

Patients with Urgent or Emergent Psychiatric Symptoms in Primary Care

Definitions:

A psychiatric emergency is any behavioral or mental state in which the patient poses imminent risk of harm to self or others. Urgent symptoms are symptoms that the clinician feels could escalate to an emergency state.

Examples of emergencies:

- Suicidal ideation with plan or other signs concerning for imminent harm
- Homicidal ideation
- Agitated behavior in which patient is unable to respond to de-escalation
- Other behaviors or evidence of grossly impaired judgment in which patient can not safely care for self

Take home message:

When you have a patient with a possible psychiatric emergency or other urgent symptoms **during clinic hours**, please contact the Integrated Behavioral Health team at beeper 3040 for consultation regarding evaluation and management. **After hours**, please call the Boston Emergency Services Team (BEST) at 1-800-981-HELP (4357) for advice and management help. They can direct you to the best resource regardless of your patient's location and insurance. Psychiatric emergencies require immediate action for the safety of our patients and in some cases, providers.

See detailed protocol on the next pages.

Roles and responsibilities for cases that arise in PCP visit*:

IBH role:

- Risk assessment
- Recommendation regarding patient plan
- Support communication & de-escalation
- Support plan execution

PCP role:

- Responsible for the case—must be available for duration of case--Collaborates with IBH team in making final decision regarding plan, including whether a Section 12 is needed
- Signing section 12 if needed

Other primary care team member (RN, MA, Ops):

- Communication and de-escalation of patient and family
- Support execution of plan (e.g.: arranging for transport, sitting with patient, providing other logistical support)

*For rare cases that arise during clinical support visits (PharmD, RN) where PCP is not available: The 3040 social work clinician will take the lead, and contact IBH MD, PhD, or NP on site if support is needed for a Section 12.

	Cooperative patient	Patient who is agitated and cannot be de-escalated; may elope; or is unwilling to seek help
Regular clinic hours	<p>Find or page the Integrated Behavioral Health Team to assist with evaluation and triage (available to all suites)</p> <ul style="list-style-type: none"> ○ IBH Clinician: Beeper # 3040 or find the IBH clinician in your suite ○ Please include patient name, MRN, and the urgency of the situation, with your name, beeper, and callback number ○ Primary Care Psychiatrist/Psych NP (# 0237) ○ BEST is backup (1-800-981- 4357) 	<p>1) Find or page the Integrated Behavioral Health Team to assist with evaluation and triage. <i>If you need to leave the patient in the room, ask your Operations Manager or Team Coordinator to make sure a team member can stay with the patient in your place.</i></p> <ul style="list-style-type: none"> ○ IBH Clinician: Beeper # 3040, or find the IBH clinician in your suite ○ Please include patient name, MRN, and the urgency of the situation, with your name, beeper, and callback number ○ Primary Care Psychiatrist/Psych NP (0237) ○ BEST is backup (1-800-981- 4357) <p>2) Call Public Safety at ext. 4-4444 if the patient is demonstrating any unsafe or agitated behaviors Never apprehend a patient on your own.</p> <p>3) Alert Operations Manager and suite nurse</p> <p>4) If you and the IBH clinician decide to complete a Section 12(a) petition for involuntary psychiatric assessment:</p> <ul style="list-style-type: none"> a) Involve Public Safety (ext 4-4444) if not already present b) Section 12 must be completed by an MD, NP, or PhD. c) Section 12 papers are available from suite nurses or integrated SWs, as well as in provider resource binders in exam and charting rooms d) Once Public Safety is present, and if appropriate, tell patient they are going to be placed on a Section 12(a) for a psychiatric assessment to be completed in the Emergency Room. e) Public Safety will escort patient to the Emergency Room. They require a clinician to come with them; this clinician could be the behavioral health team member (preferred), the PCP, or EMS. f) Call the BMC Psychiatry Emergency Service (PES) at 617-414-4943 to pass off.
Evening clinic	<p>1) Integrated SWs are present for the first part of some evening clinic sessions. Ask your practice manager if anyone is available. <i>3040 beeper hours are in process of being revised.</i> If 3040 beeper is not being covered, contact BEST at 1-800-981-HELP (4357) to facilitate a safe evaluation.</p> <ul style="list-style-type: none"> ○ BEST can send a clinician to your office, or a cooperative patient can be walked to the BEST Urgent Care on the BMC 	<p>See evening clinic, cooperative patient protocol to the right. BEST will assist with care planning (1-800-981-4357.)</p>

<p>Evening clinic (continued)</p>	<p>campus, 1st floor 85 E. Newton Street, Solomon Carter Fuller Building.</p> <ul style="list-style-type: none"> ○ Public Safety cannot escort your patient to BEST. Please call BEST before sending a patient. ○ If the patient is not stable enough for an escort to BEST, OR there are no staff to do so, and BEST anticipates a delay in sending a clinician to you, they will give you guidance. ○ For example, if the patient is at imminent risk of harm to themselves or others, BEST will advise you to perform a Section 12. Please follow guidance below for a section. ○ For patients <i>not</i> at imminent risk who are not willing or able to go to BEST, discuss the case with your integrated BH team in the morning for urgent care planning. <p><i>NOTE: Call BEST no matter your patient's location and insurance. BEST will direct you to the appropriate emergency care provider for the patient.</i></p>	
<p>After clinic hours (i.e. emergencies arising by phone)</p>	<ol style="list-style-type: none"> 1) Obtain your patient's full name, location, and contact information 2) Contact Boston Emergency Services Team (BEST) at 1-800-981-4357 to facilitate a safe evaluation. BEST may be able to go to the home. <p><i>NOTE: Call BEST no matter your patient's location and insurance. BEST will direct you to the appropriate emergency care provider for the patient.</i></p>	<p>See after hours, cooperative patient protocol to the right. BEST will assist with care planning (1-800-981-4357).</p>