

Poisoning information centre's call responder - An Additional Competency for Emergency Medicine Nurses

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The Poisoning Information Centre's objective is to provide adequate advice quickly so as to reduce the incidence of illness, damage to health and death as a result of severe cases of poisoning. Our centres are staffed with internationally trained and highly experienced doctors and nurses working in the fields of emergency medicine, anaesthesia and intensive care.

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Introduction

Estonian Poisoning Information Centre's (EPIC) mission is to provide adequate advice quickly so as to reduce the incidence of illness, damage to health and death as a result of severe cases of poisoning.

PICs often have to solve poisoning cases where the source and substance of toxin is unknown.

In different National PIC's call responders are pharmacists, nurses, junior physicians, clinical toxicologists. It has been hard to find specific rationale from literature how different centres have argued their choices regarding the background of call responders.

In America it has been advised, that ICU or emergency room background is useful before becoming a toxicology nurse (4,5).

In Estonia there is no toxicology nurses specialisation or Certification for PIC specialists. Neither are there additional toxicology courses to be chosen as elective subject in Estonian nursing schools.

While starting EPIC, was first impression, that emergency medicine (EM) nurses will integrate faster than other nursing specialists or pharmacists. Currently all call responders in EPIC are EM nurses. All new staff members are expected to have passed basic nursing course (Bachelor degree), specialization course and speak at least 4 languages – Estonian, Russian, English and Finnish.

The majority of calls were answered by nurses, assistance from clinical consultant has been needed very rarely: 2,6% (2008); 1,8% (2009); 2,67%(2010), 1,34%(2011), 0,25%* (2012, *April)

Method

Analysis of compatibility of study programmes for EMN and pharmacists in Estonian Health Care Colleges with guidelines for EPIC call responding described in the Poisoning Management Process Flow chart (Fig.1)

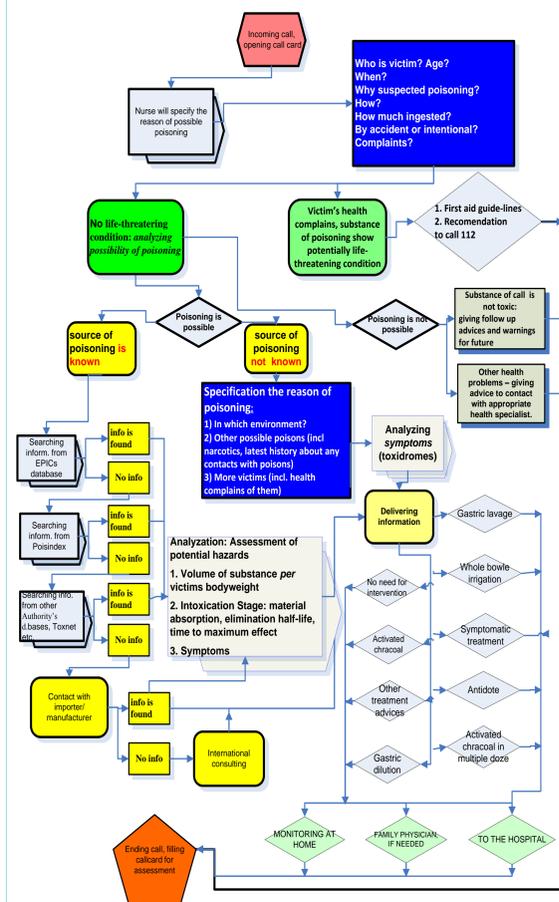


Fig.1 Poisoning Management Process Flow chart

Results

The nurse specialist in intensive care and EM nursing is competent to provide independent nursing care at all levels of healthcare including intensive care nursing and team leading in ambulance brigade. The study programme of a nurse specialist includes 3,5 years basic nursing education, 2 years of practice as a general nurse, plus a specialization course lasting a year.

62% of overall programme consists of speciality studies including different branches of nursing (Fig.3).

EM nurses are experienced in triage and the practice of providing first aid guidelines, thus having an advantage in interviewing cases when the source of poisoning is not known or the fact of poisoning is not sure.

The objective of the 3 year training programme for pharmacists is to train specialists competent in the field of pharmaceutical products and the pharmaceuticals production process. Pharmacists have an advantage when the source of poisoning is known. 56% of their study programme consists of speciality studies including chemistry, phytotherapy, medications effect to organism and dispensing of medications (Fig.2).

Aim

To describe Estonian PIC-s choice of call responder's on behalf of EM nurses.

Fig.2. Pharmacists Study Programme

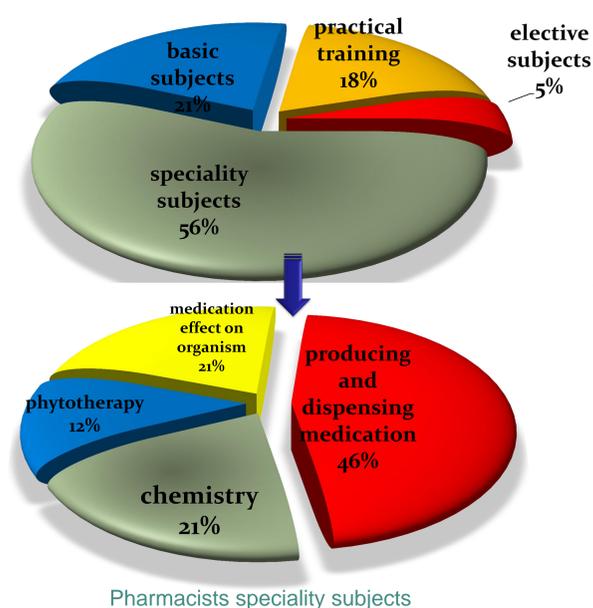
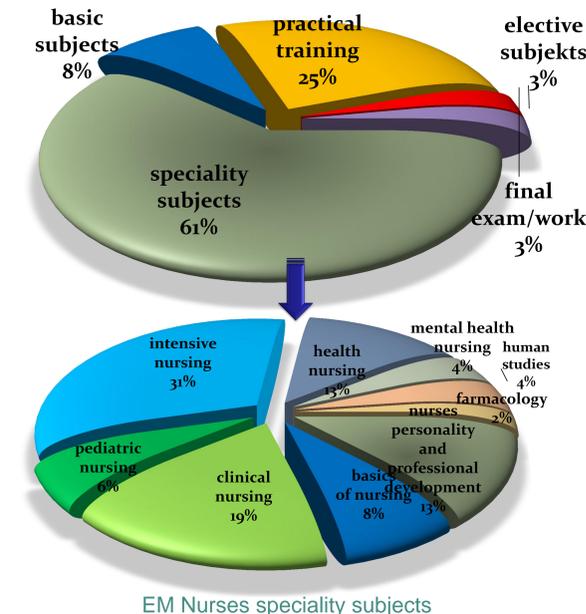


Fig. 3. Emergency Medicine Nurses Study Programme



Conclusion

In circumstances when a clinical toxicologist is not easily available, PIC call responders council poisoning victims, interpret clinical conditions and identify the possible toxic agent. Best prepared for this are EM nurses, whose course of study requires work experience in emergency situations and is directed to making independent treatment decisions in any health endangering circumstance.

Pharmacological emergencies are just one branch of all the toxicological emergencies PIC has to cope with, while toxicological emergencies are just one branch of all acute situations nurse-specialists of EM are trained to cope with.

Establishing an additional toxicology nurse's specialisation within the emergency nursing specialisation course in Estonia might be of value.

References

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