**Toxicology Case Conference**December 16, 2021  
**1:30 – 3:00 pm**   
Location: Zoom (meeting details below)

1:30 – 2:30 pm: Toxicology Case Conference

2:30-3:00 pm: Journal Club

**Cases for Discussion:**

1. A 69 year old female was extricated from a house fire. EMS reports that it is unclear how long the patient had been in the house prior to fire arriving and it took the fire department over 10 minutes to remove her from the fire. Of note, the patient’s husband was also in the home and was unable to be resuscitated at the scene. The patient was unresponsive on scene and high flow oxygen was initiated. On arrival to the ED, she was awake and alert and complaining of shortness of breath. Vital signs: HR 104 bpm; BP 160/100 mmHg; RR 21 breaths/minute; 99% sats on non-rebreather. Serum lactate 9 mmol/L. Carboxyhemoglobin level 3.5
   * Questions to Ponder:
     1. What toxicity should be considered in house fire patients?
     2. What considerations/indications for hyperbaric oxygen therapy for CO poisoning?
     3. What considerations/indications for treatment with cyanide antidotes?
2. A 47 year old female is found unresponsive approximately 4 hours after an argument with a family member. The patient was found with empty bottles of acetaminophen and ibuprofen. She was intubated in the Emergency Department. Vital signs: BP 118/67 mmHg; HR 96 bpm; RR 20 breaths/minute on vent; 95% sats on vent. Initial BMP: Na 137; K 3.4; CL 104; Bicarb 10; BUN 7; Scr 1.09; glucose 415. Aspirin and ethanol levels negative. Acetaminophen 983 mg/L.
   * Questions to Ponder:
     1. What are causes of high anion gap metabolic acidosis? What do you think the cause of the anion gap acidosis in this patient?
     2. Would you consider this patient being at high risk for developing significant toxicity secondary to acetaminophen poisoning?
     3. What therapies would you initiate in this patient and why?

**Journal Articles:**

1) Ozgok-Kangal K. Long-term infant outcomes after hyperbaric oxygen treatment for acute carbon monoxide poisoning during pregnancy. Diving Hyperb Med. 2021 Sep 30;51(3):248-255. doi: 10.28920/dhm51.3.248-255. PMID: 34547775; PMCID: PMC8608441.

2) Rice JH, Akpunonu P, Davis GA, Dugan A, Litteral J, Webb AN, Wiegand A, Bailey A, Baum RA. Intravenous phytonadione administered orally in reducing warfarin-related coagulopathy. Clin Toxicol (Phila). 2021 Nov 9:1-3. doi: 10.1080/15563650.2021.1995871. Epub ahead of print. PMID: 34751053.

**Zoom Meeting Details:**

Please click this URL to start or join. <https://upstate.zoom.us/j/94022814635?pwd=ZXdZOFN3OFMrN1FjWlhOTGRid3YyUT09>

    Or, go to <https://upstate.zoom.us/join> and enter meeting ID: 940 2281 4635 and password: caseconf

Join from dial-in phone line:

    Dial: +1 646 876 9923 or +1 312 626 6799

    Meeting ID: 940 2281 4635

    Participant ID: Shown after joining the meeting

    International numbers available: <https://upstate.zoom.us/u/agSuvcevx>