Toxicology Case Conference

Thursday, 12/9/2021

Location: Zoom Meeting

Time: 1:30-3:00 PM

Leaders: Howard/Calleo

*Cases:*

1. 35-year-old male presents to the Emergency Department stating ~ 2 hours ago they took between 7.5 to 10 grams of diphenhydramine.  BP=180/125, HR=140. Other Vitals could not immediately be obtained.
2. 38-year-old female presents to the ED unresponsive after "seizure" event at home. Patient is on chronic pain meds after back surgery. Significant other states that she has been taking at least 25 tabs of Imodium per day as she ran out of pain meds.  BP=160/106, HR=110's, O2=96% on room air, RR=18, T=37.2 C.
3. A 43-year-old female presents to the ED after reportedly taking 30 tablets of amlodipine about 1.5 hours prior to arrival. Vital signs are as follows: BP=100/60, HR=95, RR=16, O2=98%, T=36.9 C.

*Papers:*

1. Skryabin, Valentin Yurievich, et al. "Effects of CYP2C19\* 17 Genetic Polymorphisms on the Steady-State Concentration of Diazepam in Patients With Alcohol Withdrawal Syndrome." *Hospital Pharmacy* (2020): 0018578720931756.
2. Anderson, Erik S., et al. "Implementation of Oral and Extended-Release Naltrexone for the Treatment of Emergency Department Patients with Moderate to Severe Alcohol Use Disorder: Feasibility and Initial Outcomes." *Annals of Emergency Medicine* (2021).
3. Chan, Betty S., et al. "Clinical experience with titrating doses of digoxin antibodies in acute digoxin poisoning.(ATOM-6)." *Clinical Toxicology* (2021): 1-7.