

Comparing Online Poison Triage System to Poison Control Center

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Background

A new web based poison triage system (webPOISONCONTROL ®) allows users to access poison control information and guidance through the internet rather than calling poison control centers (PCC). We seek to compare dispositions through this web-based triage system (WBTS) to PCC.

Research Question

Are the dispositions provided through WBTS concordant with dispositions given through PCC?

Methods

This is a consecutive sample study. We reviewed calls to a PCC for oral ingestions during 2015 with disposition to remain at home. We then simulated each of these cases through the WBTS to compare disposition to the actual disposition resulting from live contact through a PCC. We classified the WBTS outcomes as referral to ED, referral to PCC, or remain at home. We classified WBTS outcomes leading to direct referral to ED as discrepant with PCC outcomes. We classified WBTS outcomes leading to referral to PCC or remain home as concordant with PCC outcomes.

Results

We reviewed 206 total calls of which 103 were defined as moderate outcome and 103 were defined as minor outcome. Of 206 total dispositions through the WBTS, 26 (13%) were to "remain home," 180 (87%) were "referral to PCC," and none were "referral to ED."

Discussion

The minority of WBTS outcomes of "remain at home" were concordant with outcomes of live calls to the PCC. A majority of WBTS outcomes were "referral to PCC" for multiple reasons and were, by definition, concordant. No WBTS encounter in this set led to a discordant outcome of "direct referral to the ED".

Conclusion

As nearly 90% of callers were referred to the PCC, the WBTS could not replace the PCC and it is questionable how much it improves our current system.