

CMC Emergency Department
ED Behavioral Health Observation Process Guidance

Purpose: To capture value of care delivered by ED team while behavioral health patients are awaiting telepsychiatry evaluation.

Date Effective: September 26, 2022

Situation: Median ED length of stay for Behavioral Health patients at CMC is greater than 13 hours in 2022 and the ED team is currently managing these patients during this time. Given this long duration of management, care can be delivered in an observation status, with the patient remaining in the ED and remains under the care of EM providers and nurses. This guidance document outlines the process for admitting the patient to ED OBS status while the patient physically remains in the ED (and does not move to another hospital unit).

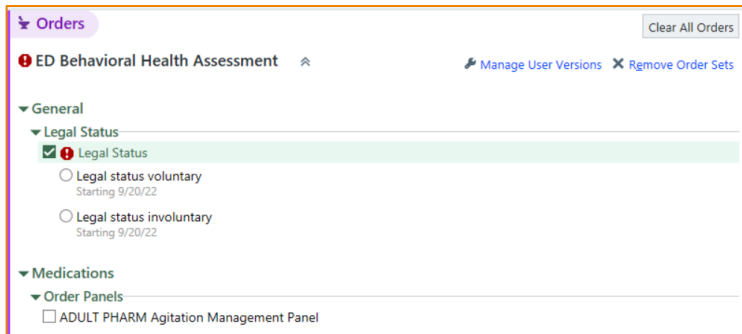
Inclusion Criteria: (1) Behavioral health patients, (2) Undergoing a Telepsych evaluation, (3) Involuntary commitment status and anticipating minimum 8-hour in-hospital stay

Exclusion Criteria: (1) Non-behavioral health patients; (2) Voluntary behavioral health patients

Process:

1. **Initiate Psychiatric Evaluation (traditional process):**

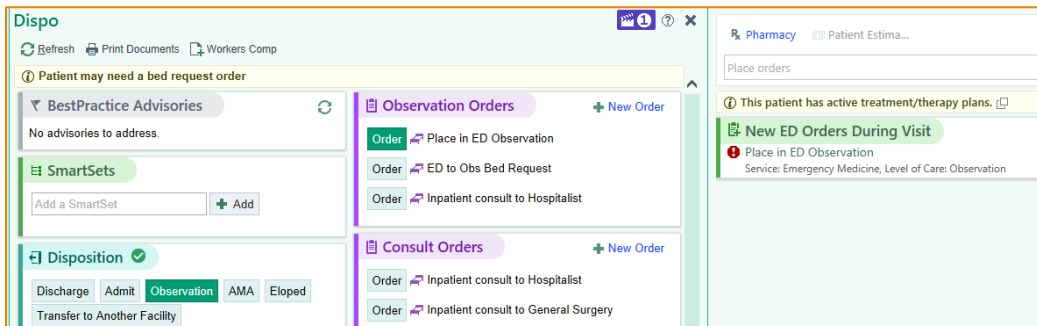
- a. Order: ED Behavioral Health Assessment



- b. Complete IVC paperwork (ERIC forms)

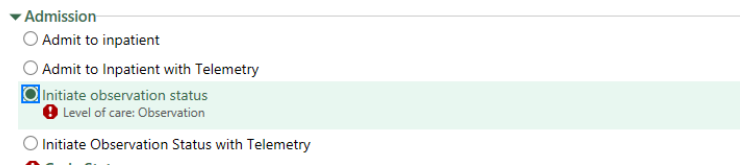
- c. Complete initial ED note (which serves as the H&P): must include PMH, SH, FH (need all 3 for OBS).

2. **Place Admission Order:** Dispo tab >> Click "Observation"; Observation Orders: Click "Place in ED Observation"; and complete request. Enter (1) Estimated LOS: 1 day; (2) Diagnosis: As Appropriate.

