

Behavioral Emergencies

ALL PROVIDERS

- ❑ The initial assessment and management of patients with a behavioral emergency are similar to those used in any other EMS response. These steps include ensuring scene safety, containing the crisis, giving proper emergency medical care, and transporting the patient to an appropriate health care facility.^[1]

- ❑ **Treatment Indications**
 1. Patients who are potentially harmful to themselves or others
 2. Patients with other psychiatric complaints (hearing voices, paranoia, depression, anxiety disorders, substance abuse, detoxification needs, worsening chronic psychiatric problems, etc.)
 3. Behavioral problems not meeting any of the above descriptions (marital or other interpersonal disputes, antisocial behavior, chronic dementia, etc.)

- ❑ **Treatment Options**
 1. If a patient is believed to be at risk to themselves or others, and refuses transport, refer to law enforcement to make application for commitment (pink sheet) prior to transport. Situations involving minors refer to legal guardian and/or law enforcement
 2. Release to local police if no medical or psychiatric care is required or if care is refused by a patient. Use the appropriate release form.
 - a. May be released at the scene or to Detox. Use your judgment and the assistance of Medical Control to make the appropriate decision.
 3. Combative or aggressive patients should either be chemically restrained (follow *Violent patient/chemical sedation protocol*) or physically restrained as defined in agency policy.

[1] *Mosby's Paramedic Textbook*, Sanders