a time for an increased risk of illness or injury as students head back to school. According to the Centers for Disease Control (CDC), more than half of students (ages 5-17) miss 1-5 school days each year due to illness or injury. Studies show that students with more absences have lower scores on national standardized tests. In short, attendance is a key indicator of student academic achievement. To reduce illness, schools may use cleaning products called “antimicrobials” to kill germs like bacteria and viruses. Antimicrobials play an important role in protecting public health by helping to keep people well enough to work, lowering school absences, and reducing indoor allergens. However, antimicrobials also contain chemicals that may cause serious health problems if used in the wrong way or in the wrong amounts. There are two types of commonly used antimicrobials: Sanitizers are the weakest antimicrobials available to the public. Some are used to reduce bacteria on surfaces that touch food, while others should only be used for non-food contact surfaces. Always read the label to find out how to safely and properly use any sanitizer. Disinfectants kill or prevent the growth of bacteria and fungi. Some also target specific viruses. They are the most commonly used antimicrobial in medical settings, and are also used in residential settings to disinfect household surfaces. Disinfectants should never be used on surfaces that come into contact with food. Children are especially sensitive to cleaning chemicals like antimicrobials. Cleaning substances that don’t cause harm to adults can still be harmful to students. Natural curiosity increases the chances of a child coming into contact with hazardous chemicals. These scenarios include:

- Licking surfaces or placing hands or objects in their mouth
- Breathing in toxic vapors or fumes
- Absorbing chemical residues through the skin
- Rubbing eyes after touching treated surfaces

The American Association of Poison Control Centers (AAPCC) and the National Pesticide Information Center (NPIC) offer a few simple steps to help prevent poisonings at daycare and school: Store cleaning products and chemicals up, away, and out of sight of children, and in their original containers. Keep the following substances in cabinets secured with child-resistant locks: Common cleaners and disinfectants Disinfecting wipes Alcohol-based hand sanitizers Bug sprays and insect repellents It is also important to remember that some cleaning products, like bleach and ammonia, can create highly toxic fumes when combined. NEVER mix cleaning chemicals! Read and follow label instructions. Make a habit of reviewing the label on any chemical or product before each use. Follow usage directions, and the directions provided for safe storage and disposal. For antimicrobials to be effective, the surface must stay wet for the amount of time listed on the label. Call NPIC at (800) 858-7378 if you have any questions about the product and the directions. Be prepared for an emergency. Contact Poison Help immediately at 1-800-222-1222 if you suspect that a student or staff has been accidentally exposed to a dangerous substance, or is showing symptoms. Seeking the medical expertise of a poison control center specialist could be lifesaving. The best way for teachers and caregivers to be prepared in the event of any poisoning emergency is to save the contact information for poison control into their smartphones simply by texting “POISON” to 797979. Also, make sure to display the contact information for poison control throughout your daycare or school, in case of emergency.

OVER-THE-COUNTER

Parents play a critical role in helping their tweens learn about the responsible use of OTC (over-the-counter) medicines. With approximately 10,000 kids under age 18 visiting emergency departments every year due to errors from self-administering OTC medications², it is important for parents and guardians to discuss the safe use and storage of OTC medicines with their tweens. The OTC Medicine Safety program equips parents, teachers, and guardians with the necessary materials to help facilitate these critical conversations. Below are medicine safety guidelines from the OTC Medicine Safety program. Teach these practices to your tweens to encourage life-long safe use of all medicines. More tips for parents and caregivers on starting this critical conversation can be found here . Be sure to read and follow the medicine label every time. Be sure never to share your medicine with someone else or use someone else’s medicine. Remember to always use the dosing device that comes with the medicine. Take only one medicine at a time with the same active ingredient. Store all medicines up and away and out of reach and sight. Be sure to only take medicines with the permission and guidance from a parent or trusted adult. The OTC Medicine Safety program includes resources and engaging educational activities specifically designed for parents and teachers of tweens to increase knowledge of OTC medicine safety and responsible use. The program places special emphasis on the message that tweens should only take OTC medicines with the permission and supervision of parents or guardians. The program has been customized for teachers, nurses, families, and communities, in addition to offering several extra resources to enhance learning, like videos, a digital story book, an interactive Home Hazards game, and a family guide. Want to share this terrific resource on social media? Make sure you use #OTCed!



