

Oakland County Medical Control Authority
Adult Treatment Protocols
Psychiatric Emergencies

February, 2018

Section 1-8

Psychiatric Emergencies

Definition:

A patient with a psychiatric emergency is solely related to the effects of their mental illness and not an acute medical emergency requiring life-supporting intervention. The patient may have risk for harm of self and/or others, which can include an inability to care for their own activities of daily life.

Procedure:

Transport all adult and pediatric psychiatric patients to the closest OCMCA hospital for medical clearance.

- If EMS personnel witness an act, or acts, or hear significant threats made by the patient that leads them to believe that the patient can reasonably be expected within the near future to intentionally or unintentionally seriously physically injure self or others, EMS personnel may complete a **Petition for Mental Health Treatment (PM201)**.
 - Petitions should be obtained from a hospital ED representative.
 - The Petition for Mental Health Treatment MUST be:
 - Completed in black ink only.
 - Completely free of errors.
- Patients may **only** refuse transport if they meet the criteria outlined in the **Refusal of Care Protocol**.
 - If care is refused, per Refusal of Care Protocol, EMS providers may consider referring patients experiencing crisis to Common Ground's 24/7 Resource and Crisis Center hotline at: 1-800-231-1127.

NOTE: If the psychiatric patient, his/her family, or other patient advocate requests transport to a specific OCMCA hospital, and that request requires bypassing a closer OCMCA hospital, the transporting crew must obtain online approval from the requested hospital prior to initiating transport.

Pre-Medical Control

MFR/EMT/Specialist/Paramedic

1. Assure the scene is secure.
2. Follow **General Pre-hospital Care Protocol**.
3. Note patient history.
 - a. Current history: head injury, overdose/intoxication, central nervous system disease or infection, hypoglycemia, postictal state, or hypoxia.
4. If the patient presents with an altered mental status, refer to **Altered Mental Status Protocol**.
5. If medical emergency, follow appropriate protocol.
6. If the patient becomes violent or actions present a threat to self or others, restraint may be necessary. Refer to **Patient Restraint Protocol**.
7. If the patient presents with; agitation, confusion, hallucinations, erratic behavior, profuse diaphoresis, clothing shedding, unexplained strength and endurance, shouting out, and extreme thrashing while restrained, refer to **Excited Delirium Protocol**.

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Post-Medical Control

Paramedic

8. If chemical restraint is considered, refer to **Patient Restraint** and **Patient Sedation Protocols**.

Legal Statutes:

1. **Protective Custody** - The temporary custody of an individual by a law enforcement officer with or without the individual's consent for the purpose of protecting that individual's health and safety, or the health and safety of the public and for the purpose of transporting the individual if the individual appears, in the judgment of the law enforcement officer, to be a person requiring treatment. Protective custody is civil in nature and is not to be construed as an arrest. (330.1100c (7), Sec. 100c, Michigan Mental Health Code)
2. **Authority to Restrain** - EMS personnel are able to restrain and treat and transport an individual under authority of Sec 20969 of Public Act 368 which states: "This part and the rules promulgated under this part do not authorize medical treatment for or transportation to a hospital of an individual who objects to the treatment or transportation. However, if emergency medical services personnel, exercising professional judgment, determine that the individual's condition makes the individual incapable of competently objecting to treatment or transportation, emergency medical services may provide treatment or transportation despite the individual's objections unless the objection is expressly based on the individual's religious beliefs."
3. **Patient Destination** – R 325.22112 An ambulance operation, both ground and rotary, shall transport an emergency patient only to an organized emergency department located in and operated by one of the following:
 - a. A licensed hospital
 - b. A freestanding surgical outpatient facility
 - c. Provider-based ED
4. **“Emergency Patient”** – Sec 333.20904 of Public Act 368 defines an emergency patient as an individual with a physical or mental condition that manifests itself by acute symptoms of sufficient severity, including, but not limited to, pain such that a prudent layperson possessing average knowledge of health and medicine, could reasonably expect to result in one or all of the following:
 - a. Placing the health of the individual or, in the case of a pregnant woman, the health of the patient or the unborn child, or both, in serious jeopardy.
 - b. Serious impairment of bodily function.
 - c. Serious dysfunction of a body organ or part.