

Georgia Poison Center Staff Meeting Minutes

Date: December 17th, 2025

1:30 pm – 4:30 pm

In Office: Patrick Filkins, Stephanie Hon, Jasmine Gibson, Brent Mogan, Wilson Boyce, Britni Overall, Ajani Jeffrey

Remote: Gaylor Lopez, Kayla Ellis, Donna Evans, Tiana Witcher, Karen Kinan, Christina Hash, Brett Debruyne, Erika Lockhart, Perri Kern, Kimberly Capell, Alexander Rentschler, Kiet Ngo, Dionna Douglas, Sandra Riddle, Canaan Yunez, Jason Tully, Julia Heard, Miguel Velazco, Kwaku Asamoah, Darrielle Barnes, Alison Jones, Jill Martin, Crystal Proshek, Robert Going, Sal Hamed, Shannon Wright, Christy Hallett, Jamila Hudson, Miguel Velazco

1:30 PM— Meeting Introduction/Acknowledgement—GPL, CH:

- **FMLA/Resignation/Termination**—None
- **GPL:** Opened the meeting, noting the international timing—early afternoon on the East Coast and evening in Athens, Greece where he was.

1:34 PM— RTS: 0:18:14 -Open Positions/New Hires/Recognitions -GPL:

- **GPL:** Thanked Liz and Siavash for their help, introductions, and representation of the program during the Las Vegas meetings.
 - Shared that he, along with Liz (PGY-1) and Siavash (PGY-2), attended meetings in the Las Vegas area earlier in the week to meet with a wide range of potential applicants and came away encouraged by the strength and quality of candidates expected in the next recruitment cycle.
 - The program is planning to hire **one person**, primarily to replace Siavash and if everything proceeds as expected, Liz will move up, and the program will recruit a new PGY-1.
 - The team expects to bring **four to five candidates** for PGY-1 interviews, likely in late January or February.

1:38 — RTS: 0:22:13 –Medical Director / HF Guidelines Discussion –GPL, BM, SLH, JH:

- **BM:** Shared the fellowship recruitment season went very well.
 - The team successfully filled **all three fellowship spots**, and they're excited about the diversity of the incoming trainees.
 - **Matched fellows:**
 - **Dr. Bermudez Lugo** — pediatrician currently in general pediatrics residency in **Puerto Rico**; will be the **third Puerto Rican fellow**, joining the legacy of **Dr. Gomez** and **Dr. Rivera**.
 - **Dr. Steins** — family practice resident from **Missouri** (affiliated with University of Missouri in Columbia).
 - **Dr. Lindman** — emergency medicine resident, is finishing training in **Michigan**. All three are expected to start **July 2026**.
- **Guideline review: Hydrofluoric Acid (HF) and Home Options**
- **BM:** Asked for input on whether **Epsom salts (magnesium sulfate)** should remain as a possible **home option** for **lower-concentration exposures** (noted as <20%).
 - Noting that he couldn't find strong support for this in major toxicology references and only saw limited evidence for benefit in very superficial burns.
 - His goal is to avoid unnecessary ED visits, but he doesn't want to recommend something without evidence and is open to removing it from the HF guidelines.

