

 #CHAIR2019

11TH ANNUAL **CHAIR SUMMIT**

CME
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Master Class for Neuroscience Professional Development

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Evidence-Based Evaluation and Treatment of the Psychiatric Patient in the Emergency Department

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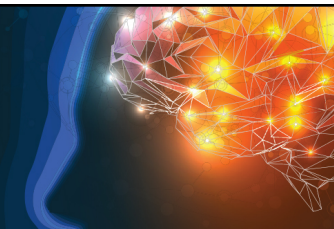


Learning Objective

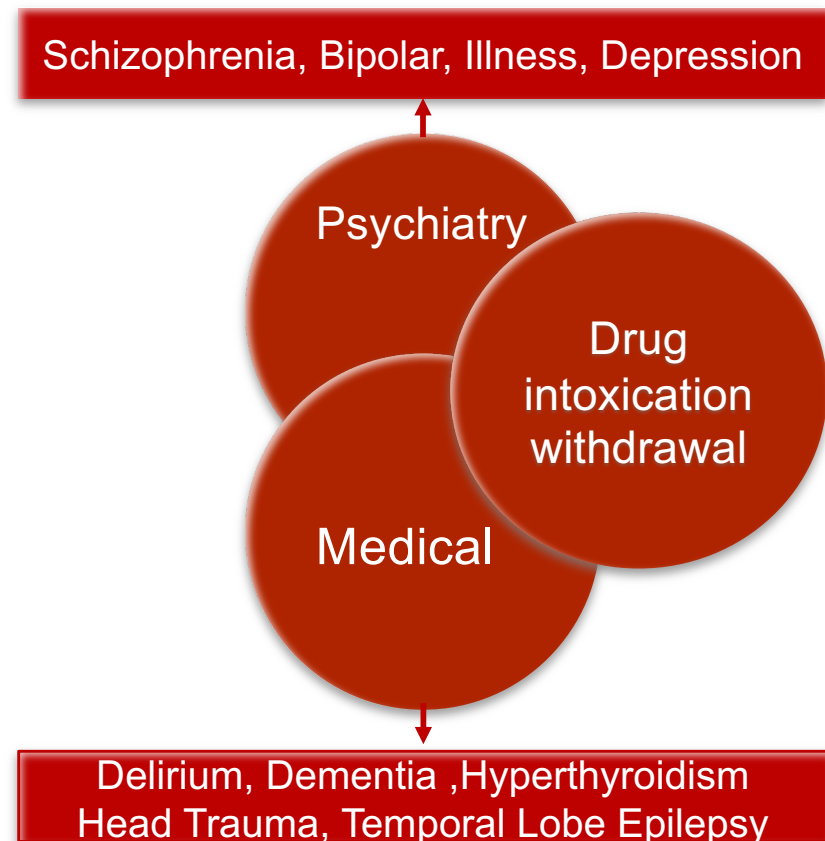
Individualize the assessment and management of psychiatric patients who present to the ED based on evidence-based literature



Primary Purpose Etiology



- Drug and alcohol intoxication or withdrawal
- Medical
- Psychiatry



Evaluation Process



- Components

- History
- Physical exam vital signs
- Mental Status Exam
- Laboratory testing

- Red flags of medical etiology

- No prior psychiatric/medical history
- Age >45 years old
- Exposure to toxins or drugs
- Substance intoxication or withdrawal
- Abnormal vital signs
- New cognitive deficits
- Focal neurologic findings, slurred speech, seizures

Agitation Treatment



- Etiology of agitation
- Measure level of agitation
- Principles of treatment
 - Use non-pharmacologic approaches first
 - Verbal de-escalation
 - Respect personal space
 - Do not be provocative
 - Establish verbal contact
 - Be concise
 - Identify wants and feelings
 - Use medication tailored to diagnosis
 - Adjust medication to level of agitation

Agitation Treatment (cont.)

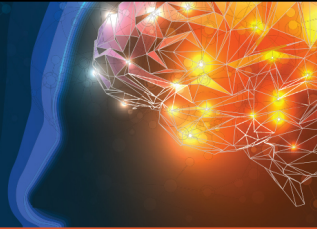


- Medications recommendations
 - First generation - haloperidol
 - IM risperidone = haloperidol + lorazepam
 - Oral risperidone = haloperidol = olanzapine
 - Not recommended - aripiprazole, quetiapine and clozapine
- Supplemental
 - Oral as effective as IM
 - Single medication preferred
 - No need for prophylaxis for an adverse drug reaction
 - First medication not effective switch to another
- Physical restraints and seclusion

Wilson MP, et al. *West J Emerg Med*. 2012;13(1):26–34.

SMART Goals

Specific, Measurable, Attainable, Relevant, Timely



- Psychiatric patients receive laboratory testing based on their clinical complaints and condition.
- All patients need an agitation assessment performed at presentation.
- Verbal de-escalation is used for first-line treatment in agitated patients.
- Agitation treatment is based on the etiology.
- Single medication is preferred for agitation.

Questions & Answers

Don't forget to fill out your evaluations to collect your credit.