Disinfectants

Sanitizers

Safety

Checklist

Does your classroom pass the test?

To help prevent poisonings in the classroom, here are a few simple steps to keep kids safe at daycare and school:

- ☒ Handwashing works better than hand sanitizers. Encourage frequent handwashing among students and staff.
- ☐ Always carefully read the label before selecting any cleaning products to use in your classroom, including sanitizers and disinfectants. The “Directions for Use” are specific to each product, and the product may not work if you don’t follow them.
- ☐ Do NOT mix different cleaning, sanitizing, or disinfectant chemicals!
- ☐ Children can help tidy up, but only adults should be allowed to use cleaning products.
- ☐ Products meant to kill germs (“antimicrobial” products like sanitizers and disinfectants) should be used only when children are not present.
- ☐ When using an antimicrobial product, make sure the area is well ventilated while the product is being used and before the area is reoccupied, especially by children.
- ☐ All cleaners, sanitizers, and disinfectants should be stored out of sight and reach of children, and in their original containers. Read the label for instructions when it's time to throw them away.
- ☐ When using an antimicrobial product, make sure the area is well ventilated while the product is being used and before the area is reoccupied, especially by children.
- ☐ An adult should always apply insect repellents, and students and staff should wash their hands after each application.
- ☐ If your classroom has a pest problem, report it rather than trying to control it yourself. Pest control within schools should be done by your school IPM (integrated pest management) coordinator or a certified applicator.
- ☐ Be prepared in case of a poisoning emergency. Save the contact information for poison control (1-800-222-1222) in your phone, and post it somewhere visible in your classroom.
- ☐ If you have general questions about selecting, storing, using, or disposing of insect repellents, antimicrobials, and other pesticides, contact NPIC at 800-858-7378.

American Association of Poison Control Centers



2019 DAILY NUMBERS

Day of the Month	January	February	March	April	May	June	July	August	September
1	158	190	153	152	158	173	174	189	167
2	178	143	146	177	180	152	158	167	149
3	163	143	153	150	160	200	152	190	194
4	159	145	159	158	137	157	166	176	165
5	149	177	159	149	153	166	160	171	150
6	146	160	160	159	180	179	171	144	161
7	142	172	173	166	160	192	152	158	165
8	152	190	178	151	159	172	164	139	157
9	166	152	138	167	163	169	152	166	165
10	156	157	149	159	166	171	163	168	181
11	146	148	155	166	160	160	163	151	153
12	138	140	160	168	171	179	167	158	186
13	140	134	160	148	161	155	150	166	155
14	155	157	152	148	137	173	166	166	167
15	153	169	165	142	159	184	166	147	167
16	147	150	180	164	165	162	144	164	162
17	178	167	155	180	158	182	1157	140	164
18	163	146	177	162	150	170	168	144	161
19	144	159	155	151	140	162	149	148	161
20	146	147	154	149	149	174	146	169	170
21	134	155	169	162	147	196	146	189	158
22	157	154	166	151	150	151	129	173	170
23	161	155	146	141	161	168	153	171	168
24	140	141	149	160	196	180	171	139	151
25	152	138	142	162	163	144	166	170	158
26	153	177	149	159	160	210	150	148	152
27	152	160	137	159	174	173	168	158	146
28	165	163	169	153	179	177	184	159	148
29	169		142	123	165	152	170	168	118
30	142		149	177	150	163	160	156	106
31	134		124	180		151	183		
Total for Month	4738	4389	4823	4713	4991	5146	5936	5035	4775

OPIOID (NARCOTIC) PAIN MEDICATIONS

Prescription opioids (otherwise known as narcotics) are a subcategory of analgesics, which are pharmaceuticals that relieve pain. According to the National Institute on Drug Abuse (NIDA), "[Opioids] reduce the intensity of pain signals reaching the brain and affect those brain areas controlling emotion, which diminishes the effects of a painful stimulus." Opioids can be dangerous if misused or abused. According to the Center for Disease Control and Prevention (CDC), opioids caused more than 42,000 deaths in 2016, the highest number of opioid-related-deaths to date.