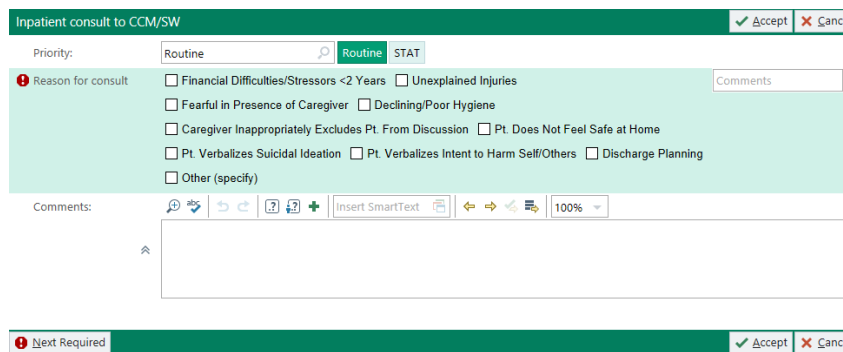


3. Order ED OBS OrderSet: “GEN ADULT MED Admission”

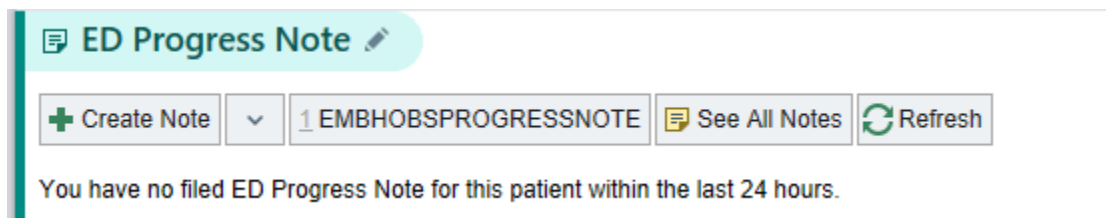
- a. Initiate observation status
 - i. Service: Emergency Medicine
 - ii. Estimated length of stay: 1 day
 - iii. Diagnosis: (select as appropriate)
 - iv. Admitting provider: CMCED OBS**
 - v. Attending provider: (ED Attending staffing initial evaluation)
 - vi. Primary Provider Group: No
 - vii. Bed request comments: “CMC ED OBS patient”



- b. Select: Diet – Finger Foods (No Utensils)
- c. Complete CCM:


4. Documentation: See Epic smartphrases below.

- a. **At Admission to ED OBS status:** The ED Note serves as the admission note. However, need to include “Initial psych obs placement justification” smartphrase below.
- b. **Daily note:** Wrench in the “.EMBHOBSPROGRESSNOTE” smartphrase to be completed within the ED Progress Note documentation area. This is required each calendar day (midnight to midnight) while under ED OBS status, except on the day of the initial ED note.



- c. **At Admission or Discharge:** If admission required, notify the admitting service via Secure Chat per standard procedure and the admitting service will place the “Admit to Inpatient” or “Initiate Observation Status” order as appropriate. If discharged, complete the Disposition Addendum to provide brief update on disposition, patient status, and any additional pertinent information.

Epic Smartphrases1. Initial BH OBS placement justification:

.EMBHOBSJUSTIFICATION

The patient has been placed in psychiatric observation due to the need to provide a safe environment for the patient while obtaining psychiatric consultation and evaluation, as well as ongoing medical and medication management to treat the patient's condition. The patient {HAS/HAS NOT:20194} been placed under full IVC at this time.

2. Daily Progress Note/Disposition Addendum:

.EMBHOBSPROGRESSNOTE

ED BH OBS PROGRESS NOTE/DISPOSITION ADDENDUM

@NAME@ is a @AGE@ @SEX@, seen on rounds today. The patient presented with a chief complaint of ***. Symptoms had been present for *** prior to presentation for care and were exacerbated by ***. Currently, the patient is ***.

@RRVS24HRS@

{FA EXAM; LUNG:24168: "clear to auscultation bilaterally", "non-labored breathing"}

{EXAM; HEART:18515: "regular rate and rhythm"}

{Exam; extremity:5109: "extremities normal, atraumatic, no cyanosis or edema"}

Psychiatric examination: ***

MDM:

I have reviewed the labs performed to date as well as medications administered while in observation. Recent changes in the last 24 hours include ***.

Current plan is for ***.

Patient is under full IVC at this time.

Disposition Addendum:

Discharge Diagnosis:

Hospital Course:

Condition on Discharge: {DISCHARGE CONDITION:19696}

Discharged to: {disposition:18248}

Follow-up:

Questions can be directed to Christian Schulz PA-C, Jessica Salzman MD, Dave Pearson MD.

Key words: ED OBS, Behavioral Health, Telepsych.

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Approved by: ED Leadership Team

Date: 22 Sept 2022 (Update 30 Sept 2022)