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- **JH:** Said it's been many years since she's recommended Epsom salts and asked about older practices like **milk soaks** or **crushed Tums applied topically** for calcium.
- **JT:** Recalled using Tums in the past.
- **DM:** Confirmed these options are **not in the current guidelines** and said he doesn't have data or experience supporting their use at home, though similar calcium-based mixtures are sometimes used in the hospital.
 - He noted they aren't contraindicated, but without evidence, symptomatic patients should be referred to the hospital for **calcium gluconate**, which remains standard care.
- **PF:** Reframed the discussion around **triage decisions**, especially for **asymptomatic or recently exposed patients**, for example, whether to observe and follow up later given **HF's delayed pain**.
 - **SLH and JH:** Emphasized that delayed symptoms are common, and calls come in both immediately and hours later.
 - **BM:** Noted the guideline language mainly addresses patients **already in pain**, not prophylactic treatment.
- **SLH:** Cited, "*The Poisoning and Drug Overdose (Lang)*", which describes **topical calcium gluconate or calcium carbonate gels under occlusion** under an **occlusive dressing/rubber glove** to enhance penetration.
- The group discussed whether benign calcium-containing options might be reasonable if available.
- **BM:** Remained cautious due to uncertain calcium content (e.g., milk) and lack of evidence, recalling an older study suggesting antacids/magnesium did **not clearly reduce burn severity**, particularly in higher-concentration exposure and laid out protocol clarification.
 - Equal parts Epsom salts and soak" means **equal parts Epsom salts and water**.
 - The protocol includes a **topical calcium gluconate + KY Jelly** recipe; **Calgonate Gel** exists but is expensive and not widely stocked.
 - "Localized" exposure language was discussed as potentially ambiguous; broad exposures should not imply home bathing is sufficient.
 - The **>5% body surface area** reference relates to **monitoring (ionized calcium checks)** at higher concentrations, not triage.
- **Current triage language:**
 - **>20% concentration** → refer to medical facilities.
 - **<20% with persistent pain after 30 minutes** → refer for evaluation and calcium therapy.
 - **If Epsom salts or Tums are not available** → refer to medical facility.
 - **Alert the receiving facility** as the next step.
- **BM:** Thanked everyone for their feedback and said he needed to do more work on the guideline.

01:58:03 PM— RTS: 0:51:03 -Education Department: -BO, GLP, JH:

- **Naloxone Training Course Update**
- **BO:** Please remember to complete the **Naloxone Training Course** that was created for the public by **Sunday, Dec. 21, 2025**, so I can review feedback and make edits before the course is officially released to the public in **January 2026**.
 - The course covers recognizing opioid overdoses, understanding the importance of naloxone, how to administer it, information about local places where **Naloxone** can be obtained, and the legal protections related to its use.
 - She also noted that there is an **evaluation at the end of the course** and encouraged everyone to leave comments there or email her directly with feedback.

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- She has talked to the web developer about the glitch and she found the issue may be related to the **“next” button and marking sections as complete**, which might not be very user-friendly.
- As a temporary solution, she said she may add a note instructing users to **check “mark as complete” and then click the knowledge check** so they know how to move forward in the course.
- **BO:** Thanked **Julia** for her positive feedback about the course and noted that most of the comments she has received so far have been similar, stating that reviewers have said *they like the flow of the course, the graphics, and that the content was easy to understand.*
- **BO:** Confirmed **Dr. Lopez’s** question, stating that it is currently slow, but activity will increase in **January** as the team begins preparing for **Poison Prevention Week**, working on **annual reports**, and responding to **health fair requests**.

**2:00 PM— RTS: 0:53:30 –Information Technology Updates –GLP, WB, AJ:
IT Updates**

- **AJ:** Reminded everyone to **restart their computers at least once a week** so pending updates can be installed properly.
 - Save your work frequently to your mapped drives, which are the folders labeled with their **first initial and last name**.
 - He emphasized that saving work regularly, restarting weekly, and responding to update notifications within five days should help everything run smoothly.
- **WB:** Asked if everyone was seeing the pop-up notification that says, **“restart now” or “remind me later.”**
 - He wanted to confirm that the restart was not happening without warning and that people were getting advance notice.
- **WB:** The **Avaya** update went very well and thanked everyone for doing a great job getting onto Avaya, the recent transitions have gone very smoothly.
- **GPL:** Shared that leadership has been **evaluating new phone systems** and said they are about 90% of the way to deciding which to get.
 - One of the main challenges will be justifying the cost, especially given the current budget concerns.
 - The main reason for the change is that the current phone system is approaching end-of-life, it was installed over 20 years ago and soon it will no longer receive hardware or software support.
 - **CNP** will assist with support and setup and the **president of CNP** will sit in the meeting with him and Ashley in January.
 - He said the goal is to **justify the cost to leadership in mid-to-late January**, after which more information and **training plans** will be shared if the project moves forward.