Additionally, the CDC states nearly two million Americans were dependent on or abused prescription opioids in 2014. Each day, almost 1,000 people are treated in emergency departments for using these drugs in a manner other than as directed. In

recent years there has been a dramatic increase in the acceptance and use of prescription opioids for the treatment of chronic, non-cancer pain, such as back pain or osteoarthritis. The United States is in the midst of a prescription painkiller overdose epidemic, due at least in part to the over-prescribing of opiate medications by health care practitioners.

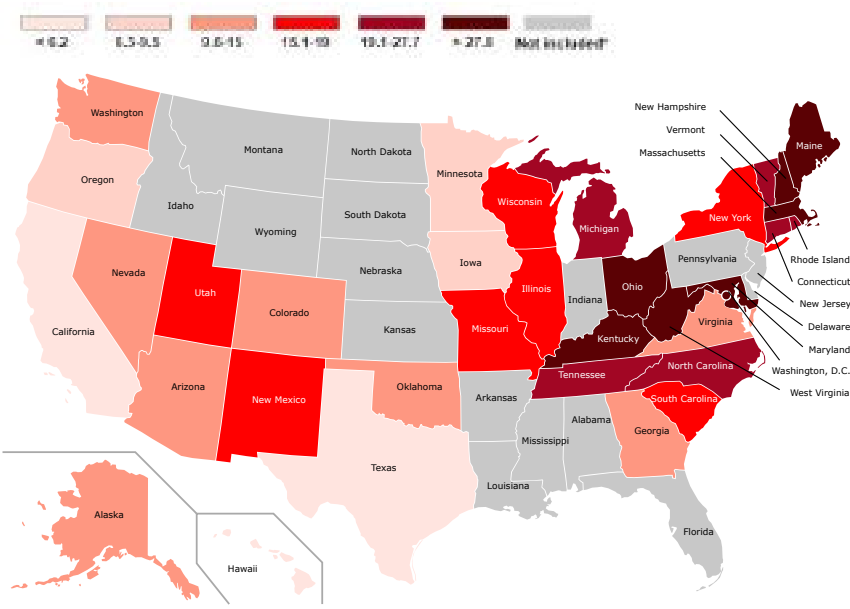
NPDS statistical analyses indicate that all analgesic exposures including opioids and sedatives are increasing year over year. This trend is shown in Table 17b and Figure 5 in the 2017 NPDS annual report. NPDS data mirror CDC data that demonstrates similar findings.

As of September 30, 2019, poison control centers have managed 43,569 opioid substances exposure cases. For more information on how poison control center data is collected, please click here.

Opioid Summaries by State

Revised May 2019

2019 Opioid-Involved Overdose Death Rates (per 100,000 people)



State Opioid-Involved Overdose Death Rates and Opioid Prescribing Levels

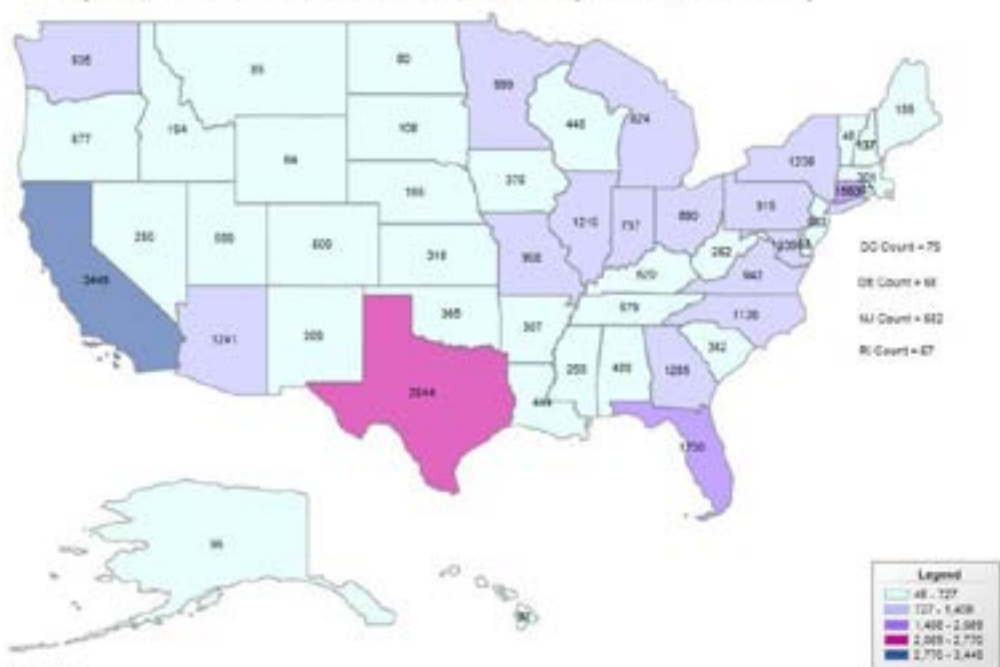
State Opioid-Involved Overdose Deaths/100,000 persons ¹ (2017) Opioid Prescriptions/100 persons ² (2017)

