The PCFA thanks Erick Cheung, MD, Medical Director of Emergency Psychiatric Consultation Services, for contributing this information. By improving communication and collaboration between referring PCFA members and departmental faculty, trainees, and staff at UCLA-RNPH, we will all be contributing to better outcomes for our mutual patients.

EMERGENCY PSYCHIATRIC EVALUATION

Ronald Reagan UCLA Medical Center's psychiatric emergency facility (RRUCLA ED) is a medical emergency department. There is no dedicated or separate psychiatric emergency department. **The Resnick Neuropsychiatric Hospital** (RNPH) psychiatrists provide a 24/7 psychiatric consultation service to the ED.

The address of RRUCLA Medical Center and Emergency Department is: 757 Westwood Plaza Los Angeles, CA 90095

Pertinent phone numbers are

- Hospital Information: (310) 825-9111
- Patient Information: (310) 825-8611
- Emergency Department (24/7): (310) 825-2111
- Emergency Psychiatry Social Worker: Rachel Cantrock, LCSW, 310-267-9071 (Messages are retrieved Monday Friday 8-5pm only)
- Medical Director of Emergency Psychiatric Consultation Services: Erick Cheung, MD, (310) 206-5361

The Resnick Neuropsychiatric Hospital is located on the fourth floor of the RRUCLA medical center.

The patient in the ED: Generally, a patient arriving at the emergency department will be triaged based on his presenting complaint. He may then be directed to the waiting room before being brought back to the ED for further evaluation. The patient will be seen by an emergency department physician who will perform a basic medical screening examination and determine whether the patient needs additional consultation from specialty services. If indicated, the psychiatric consultant will then be called to assess the patient. This entire process can take anywhere from minutes to hours depending on the volume and severity of cases in the emergency department. Patients and families should be prepared accordingly.

Providing your collateral information: To communicate important collateral information or clinical data on behalf of your patient, call the emergency department clerk (310-825-2111) and provide your telephone number or pager for the emergency department physicians and psychiatric consultant. If you would prefer to make direct contact with someone on the RNPH psychiatric team, you can do so Monday thru Friday between 8am to 5pm by calling the emergency psychiatric social worker at 310-267-9071. to communicate collateral and contact information. She will, in turn, relate it to the emergency psychiatry consultant. If you provide a telephone number that you answer for

emergencies, the emergency psychiatry consultant can contact you to discuss the case in greater detail.

Admission to the hospital: The psychiatry consultation team evaluating the patient in the emergency department will determine what the most appropriate and available disposition options are. If the patient is experiencing a psychiatric emergency that requires psychiatric hospitalization, and there are beds at RNPH, the patient may be admitted there. If there are no beds available at RNPH, the emergency department may, in accordance with federal law, initiate a search for the first available psychiatric hospital that can provide the patient with the appropriate services.

NON-EMERGENCY EVALUATION AND HOSPITALIZATION

Starting the non-emergent hospitalization process: If the patient is not experiencing an acute psychiatric emergency and can safely wait for a bed at NPH to become available, a scheduled admission should be considered. To start the process, call the NPH admissions office at 310-267-8009. The admissions office is open Monday through Friday 7AM to 7PM. The admissions staff will inquire about the clinical need for hospitalization and perform a financial screening to determine eligibility for hospitalization. The patient may then be referred to the financial counseling staff at 310-267-8008.

Arriving for hospitalization at RNPH: If the patient is financially and medically cleared for psychiatric hospitalization, and once an appropriate bed becomes available, the patient may be instructed to come directly to the RNPH admissions office or the inpatient unit on the 4th floor of the Reagan Hospital.

In many cases, the patient may be directed to the Emergency Department for initial screening and intake, especially in situations where the patient may require a more complete medical evaluation, laboratory work-up, evaluation of vital signs, or any other "medical clearance" prior to psychiatric admission.

Substance Detoxification: As a matter of licensure, RNPH does not admit patients solely or primarily for the purpose of detoxification. For patients admitted with dual-diagnoses, substance detoxification may be included as part of the treatment plan.

Initial and follow-up contact: It is the policy of RNPH to have the inpatient treating psychiatrist contact all referring psychiatrists whose contact numbers have either been provided to them or can be found in the member directory on this website.

Use the UCLA directory to find the office number and voicemail for the attending: http://directory.ucla.edu/

You may also reach the inpatient team by contacting the unit nurse or the social worker using one of the following numbers:

	4 East (adult units)	4 North (medical/psychiatric/gero and eating disorders unit)	4 West (Child and adolescent units)
Nursing-Station Telephone	Acute unit: (310) 267-7415	Med/Psych: (310) 267-7365	Adolescent: (310) 267-7377
	Substance abuse/dual diagnosis: (310) 267-7411	Eating disorders: (310) 267-7496	Child/"swing": (310) 267-7375
	Psych ICU: (310) 267-7418		Eating disorders: (310) 267-7373
Fax	Substance abuse/dual diagnosis: (310) 267-0793	(310) 267-0792	Adolescent: (310) 267-3617
	Substance abuse/dual- diagnosis: (310) 267-3616		Eating disorders: (310) 267-3774
Unit Social Worker	Suzanne Ferris, LCSW (310) 267-9189 Pager: 90483	Anna Kurtz, LCSW (310) 267-9192 Pager: 93586	Miranda Daniel, LCSW (310) 267-9197 Pager: 93505

ADDITIONAL INFORMATION

Other contacts:

- Sue Moss, LCSW, Chief of Clinical Social Work Services, Resnick Neuropsychiatric Hospital: (310) 267-9198
- Bruce Kagan, MD, PhD, Adult Inpatient Unit Director: (310) 206-2372
- Mark DeAntonio, MD, Child Inpatient Unit Director
- Stephen Chen, MD, Geriatric Inpatient Unit Co-Director
- James Spar, MD, Geriatric Inpatient Unit Co-Director, Adult Psychiatric Residency Director: (310) 825-0038

Attending Rounds: The inpatient teams perform rounds every morning. Once weekly, the inpatient team conducts a thorough interdisciplinary "treatment planning" meeting for each patient. If you wish to call-in or attend this treatment planning meeting, you can contact the unit's social worker to assist in scheduling a meeting.

Providing Supplementary information: Your outpatient treatment summary, diagnostic assessments, and history of medication trials/failures are important to the inpatient team. Contact the patient's RNPH psychiatrist to communicate this information.

Additionally, you may fax relevant treatment records or summaries to the appropriate unit (see chart above).

Discharge Planning: You should provide your preferred fax number and address to the treatment team in order to receive a discharge summary and aftercare plan. Although a prescription for up to 1 months' supply of medications may be given upon discharge, you will, of course, need to make certain that there is continuity of care both pharmacologically and psychotherapeutically. In that regard, your patient will require a follow up appointment with you as soon as possible, preferably less than 2 weeks after discharge. Where possible, efforts to confirm that follow-up appointment date and time are made by the assigned social worker as part of the discharge planning process.

Feedback: To improve this process, we are interested in obtaining feedback from PCFA members and RNPH staff. Please e-mail us at psychiatricclinicalfaculty@gmail.com to add your experiences and suggestions.