

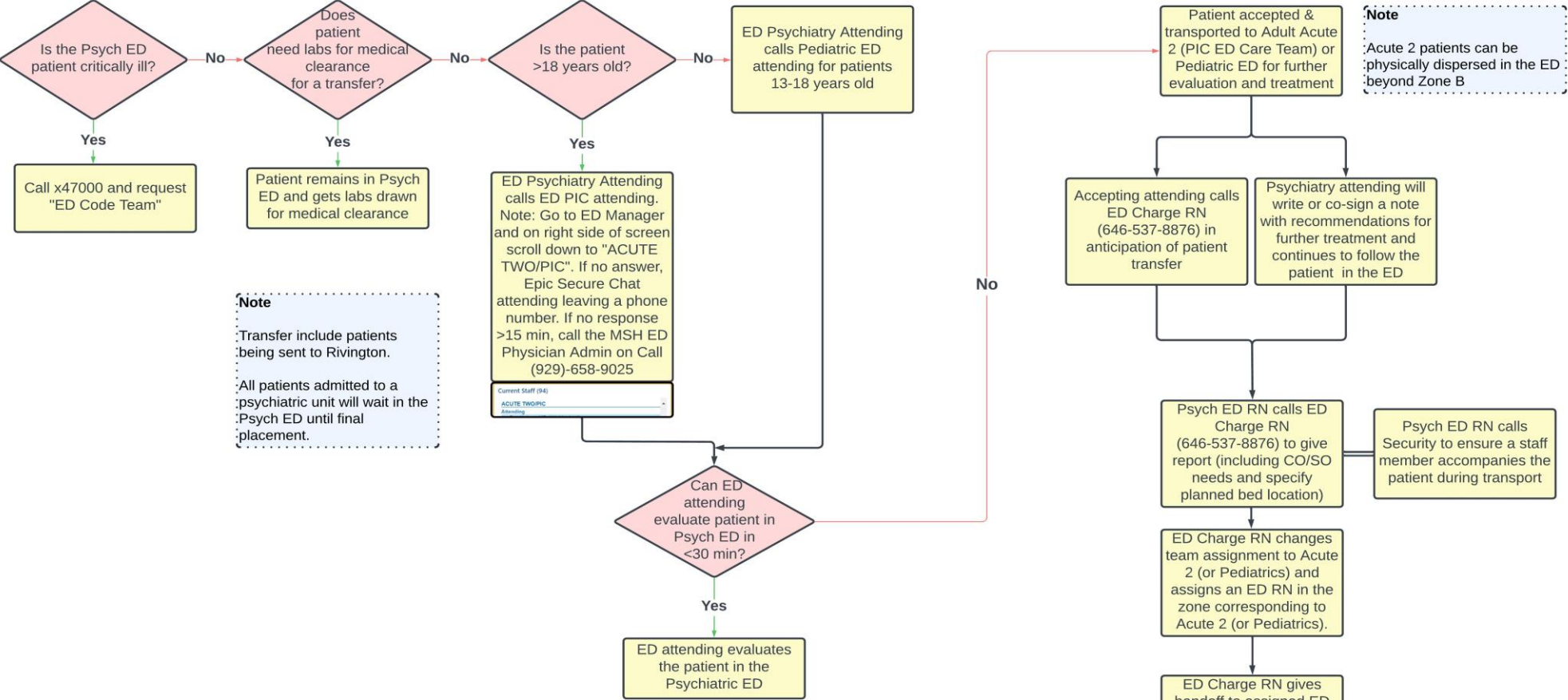
MSH Emergency Medicine Pathway Psych ED to Med ED Transfer

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Safety Observation (SO)	Constant Observation (CO)
For patients who are at risk of falls, elopement, or interfering with medical devices	For patients at risk of harming themselves or others.
The assigned staff member remains in close proximity but may be responsible for up to 4 patients in certain settings.	The assigned staff member must maintain arms-length distance or visual contact at all times, with one staff member per patient.
Can be initiated by an RN without a medical order.	Requires a medical order from a licensed practitioner.
The staff member may need to wait outside the bathroom door, depending on the situation.	The staff member must accompany the patient into the bathroom.
Example: A patient who is a high fall risk due to medication.	Example: A patient who has expressed suicidal ideation.

Psych ED RN, ED RN and A2 attending huddle using checklist

1. ED RN and Psych RN utilize two identifiers to confirm correct patient.
2. ED RN verifies with Psych RN if patient needs:
a. Safety observation and ED RN places appropriate orders, OR
b. Constant observation and ensures appropriate orders are placed by a ED Provider.
3. ED RN ensures that patient is not left alone until assigned CO/SO staff is present.
4. ED RN confirms with Charge RN so necessary resources can be secured.
5. ED RN confirms that patients belongings are with security.
6. ED RN clarifies with Psych RN if there have been any changes in patient's clinical status since handoff to Charge RN.

When patient arrives from Psych ED, Psych RN initiates a huddle with assigned ED RN.
**If the Psych RN is unable to bring the patient to the ED, the ED team will walk to Psych ED.

Assigned ED RN calls Acute 2 or Peds attending on phone number listed on trackboard and completes checklist with Psych RN.