New Mexico 16.7 56.4

https://www.drugabuse.gov/drugs-abuse/opioids/opioid-summaries-by-state



Opioids Calls to U.S. Poison Centers (1/1 - 7/31/2019)



PLEASE NOTE:
- These data are only representative of calls received by the poison centers and may not reflect the actual severity of the problem in the U.S. or any specific geographic location.
- To date, no mandatory reporting, thus may be emergency room presentations and hospital admissions of which poison centers are unaware.
- Subject to the above factors, these numbers are largely reflective of those cases where the user has experienced adverse effects from the use of these products significant enough to warrant poison center or other health professional assistance, not all individual cases and thus are not predictive of all poison center or all emergency room cases.
- Additionally, the data are a good measure for identifying and understanding patterns of adverse medical outcomes associated with drug use.
- For more information about the American Association of Poison Control Centers (AAPCC) data, please visit: <http://www.aapcc.org/data-reporting/>

Kyndall Monroe
PharmD
Certified Specialist in Poison Information
3 years

What is the best thing working at NMPDIC?

We make a difference in almost every single case we are involved in. We keep kids at home when they don't need to go to the ER and we help to reassure parents that their children will be fine when it is appropriate. Alternatively, we are able to quickly assess and refer into an emergency room when something is a problem. Many healthcare providers do not have the understanding of pharmacokinetics like we do, especially in overdose, and are not aware of many drugs that can have severe delayed effects. We give specific recommendations to healthcare providers which saves tens of millions of dollars per year in unnecessary healthcare costs. We also tend to shorten hospital stays and have better outcomes when we are involved.

What was your greatest moment this year?

We had a patient who was very ill in the hospital after intentionally overdosing on his medications. He said he took a fairly benign medication in overdose but he was having very severe effects. We were giving a very expensive antidote for antifreeze poisoning and sending special blood samples to a lab to try to rule out the toxic alcohols. These samples usually takes many hours or even days for these labs to result. The lab made a mistake and destroyed all of the samples that we had been waiting on for several days. The hospital had also run out of the antidote. I did a bit of digging into the patient's medical conditions and asked the nurse if the patient overdosed on a look-alike/sound-alike medication that was more in line with the patient's medical conditions. I was correct: it was a very common diabetic medication. With this information, we were able to save thousands in healthcare dollars and better treat the patient. The patient recovered quickly.

Random bit of trivia about yourself?

Every Saturday morning in high school, I was out participating in regional Quiz Bowl (trivia) tournaments. Since high school, I have participated in several national trivia tournaments and play local pub trivia weekly. We have a national toxicology meeting coming up and they have a Quiz Bowl competition. My coworker and I will be representing the West Coast Quiz Bowl team.

LaDonna Bonnin
BS Pharm
Certified Specialist in Poison Information
Team Lead
17 years

What is the best thing working at NMPDIC?

The NMPDIC presents a unique practice site for pharmacists. The collaboration with other health care professionals across the state gives me great satisfaction while presenting the opportunity for continued learning on a daily basis. Our calls from the general public, though, tend to be the most rewarding in that there is no better feeling that setting a caller at ease in knowing their loved one is going to be fine after a poisoning emergency or will receive the best care if medical evaluation is necessary.

