

Priority Topic: POISONING

Key Features:

1. As part of well-child care, [discuss preventing and treating poisoning](#) with parents (e.g., “child-proofing”, poison control number).

What you should study:

- ✓ [Poisoning Prevention AAP 2015](#)
- ✓ [Preventing Medication Poisoning - Resource Guide 2016](#)

2. In intentional poisonings (overdose) think about [multi-toxin ingestion](#).

What you should study:

- ✓ [Medication Poisoning AAFP 2010](#)

3. When assessing a patient with a [potentially toxic ingestion](#), take a careful history about the [timing and nature of the ingestion](#).

What you should study: **WHAT, WHEN, HOW MUCH**

- ✓ [Childhood Poisoning AAFP 2009](#) (there's just one line on this... couldn't find anything better)

4. When assessing a patient with a potential poisoning, do a focused physical examination to look for the [signs of toxidromes](#).

What you should study:

- ✓ [ER Management of Acute Poisoning](#) **(this is a great review article!)**
- ✓ [Toxidrome Chart Uptodate](#)
- ✓ Toxidromes from [SketchyMedicine.com](#):
<http://sketchymedicine.com/2012/01/toxidromes/>

5. When assessing a patient exposed (contact or ingestion) to a substance, [clarify the consequences of the exposure](#) (e.g., don't assume it is non-toxic, call poison control).

What you should study:

- ✓ [Childhood Poisoning AAFP 2009](#) **(doesn't EXACTLY address this, but close)**

6. When managing a toxic ingestion, [utilize poison control protocols](#) that are current.

7. When managing a patient with a poisoning,

- a) Assess ABC's,
- b) [Manage ABC's](#),
- c) Regularly reassess the patient's ABC's (i.e., [do not focus on antidotes and decontamination while ignoring the effect of the poisoning](#) on the patient).

What you should study: know how to run a code - Mike Kirlew's podcasts are great for this. Have an ABC's algorithm memorized. Then know how to decontaminate and know your antidotes!

- ✓ [ER Management of Acute Poisoning](#) **(Table 2 for antidotes)**