**2:15 PM— RTS: 1:15:20 –GPC Operations –GPL, SLH, CH, JH,
(GCEP) Georgia Meeting Interaction**

- **GPL:** Shared that he and the team met with several **state legislators** to discuss the Poison Center’s funding situation.
 - He said they received **very positive responses**, noting that legislators seemed supportive after hearing about **what the center does, why the work is important, and how cost-effective the Poison Center is with a strong return on investment.**

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- For the past **three years we have had limited opportunities to meet with legislators**, but recently they were given the **green light by the Legislative Affairs office** to return to the **Gold Dome** and speak directly with lawmakers.
- He also mentioned that in the coming weeks **Dr. Morgan and he may be asked to participate in appropriation hearings**, which would allow them to formally discuss the center's funding needs and the current **budget challenges**.

Move the Meter Survey Updates

- **GPL: Please note the important compliance deadlines** the **annual training modules** must be completed **before the end of January**.

2:25 PM—RTS: 1:25:01: Special Guest Bernard Gordan: HR Updates— GLP, BG, CH, JH, SLH: Grady Flu Vaccine Requirements

- **GPL: Reminded everyone about flu vaccination compliance**, stressing that the department wants to reach **100% participation**.
 - Staff who received their flu shot **off-site** should send documentation to **Employee Health**, while those vaccinated on campus will receive a **green dot for their badge** indicating completion.
- **BG: Addressed the concerns raised by Christina Hash and Julia Heard** about delays and confusion with flu shot documentation.
 - He explained that **Employee Health is still reconciling the flu vaccine compliance lists** because they found discrepancies, so the list is **not final yet** and asked everyone to **please be patient** while the team works through the corrections and prepares an updated list.
 - **Grady is transitioning to Workday**, which is scheduled to **go live on January 1st**, and encouraged staff to review the **training videos on Grady Now**.
 - Employees should **continue clocking in through UKG until December 31st**, and on **January 1st**, they should try to **clock out in both UKG and Workday** to ensure their time is captured before Workday becomes the **primary timekeeping system**.

2:35 PM— RTS: 1:35:28 –GPC Operations Continue –GPL, CH, JH, JT, DD, SLP, Engagement Survey Results & Holiday Schedule Changes

- **Dr. Gaylord Lopez** shared that the **engagement survey results have been released to leadership** and will be reviewed with staff soon.
 - He noted there was a reporting error showing **97% completion**, but confirmed the team actually achieved **100% participation (32 of 32)** and thanked everyone for completing the survey.
 - As a result of that participation, **Dr. Lopez and Dr. Stephanie Hon** decided to reward the team with **100% remote work from December 21st – January 10th** for staff who have remote capabilities, instead of holding a holiday gathering.
 - He noted the survey feedback will be reviewed later and used to **identify areas for improvement and future action items**.

2:41 PM— RTS: 1:41:46 –Real Time Updates –SLH, PF When to Work Update

- **PF: Congratulated the team and encouraged everyone to enjoy the remote period.**
 - He will begin preparing the **first schedule block of the new year through March**.

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- Thanked staff for submitting **PTO requests early**, noting that it helps ensure proper staffing level and you can begin submitting **PTO requests for Q2 of 2026**, although that deadline is not until **March 2026**.

Real Time Update: Opioid Program

- **PF:** The **Real Time Opioid Program** is now in **year four** and will continue through **at least September 2026**.
 - He reminded staff that if calls related to the program come through the Poison Center, they should **follow the protocol on Bezoar and connect the provider with the toxicologist on call**.
 - He also shared that unfortunately the **request he submitted for opioid abatement funding** to expand the program **was not selected this year**.
 - He is working with **Ryan's office** and plans to get **feedback from DBHDD** about the submission, so the team can improve the application and **reapply when funding opens again in May 2026**.