What was your greatest moment this year?

I'm excited about taking on the Team Lead position this year. This position has allowed me to be a link between the SPIs and administration which has opened up communication for a more productive work place. It's also given me the opportunity to work on projects that are important to me and to give other SPIs time off the phones to work on projects as well as giving support to the call center when necessary.

Random bit of trivia about yourself?

I'll be running my first half marathon in February and am super nervous about it.

Warner Wolf
PharmD
Specialist in Poison Information
1.5 years

What is the best thing working at NMPDIC?

Having an opportunity to directly impact the outcome of potentially fatal exposures.

What do you think went well this year?

The release of Anavip has been exciting in regards to management of snake bites as well as flowing for effects outpatient.

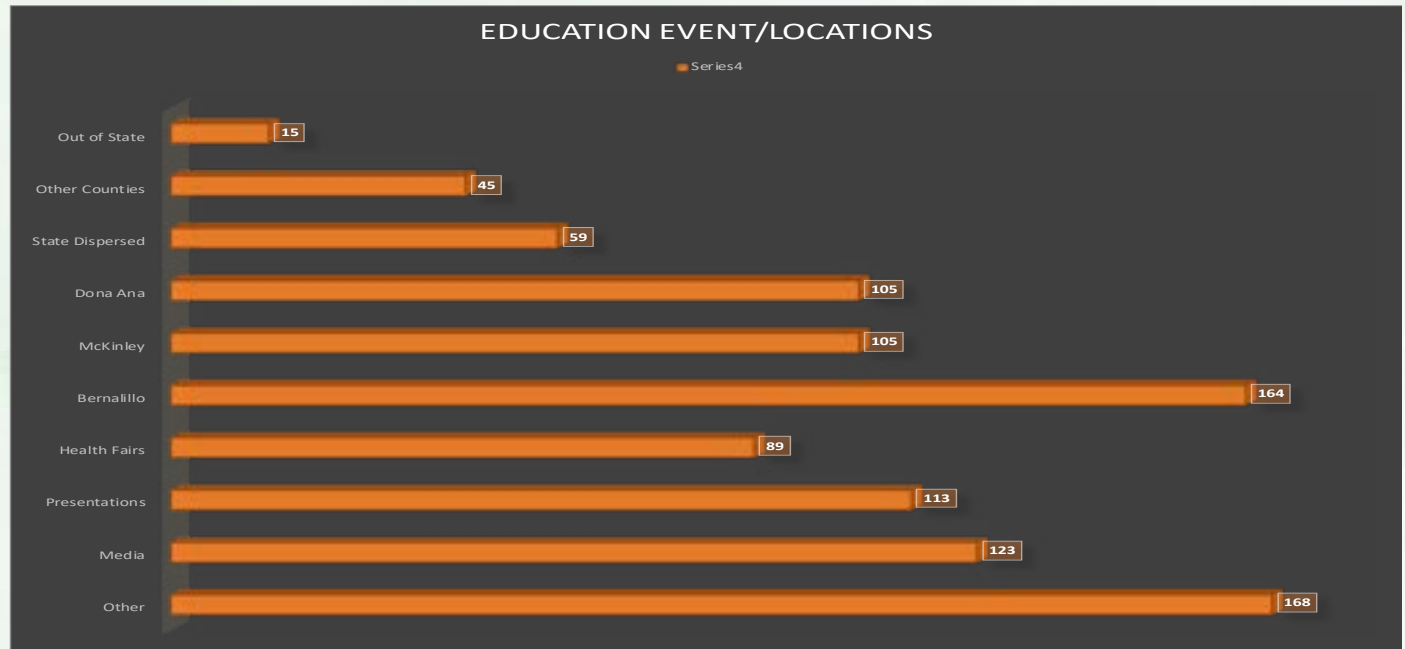
What was your greatest moment this year?

My trip to the Philippines.

Random bit of trivia about yourself?

Favorite food is fried chicken.

