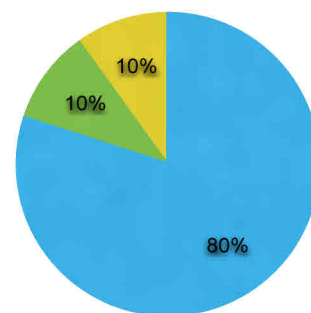


Psychiatric Examination

History: This patient is committed self harm +/- aggressive

Task: Assess this patient and determine their suicide risk



● examination ● communication ● management

Marking Criteria	Not Completed	Partially Completed	Completed
Wash hands, Introduction, confirms identity of patient			
Appropriate interview room, chaperone or security			
Obtains consent			
Considers organic cause and asks for baseline observation including: pulse, blood pressure, respiratory rate, oxygen saturation, blood sugar, temperature			
Obtains history of events, PMH, DH, psychiatric history			
Assesses Appearance / behaviour			
Assesses Speech			
Assesses Mood – depression, biological symptoms, suicidal thoughts			
Asks about Hallucinations			
Assesses Thought disorder			
Assesses Cognitive function if required			
Assesses Insight			
Asks about self harm, suicide, motive, planning			
Uses SAD PERSONS score to assess suicide risk			
Male sex (1)			
Age <19yrs or >45yrs (1)			
Depression or hopelessness (2)			
Previous suicide attempt (1)			
Excessive alcohol or drug use (1)			
Rational thinking loss (2)			
Separated, widowed or divorced (1)			
Organised attempt (2)			
No social support (1)			
Stated future intent (2)			
Invites questions, Thanks patient			
Calculates scores, Summarise findings, and management			
Overall			

Psychiatric Examination

Level 1 Understanding (basic sciences)

In the confused aggressive patient list 6 organic causes of the patient's condition. (If you use, for example, sepsis, UTI, pneumonia, this will count as one mark)

CNS infection (Meningitis / encephalitis)

CNS tumour

Hypoglycaemia

Drugs / alcohol intoxication or withdrawal

Hypoxia

Subarachnoid haemorrhage

Postictal

Acute metabolic/endocrine disturbance

Level 2 Understanding (applied sciences)

According to the NICE violence guidelines, what 4 steps should be taken prior to seeing the patient?

Risk assessment for violence

Use designated interview room – alarm, outward opening door, window, clear of potential weapons

Inform senior member of nursing staff you are seeing patient

Chaperone, or 5 minute checks via window

(arrange for separate quiet room, arrange sufficient help

Consider sedation, Ensure trained staff availability, protect self)

Level 3 Understanding (advanced sciences/management)

In the violent patient which drug is recommended in the NICE guideline for sedation (give dose and route)?

Lorazepam PO as BNF (1-4mg daily in divided doses) or IM or IV (1.5-2.5mg)

+/- haloperidol 5-10mg IM