Scope: This SOP provides the procedure to be followed by poison information specialist to provide timely and accurate poison information services.

Aim: To provide appropriate poison information in time to improve the health of the public by minimizing morbidity, mortality due to poisoning and also by minimizing or preventing poisoning.
Introduction

Handling the poison information query is the ultimate responsibility of the poison information specialist. To handle the query poison information specialist should have good skills in communicating clearly and concisely to elicit and /or present explanatory or interpretive information. It is necessary to establish and maintain effective working relationships with other employees of organisations and public in emergency and other situations. Poison information specialist should adopt the skill of reacting calmly and effectively in emergency and stressful situation.

Identifying those exposures that are potentially serious and require immediate medical assessment and those that represent a minimal risk of toxicity can greatly aid in effective management of poisoning. By identifying exposures that represent a minimal risk of toxicity, unnecessary presentations to doctors and hospital emergency departments can be avoided. Poison information specialist must assess each call carefully by listening to the caller and asking open-ended questions. Often the information provided by the caller is insufficient to give an accurate answer; in such cases further targeted questions should be asked. The poison information specialist taking the call must make a decision based on the information given by the caller, an assessment of the reliability of the history, their own clinical judgment and the information retrieved from the available sources.

If any complicated query for which information is not available or the enquirer is not satisfied with the information provided, then poison information specialist should contact/transfer the call either to the senior staff or Head of the Department to seek the expert advice.

Following are the steps to systematically approach poison information query.

**Step 1: Obtain requester’s demographics**
- Receive and accept the query related to the service either over phone or in person or by e-mail.
- Establish the identity of the enquirer by gathering contact details.
- Obtain all required information from requester that is necessary to provide appropriate information to the query.
• Obtain the enquirer’s position and anticipated knowledge, if the enquirer is a healthcare professional.
• Collect the enquirer’s contact number in cases where it takes time to obtain information to call back to enquirer to provide information.

**Step 2: Collect background information**

• Collect all the relevant background information to provide appropriate information.
• Collect the information regarding poisonous substances to identify the poisoning substance.
• Obtain the basic information such as age and/or weight of victim, substance/product name, route of contact (ingestion, inhaled, dermal, ocular), quantity and/or strength involved, time since exposure, patient's condition (signs, symptoms etc.), treatment received and health status of patient including medication history, allergies, relevant pre-existing conditions.

**Step 3: Assess the condition**

• Assess urgency of the situation in terms of whether the condition is an emergency, serious, not serious or no problem.
• Assess the likelihood of toxicity associated with the exposed toxins based on the nature of substance, type of exposure and quantity consumed.
• Assess the signs and symptoms of toxicity to determine the appropriate patient management, whether first aid, observation, medical treatment, home treatment or no treatment required for that particular condition.

**Step 4: Develop and conduct a search strategy**

• Select and priorities the information resources based on probability of locating the desired information. Use following resources to provide poison information.
• Search the information from database like POISINDEX to retrieve the comprehensive information in short time.
• Retrieve the poison information from standard treatment protocols to get information immediately, especially in emergency situation.
• Retrieve the information from standard textbooks and references.
• The information resources used should be documented on the basis of its usefulness in responding to query.
Step 5: Evaluate and provide the information

- Evaluate the retrieved information thoroughly and critically.
- Generate comprehensive information to ensure the recommended line of management is based on all of the current evidence available.
- Generate the response only after critically evaluating all the information available.
- Interpret the information available in various resources and information should be patient specific and is made considering all other factors.
- Take the decision based on professional knowledge and previous experience in case of lack of information or conflict of information in the available sources.
- Answer immediately to query related to potentially serious poisoning cases.
- Provide minimum vital information at the earliest possible time in cases where more time is required to evaluate and formulate the response.
- Provide the information either verbally/written/printed form/through fax or e-mail as appropriate and as per the enquirers’ request.

Step 6: Conduct follow-up and document

- Follow up the case to assess the patient outcome and also to ensure whether provision of any additional information is useful in the management of poisoning.
- Follow up the case by personal visit if the victim/patient is admitted to the hospital. In other cases follow up the case through other modes including telephone enquiry and e-mail.
- Document the details of enquirer, query and response in poison information documentation form (Hard copy and Electronic database).

Step 7: Maintain confidentiality

- Maintain the confidentiality of any issues relating to query for the socio-legal reasons.
- Do not disclose any information pertaining to query to anyone including family members and health care professionals without the consent of the enquirer.