

BEHAVIORAL EMERGENCIES

Revised 3/1/2000

b-1 CRISIS

PRIORITIES:

- ABCs
- Assure an advanced life support response
- Determine causes of the reactions and attempt to rule out physiological reasons for patient's behavior (e.g., depression, diabetes, fever, drug use, daily medications, etc).
- Record physiological and psychological finding
- Transport when assured the patient can be safely contained in the ambulance.

Acute Stress Reaction

Unruly, irrational behavior that may be caused by psychiatric illness, organic illness (such as hypoglycemia and hypoperfusion states), withdrawal or intoxicant states.

1. Protect yourself and others. Never try to subdue a patient forcibly without adequate help (at least four people; from law enforcement, other rescuers, etc).
2. Once subdued, rescuer must assume control of the situation to minimize confusion on the part of patients and rescuers alike.
3. Speak in a calm but firm voice, moving slowly when approaching and caring for the patient.
4. Assess and treat life-threatening illnesses and injuries per specific treatment guidelines. If patient refuses care and transport, consider obtaining 5150 hold per local procedure.