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### **223. Medical toxicology referrals in the acute care setting**

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**Background:** Medical Toxicologists (MT) evaluate patients in several different acute care settings. The types of providers whom request such services have not been defined. Knowledge of who requests our services, and why, may enable MT to better market themselves. The Toxicology Investigators Consortium (ToxIC) is a registry that was created 2 yrs ago by the American College of Medical Toxicology. Deidentified, descriptive data obtained by MT during bedside encounters or office evaluations is entered into the database. We queried the database to better understand the source of toxicology referrals.

**Methods:** The ToxIC database was queried according to the source of referral using the advanced search option. The entire database was searched to obtain the total number of encounters in the registry. To determine the total number of referrals from each source of referral, multiple searches of the entire database were done with each source of referral as the main search term.

Patients seen in the outpatient setting were subtracted from those numbers so only patients seen in the acute care setting were included. The referral sources included the emergency department (ED), other hospital services (OHS), self-referral, outside transfer, poison center (PC), and primary care provider (PCP). The sources of referral were stratified according to the type of encounter. Data was compared to similar data available from the registry one year ago.

**Results:** The registry included 12,511 patient encounters. Of the 12,511 encounters, fifty-seven percent were from the ED and 18% from OHS. Compared to 1 year ago, fewer referrals were from the ED and more were from OHS when the percentages were 69% and 13%, respectively. Transfers were responsible for 14% of referrals, constant from a year ago. Few referrals were from the PC (5%) or a PCP (3%). Nearly 50% of referrals from the ED were for intentional overdoses. Adverse drug events and reactions represented 1% of ED referrals. There were 825 ED referrals (6.6%) for patients in withdrawal.

**Discussion:** The ED is the source of referral for most acute care consultations. MT are infrequently consulted by other services. The number of referrals initiated by the ED may be misleading as ED physicians might order the consultation at the request of the inpatient service. However, this may reflect that MT need to better market themselves to other providers. Most ED consultations were for management of drug ingestions. Only a few were for patients actively withdrawing or for adverse drug events or reactions. This could be evidence that MT can improve their marketing.

**Conclusions:** The ED is the source of referral for most acute care toxicology consultations. MT may want to improve marketing of their services to hospital providers.