(A) Policy Statement

In an effort to provide psychiatric care to patients on a medical or surgical unit or the ED, the Department of Psychiatry will render the appropriate service(s) when accessed. Patient seen in an ambulatory office needing psychiatric care should be referred for outpatient services in a routine situation. In an urgent situation, patient should be sent to the ED.

Availability of Services

- Adult psychiatric consult service
- Senior Behavior Health Inpatient Services (age 55+)
- Adult Detox Unit

Referral services to:
- Adult outpatient clinic at the University of Toledo Medical Center (“UTMC”)
- Private Practitioners
- Community Mental Health Centers
- Crisis Intervention Units (Rescue Crisis)
- Hospitals offering adult inpatient psychiatric services
- Agencies, clinics and facilities offering substance abuse treatment.

(B) Purpose of Policy

Adult patients utilizing the resources of UTMC shall have access to psychiatric services during any phase of treatment, if such a need is identified.

(C) Procedure

When psychiatric services are identified as a need for the adult patient, the following should take place:

1. An order for an adult psychiatric consult is written by the attending physician in either the Emergency Department or an Acute Care floor.

2. A consult form is initiated stating the specific reason for requesting a consultation.

3. Referring physician will ask the patient or DPOA for consent to be seen by psychiatry and indicate patient or DPOA response on the consult form.

4. The Consultation-Liaison psychiatrist is contacted via the Department of Psychiatry (ext. 5695). *If the request for a consult occurs during the evening or weekend, the On Call schedule should be utilized to contact the appropriate resident.

Psychiatric consultations will be completed within 24 hours if “routine,” and sooner if indicated as “urgent” or “stat” by the attending physician on the order for the consultation. In order to secure a STAT consultation, it is necessary that there be physician to physician contact; the requesting physician must be present with the patient. Once the evaluation is completed by the consultation psychiatrist, an appropriate level of care is determined, with a recommendation that is individualized to the patient’s need.
These initiatives would be recommended by the Consultation-Liaison service, or designated psychiatrist to the primary service for the referring physician's approval.