CHAPTER 32: POISONING, TOXIC EFFECTS, ADVERSE EFFECTS, AND UNDERDOsing OF DRUGS

Exercise 32.1 (numbers 1-8)

1. Coma due to acute barbiturate intoxication, attempted suicide T42.3x2A
   R40.20

2. Two-year-old patient ingested an unknown quantity of mother's Enovid T38.4x1A

3. Syncope due to hypersensitivity to antidepressant medication R55
   T43.205A
   Table

4. Hypokalemia resulting from reaction to Diuril given by mistake in physician's office T50.2x1A
   E87.6

5. Diplopia due to allergic reaction to antihistamine, taken as prescribed H53.2
   T45.0x5A
   Table

6. Lethargy due to unintentional overdose of sleeping pills T42.71xA
   R53.83

7. Electrolyte imbalance due to interaction between lithium carbonate and Diuril, both taken as prescribed E87.8
   T50.2x5A
   T43.595A
   Table

8. Parkinsonism, secondary to correct use of haloperidol G21.11
   T43.4x5A
   Table
Exercise 32.2

1. Muscle cramps of leg due to occupational use of arsenic pesticide
   T57.0x1A
   R25.2
   Table, arsenic

2. Systemic hypocalcemia and hypokalemia due to use of lye in household chores
   T54.3x1A
   E83.51
   E87.6
   Y92.099
   Table, lye

3. Bradycardia due to ingestion of oleander leaves
   T62.2x1A
   R00.1
   Table, oleander

Exercise 32.3

1. Extrapyramidal disease resulting from previous overdose of Thorazine in an attempted suicide six months ago
   T43.3x2S
   G25.9

2. Bilateral neural deafness resulting from accidental overdose of streptomycin administered in physician's office two years ago
   T36.5x1S
   H90.3

3. Anoxic brain damage secondary to previous accidental overdose of Nembutal nine months ago
   T42.3x1S
   G93.1

4. Secondary parkinsonism due to poisoning by lithium four years ago
   T56.891S
   G21.2

5. Patient recently discharged from the hospital with diagnosis of acute systolic congestive heart failure.
   Discharged with a prescription for digoxin 200 mcg once daily, with instructions for Z91.120 a low-fat and low-sodium diet and avoidance of alcohol and caffeine. Two weeks later, patient is seen in the emergency department with shortness of breath on minimal exertion and severe edema.
   On questioning, patient admits to having reduced digoxin to every other day because it is too expensive.
   Diagnosis: Relapse of acute systolic congestive heart failure due to low dose of digoxin.