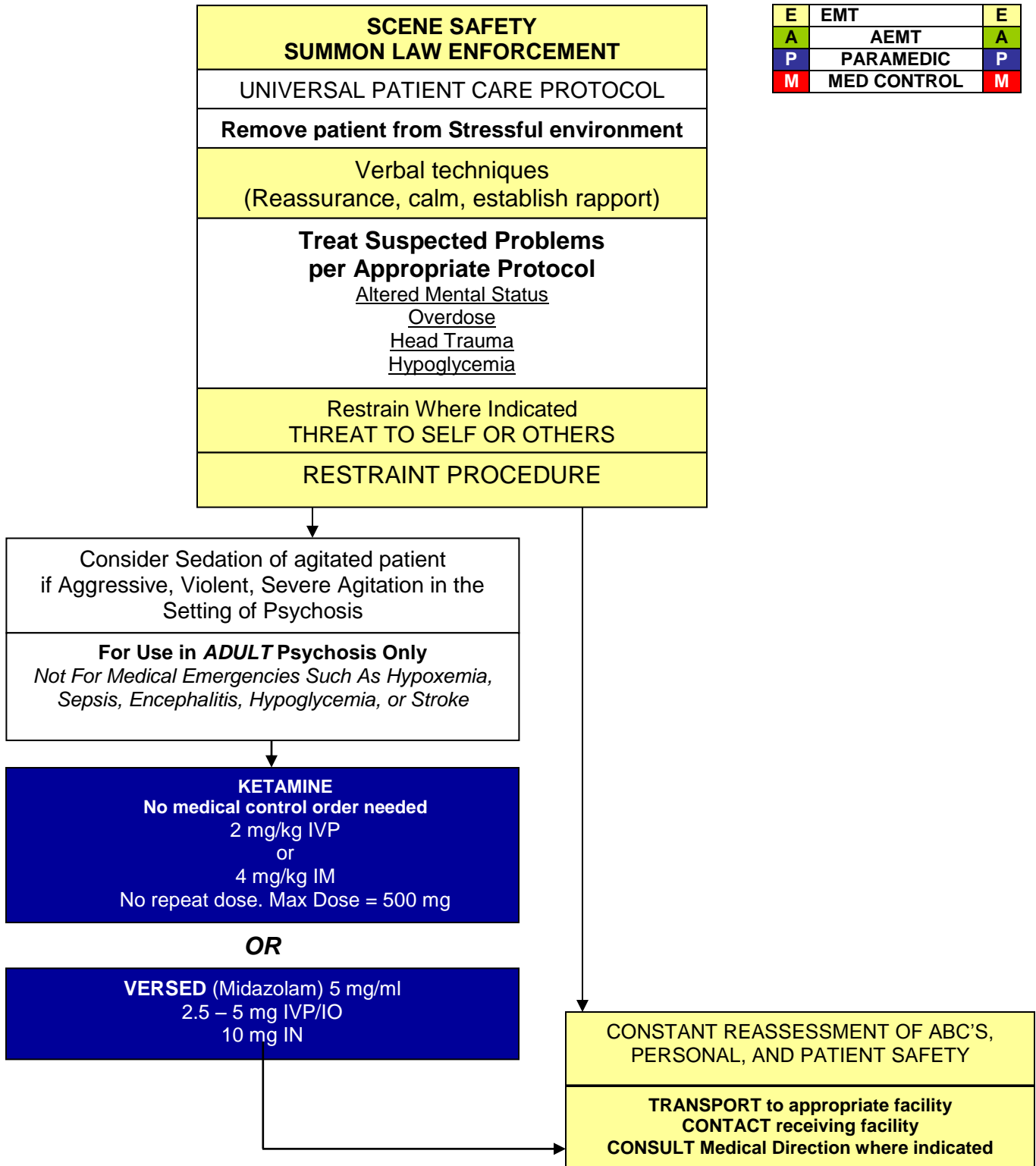




Section 5: Adult Medical Emergencies Protocol

ADULT MEDICAL EMERGENCIES: BEHAVIORAL/PSYCHIATRIC EMERGENCIES

E	EMT	E
A	AEMT	A
P	PARAMEDIC	P
M	MED CONTROL	M





Section 5: Adult Medical Emergencies Protocol

ADULT MEDICAL EMERGENCIES: BEHAVIORAL/PSYCHIATRIC EMERGENCIES-Cont.

PEARLS and KEY POINTS

HISTORY	SIGNS AND SYMPTOMS	DIFFERENTIAL DIAGNOSIS
<ul style="list-style-type: none"> Situational crisis Psychiatric illness / medications Injury to self or threats to others Medic alert tag Substance abuse / overdose Diabetes 	<ul style="list-style-type: none"> Anxiety, agitation, confusion Affect change, hallucinations Delusional thoughts, bizarre behavior Combative violent Expression of suicidal / homicidal thoughts 	<ul style="list-style-type: none"> See <u>Altered Mental Status</u> differential diagnosis Alcohol Intoxication Toxin / substance abuse Medication effect / overdose Withdrawal syndromes Depression Bipolar (manic-depressive) Schizophrenia Anxiety disorders

Criteria for Restraint Use:

- Patient out of control and may cause harm to self or others.
- Necessary force required for patient control without causing harm.
- **Position of patient must not impede airway or breathing.**
- Restraints must not impede circulation.
- Place mask on patient for body secretion protection. May use TB mask, or Non-rebreather if patient needs oxygen
- Use supine or lateral positioning ONLY.
- MSP checks are required every 15 min.
- DOCUMENT methods used.

Criteria for sedation of agitated patient with excited delirium use:

- Patient out of control and may cause harm to self or others.
- Patient is NOT a medical patient (treat underlying causes).
- Patient is an ADULT patient.
- Use necessary force required for patient control without causing harm.
- **Position of patient must not impede airway or breathing.**
- DOCUMENT methods used.

- Exam: Mental Status, Skin, Heart, Lungs, Neuro
- All psychiatric patients must have medical clearance at a hospital ED before transport to a mental health facility.
- Your safety first!!
- Be sure to consider all possible medical / trauma causes for behavior. (Hypoglycemia, overdose, substance abuse, hypoxia, head injury, etc.)
- Do not irritate the patient with a prolonged exam.
- Do not overlook the possibility of associated domestic violence or child abuse.
- The safety of on scene personnel is the first priority. Protect yourself and others by summoning law enforcement to assure everyone's safety and if necessary, to enable you to render care. Do not approach the patient if he / she is armed with a weapon.
- Consider the medical causes of acute psychosis. Causes may include: head trauma, hypoglycemia, acute intoxication, sepsis, CNS insult and hypoxia.
- Suicide ideation or attempts must be transported for evaluation.
- Be alert for rapidly changing behaviors.
- Limit patient stimulation and use de-escalation techniques.
If the patient has been placed in handcuffs by a law enforcement agency, then a member from that agency MUST ride with the patient in the ambulance to the hospital.