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186. The Current Status of the Practice of Inpatient Medical Toxicology at the Bedside in the US

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Background: Traditionally, the provision of medical toxicology (MT) consultation to patients has occurred remotely over the telephone as a poison center service. In recent years, an increasing number of medical toxicologists have established consultative and inpatient services where the delivery of consultation has shifted to the bedside. This bedside consultation model is comparable to the standard practice pattern of most other medical specialties. We investigated the current prevalence of bedside toxicology practice in the U.S.

Methods: An electronic survey was sent to all American College of Medical Toxicology (ACMT) members asking questions on bedside MT practice patterns. An inpatient MT practice was defined as providing care to the patient at the bedside either as a consultant or as the inpatient attending. Care delivered to the patient while working as the emergency physician or over the telephone was not considered MT bedside care.

Results: There are 500 members of ACMT. Of these 350 are board certified in MT (the others are trainees, recent graduates who have not yet passed the boards, international members or emeritus members). These 350 represent 90% of those who are board certified in MT. 114 ACMT members answered the survey. 95 (83% of respondents) have an inpatient MT practice. In some cases, 2 or more members from the same program (or site) responded to the survey. Taking into account duplicative responses from the same program, we identified 45 distinct sites that see inpatients at the bedside and record the number of patients that they see each year. The aggregate numbers of patients seen in the past year by these centers exceeded 14,000. Individual site census varied from 10 to more than 1000 per year. Most respondents expressed an interest in participating in a national research network and/or bedside based toxicosurveillance system.

Conclusions: This is the first study providing information about the prevalence of inpatient MT practice in the U.S. Although a historic comparison of prevalence of this type of practice is not available, it appears that there is growing diffusion of medical toxicologists into bedside patient care and a significant potential for multi-center collaborative research and surveillance.