NC PCC / GPC 2026 Meeting Schedule

- **PF:** The **Georgia** team will be **covering Alabama's meeting tomorrow evening from 7:00–10:30 PM** and will also **cover North Carolina's meeting on Thursday the 18th from 4:30–9:30 PM**, which is slightly later than the usual **North Carolina** coverage.

2:45 PM— RTS: 1:44:44 –GPC Operations continue –GPL, SLH

PH Updates

- **SLH:** Reminded the team about the **growing measles outbreak in South Carolina** and the risk of spread due to **holiday travel and low vaccination rates in Georgia**.
 - She emphasized that any **suspected or confirmed measles cases must be reported through the 866 Public Health hotline** and noted that more **quarantines may occur** as cases increase.

2026 QA / Survey / CE Goals Renewed

- **SLH:** Thanked staff for completing the **recent public health survey** and said she will review the responses and share the **correct answers and feedback** with the team.
- She said that **her, Patrick Filkins and Dr. Geller** recently **updated disease dispositions in ToxEntry** to clarify **who should be contacted for specific diseases** (state vs. district) so reporting is handled correctly.

Coding of Therapies and Effects

- **SLH:** Reminded staff of the need for **accurate coding and documentation in charts**, including therapies, substances, and effects, noting that incomplete coding affects **data quality, studies, and potential funding opportunities**.
 - And said be sure to **consult her or the toxicologist on call** if they are unsure about public health or poison center cases.

STP Committee / Written Updates

- **SLH:** Acknowledged **Julia Heard's question** about whether STPs could be created so staff could easily reference them during calls.
 - She said **they do not currently exist**, but agreed it was a good suggestion.
 - And explained that the team will begin **updating and rewriting STPs**, with input from **SPIs, fellows, and Dr. Morgan**, and the updates will likely be **rolled out gradually over the next couple of months**.

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Antidote Study

- **SLH:** An **antidote study project** led by the **Poison Center PharmD Fellow**, which is currently collecting data on recommendations for antidotes such as **deferoxamine, fomepizole, and alkalization**.
 - Asked staff to report any issues with the new **rule-based coding fields** used to capture study data.

WorkDay Employee Hub

- **SHL:** Walked the team through how **clocking in and out will work in Workday**, explaining that employees will use the **Employee Hub and Time section** to check in and out.
 - She noted that the process involves a few more clicks than UKG and that staff may need to **contact timekeepers for corrections** if errors occur.
 - She reassured staff that leadership will **closely monitor payroll accuracy during the system transition**, especially given past issues during the **Kronos outage**, and said she will send important updates via email if needed.
 - **SR:** Asked where employees would access the **Workday system**, and **Dr. Hon** explained that it will be available through **Grady Now**, though staff **do not yet have access** and have only seen screenshots so far.
 - **GPL:** agreed and added that the transition is still being finalized, but once **Workday access is available**, the team will quickly share instructions.

3:12 PM— RTS: 2:12:17 –Closing Remarks –GPL, SLH, WB, AJ

- **WB:** Reported that the TelStrat server certificate expired, causing “connection not private” errors.
 - Show how a temporary workaround by clearing browser cache (keeping history unchecked) to regain access.
 - Noted a permanent fix is in progress with CNP.
- **AJ:** Added that users logging into Microsoft on the web will be prompted for **Duo MFA again** and **should have their phones ready**.
- **GP:** Closed the meeting, noting slight overtime and sharing holiday well wishes.
 - Mentioned admin staff will continue working, except those on PTO, and that IT workflow during the holiday break will be discussed offline.
- **SLH:** Extended holiday greetings (Hanukkah, Christmas, Kwanzaa) and encouraged staff to rest and reset during time off.

3:16 PM—Meeting End

******* Next Meeting January 27th, 2025, 1:30pm-4:30pm *******

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