NMPDIC PUBLIC EDUCATION SUMMARY PER FISCAL YEAR



Jacqueline M. Kakos

The NMPDIC health education consultant, Jacqueline Kakos, traveled to a conference in Arizona to assess the needs of Navajo Nation professionals regarding poison prevention efforts. Eighty-two participants filled out a survey. The results will be tabulated, fully analyzed and presented in an official report during the fall of 2019.

In response to the decades-long opioid epidemic in America, Jacqueline worked in collaboration with the UNM College of Pharmacy and the New Mexico Department of Health on a research project that studied the attitudes, normative beliefs, self-efficacy with respect to self-guided dispensing of naloxone, and dispensing of other disease prevention supplies among pharmacists and pharmacy technicians. The ultimate goal of the project, Consider New Mexico, was to increase naloxone dispensing among these healthcare professionals as result of the study intervention. During the next fiscal year, Jacqueline will continue to function as an outreach specialist in the second phase of this research project.

Steven A. Seifert

Professional education and public health efforts continued at a brisk pace. In FY 19 Dr. Steven Seifert, the NMPDIC Medical Director, who had served on the Governor's Advisory Panel on prescription opioid deaths as the statutory representative of the University of New Mexico since 2012, stepped down, with Dr. Brandon Warrick assuming that appointment. Within the University of New Mexico campus, the NMPDIC served as a 4-week teaching site for 65 pharmacy students, 31 medical residents (16 EM, 13 IM, 2 Pediatrics), 2 medical fellows, 9 medical students and 1 Physician Assistant student.

Additional educational programs included resident and faculty presentations to the Departments of Internal Medicine, Pediatrics, Pathology, Psychiatry, and Emergency Medicine. In addition, Dr. Seifert continued a quarterly state-wide webinar program and other educational offerings throughout the University and state. Dr. Seifert continued as Editor in Chief of Clinical Toxicology (Taylor & Francis), the official journal of the American Academy of Clinical Toxicology, the European Association of Poison Centers (EAPCCT) and

Clinical Toxicologists, the American Association of Poison Control Centers, and the Asia Pacific Association of Medical Toxicology.

Dr. Seifert has contributed to the advancement of toxicological knowledge and its dissemination through original research and presentations at national and international meetings, publication of scholarly papers and medical textbook chapters, and again served on the Scientific and Meeting Committees, and was an abstract reviewer, for the EAPCCT annual meeting.

Dr. Seifert continued to serve as Treasurer of the North American Society of Toxicology.

Dr. Seifert received the Volunteer Faculty Award from the UNM College of Pharmacy and the Presidential Merit Award by the American Academy of Clinical Toxicology at the annual North American Congress of Clinical Toxicology meeting.

Dr. Seifert also continued to perform with his jazz combo in the Arts-in-Medicine concert series at


Brandon J. Warrick

the UNM University Hospital.

Doctor Brandon J. Warrick is the NMPDIC Associate Medical Director and Board Certified in Medical Toxicology, Emergency Medicine, and Addiction Medicine. He regularly meets with multiple governmental and regulatory agencies aimed at the current overdose epidemic. In FY 18, Dr. Warrick authored a position defining initiation of opioid agonist treatment in the emergency medicine setting. At the national level, Dr. Warrick was recognized as a "Top contributor" by the American College of Medical Toxicology the second year in a row. Dr. Warrick was also invited by the Royal Canadian Mounted Police to assist in defining protocols in handling of fentanyl specimens. Dr. Warrick is heavily involved in teaching and pioneering more effective teaching methods for the toxicology rotation. In addition to the poison teaching service, Dr. Warrick has been regularly teaching to College of Pharmacy and School of Medicine students. Dr. Warrick has provided outreach education for multiple groups around the state.

NMPDIC

The NMPDIC continues to face significant financial challenges, with some state resources reduced during FY18 and FY19 and at risk in future years. Although the program has been able to provide uninterrupted telephone service to New Mexico, the reductions made in marketing, outreach, and education over the past three years have contributed to a decline in program utilization by home callers while increasing utilization among healthcare professionals. Over the next year, the NMPDIC plans to continue innovative, community-driven public education programs, use technology more effectively to deliver professional education programs, and develop a broader array of professional education offerings.



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NMPDIC

FY19

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