Article: 0654

Topic: EPW20 - e-Poster Walk Session 20: Emergency Psychiatry

Factors Predicting the Likelihood That Patients Referred to the Liaison Psychiatric Team Will Have Had a Prior Emergency Physician Examination or Medical Investigations

V. Agyapong¹, E. Denga¹, O. Ogunsina², L. Ambrosano², S. Corbett²

¹Department of Psychiaty, University of Alberta, Edmonton, Canada; ²Department of Psychiaty, Northern Lights Regional Health Centre, Fort McMurray, Canada

Objective

To examine the factors that can predict the likelihood that patients presenting to the emergency room and referred to the liaison psychiatric team will have had a prior emergency physician examination or medical investigations

Methods

Twenty-two independent demographic and clinical factors contained on data assessment tools for 337 patients assessed by the liaison psychiatric team in the Emergency Room (ER) over 6 months were compiled and analysed using SPSS Version 20 with univariate analyses and logistic regression.

Results

Overall, an ER Physician physically examined 55.5% of patients referred to the liaison psychiatric team and 29.7% of the patients had prior medical investigations. Patients who presented to the ER with a chief complaint of low mood were about two and a half times less likely to receive a physical examination from an ER Physician or a medical investigation prior to referral to the liaison psychiatric team compared to patients presenting with a medical complaint, controlling for other variables in the model. There was no significant difference in the likelihood that patients presenting to the ER and referred to the liaison psychiatric team with an anxiety, psychotic or drug/alcohol related chief complaint received a physical examination or a medical investigation prior to referral compared to those presenting with a medical complaint, controlling for other variables in the model.

Conclusion

Where appropriate, patients presenting to the ER need to have organic causes to their presentation ruled out prior to referral to liaison psychiatric teams.