Families have a hard time deciding when to seek emergency treatment for a mental health concern. A psychiatric emergency is a situation that is dangerous and life-threatening. Seek immediate attention if any of the following are present:

**Risk to others:**
- Threatening to or thinking about harming a person or group of people
- Threatening a person with a weapon
- Harming animals
- Becoming more violent toward others

**Changes in behavior or thinking:**
- Hearing or seeing things that are not present (hallucinations)
- Hearing commands to harm others or themselves
- Overly fearful, anxious or unreasonable (symptoms of paranoid thinking)
- Losing touch with reality
- Severe anxiety
- Two or more of these behaviors: decreased appetite, decline in personal hygiene, poor sleep, increased isolation at home/refusal to leave home
- Online searches about ways to harm themselves
- Cutting or hurting themselves in an attempt to die

**Risk to self:**
- Threatening or thinking about suicide
- Taking steps to commit suicide such as getting a weapon, making a noose, or gathering pills
- Writing a suicide note

If your child is in immediate danger, call 911 or go directly to your nearest emergency room. If you cannot transport your child safely call an ambulance or the police.

Some issues are concerning but do not require emergency psychiatric treatment and may be addressed by a pediatrician or outpatient mental health provider during regular business hours:
- Routine medication changes or medication refills (prescriptions will not be provided in the emergency room)
- Behavioral symptoms that have not improved with a prescription or prescription change
- Full mental health evaluations (IQ testing and school IEP services)
- Chronic concerns that are not life-threatening, such as mild anxiety and defiant behavior
- Request for placement in a long-term residential facility

Call the PIRC at 205-638-PIRC (7472) for mental health resources in your community.
What to Expect in the Emergency Room

**Registration/Triage**
- Registration staff will ask for the reason you have come to the emergency room, as well as other basic information.
- A nurse will assess the patient’s needs and urgency of treatment.

**Treatment Room**
- The patient and caregiver will move to a secured and safe treatment room in the emergency room.
- A Clinical Associate (CA) will remove all patient belongings and place in a locker for safety.
- Staff will provide patient with paper scrubs to change into.
- At least one family member or caregiver is required to stay with the patient at all times.
- No electronics or personal items are allowed in the room for safety reasons. Personal belongings will be secured in a locker. Phones are available for caregivers to use.
- A nurse and/or a CA will check vital signs and the nurse may give medication as needed.

**Medical Exam**
- The patient will be assessed by an Attending Physician who determine if medically stable.
- If cleared medically, the patient is seen by the mental health team.

**Psychiatric Exam**
- An intake assessment will be conducted by a Licensed Professional Counselor, Licensed Independent Clinical Social Worker, Nurse Practitioner or doctor, all under the care of the Attending Psychiatrist. The assessment includes reasons for the emergency room visit, a history of mental health concerns past or present, any previous treatment, family history and a mental status exam.
- An evaluation may be conducted by the Attending Psychiatrist.

**Treatment Plan/Admission or Transfer/Discharge from Emergency Room**
- The mental health team will consult with the Attending Psychiatrist, Attending Physician, and family/caregiver to determine the best treatment for the patient.
- Admission to Children’s or transfer to another facility will be coordinated by a staff member.
- If the patient is not admitted for care, a team member will refer the patient back to their mental health provider or give a list of outpatient providers for follow-up.

Call the PIRC at **205-638-PIRC (7472)** for mental health resources in your community.