

|-&gt;

Title 22@ Social Security

|-&gt;

Division 9@ Prehospital Emergency Medical Services

|-&gt;

Chapter 8@ Poison Control Center Regulations

|-&gt;

Article 2@ General Provisions

|-&gt;

Section 100201.02@ Poison Control Center Responsibilities

## **100201.02 Poison Control Center Responsibilities**

### **(a)**

In order to be designated as a regional poison control center a facility shall: (1) Be immediately available by a direct incoming telephone system to the public and health professionals within the poison control center service area; (2) have staff as defined in Section 100201.03(c) immediately available twenty-four (24) hours a day to answer poison exposure calls; (3) have, within the poison control center area, poison information resources which include at least the following: (A) One (1) or more current product information resources; (B) current texts covering both general and specific aspects of acute and chronic poisoning management available at the central telephone answering site; and (C) a list of poison center specialty consultants available on an on-call basis through a written agreement. (4) have access to journal articles and published studies regarding medical toxicology either in the poison control center or through access to a medical library. (5) have written treatment and triage protocols that are developed and updated by the poison control center program director and approved by the medical director. Each written protocol shall include the following elements: (A) Description and types of exposures which may need no medical intervention; (B) description and types of exposures which may be managed at home by simple therapeutic procedures in the professional opinion of the medical director, and a treatment and triage protocol for such management; (C) description and types of

exposures which may require referral for medical evaluation and/or treatment; (D) a protocol for initial patient management; (E) a protocol for determining the need for patient transport to a facility in accordance with the policies and procedures of the local EMS agency; and (F) a description of how the poison control center correlates with local EMS policies and procedures, including 9-1-1. (6) develop and maintain a poisoning data collection and reporting system as defined in Section 100201.05 and as required by Title 17, Sections 2500 through 2653. (7) develop and provide a poison oriented health education program for the public and health professionals to include at least physicians, nurses, prehospital emergency medical services personnel; and (8) develop and maintain a quality assurance program as defined in Section 100201.04.

**(1)**

Be immediately available by a direct incoming telephone system to the public and health professionals within the poison control center service area;

**(2)**

have staff as defined in Section 100201.03(c) immediately available twenty-four (24) hours a day to answer poison exposure calls;

**(3)**

have, within the poison control center area, poison information resources which include at least the following: (A) One (1) or more current product information resources; (B) current texts covering both general and specific aspects of acute and chronic poisoning management available at the central telephone answering site; and (C) a list of poison center specialty consultants available on an on-call basis through a written agreement.

**(A)**

One (1) or more current product information resources;

**(B)**

current texts covering both general and specific aspects of acute and chronic poisoning management available at the central telephone answering site; and

**(C)**

a list of poison center specialty consultants available on an on-call basis through a written agreement.

**(4)**

have access to journal articles and published studies regarding medical toxicology either in the poison control center or through access to a medical library.

**(5)**

have written treatment and triage protocols that are developed and updated by the poison control center program director and approved by the medical director. Each written protocol shall include the following elements: (A) Description and types of exposures which may need no medical intervention; (B) description and types of exposures which may be managed at home by simple therapeutic procedures in the professional opinion of the medical director, and a treatment and triage protocol for such management; (C) description and types of exposures which may require referral for medical evaluation and/or treatment; (D) a protocol for initial patient management; (E) a protocol for determining the need for patient transport to a facility in accordance with the policies and procedures of the local EMS agency; and (F) a description of how the poison control center correlates with local EMS policies and procedures, including 9-1-1.

**(A)**

Description and types of exposures which may need no medical intervention;

**(B)**

description and types of exposures which may be managed at home by simple therapeutic

procedures in the professional opinion of the medical director, and a treatment and triage protocol for such management;

**(C)**

description and types of exposures which may require referral for medical evaluation and/or treatment;

**(D)**

a protocol for initial patient management;

**(E)**

a protocol for determining the need for patient transport to a facility in accordance with the policies and procedures of the local EMS agency; and

**(F)**

a description of how the poison control center correlates with local EMS policies and procedures, including 9-1-1.

**(6)**

develop and maintain a poisoning data collection and reporting system as defined in Section 100201.05 and as required by Title 17, Sections 2500 through 2653.

**(7)**

develop and provide a poison oriented health education program for the public and health professionals to include at least physicians, nurses, prehospital emergency medical services personnel; and

**(8)**

develop and maintain a quality assurance program as defined in Section 100201.04.