



Transcript: Emergency Examination Orders (EEO)

Name	Dialogue / Actions
Richard	<p>Hi, Richard here again. In this scenario I'll be taking you through the process of having a patient called John Smith, examined under an emergency examination order. Under the <i>Mental Health Act 2000</i>, an emergency examination order empowers a police officer, ambulance officer or psychiatrist to act in emergency circumstances to take a person to an authorised mental health service. The purpose of the examination is to decide if assessment documents should be made for the person.</p> <p>This scenario starts with Anita calling Triple-O and advising them that her husband John Smith had told her that he had taken all his medication with the intention of overdosing. She also advised them that he has depression and had been drinking since yesterday and was really upset and wouldn't let her take him to hospital. He was also difficult to understand as he was crying and slurring his words and she was worried about what he may do.</p> <p>The Queensland Ambulance Service advised her that they had an ambulance on the way and to keep talking to him until ambulance officers arrive. Shortly after they arrived at Anita and John's house, John was sitting in the lounge room crying uncontrollably with his head in both hands and smelt strongly of alcohol.</p> <p>Anita explained that they had an argument about 2 hours ago because he wasn't taking the medication prescribed by his GP. She also advised them that he had attempted suicide about 12 months ago following a series of losses. After talking with John, the ambulance officers determined that an emergency examination order was required as John wouldn't go voluntarily with them to an authorised mental health service to be examined by a doctor or an authorised mental health practitioner.</p> <p>The ambulance officers considered John met the criteria for an emergency examination order as they reasonably believed:</p> <ul style="list-style-type: none">• he had a mental illness• because of this illness there was an imminent risk of significant physical harm• proceeding under a justices examination order would cause a dangerous delay and significantly increase the risk of harm to John, and• John needed to be taken to an authorised mental health service to decide whether a <i>request for assessment</i> and <i>recommendation for assessment</i> should be made. <p>John was advised by the ambulance officers that he needed to accompany them to the authorised mental health service under an emergency examination order. He was transported to the authorised mental health service and immediately on arrival at the authorised mental health service, part one of the emergency examination order form was completed by the ambulance officer including the time the order was made. The ambulance officer then immediately gave the emergency examination order to the health service employee who completed part two of the emergency examination order form including the name of the authorised mental health service and the time and the date that the emergency examination order was made. This enabled John to be detained for a maximum of 6 hours.</p>



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	Let's take up this scenario where Matilda, an authorised doctor, and Edward and Isobel, authorised mental health practitioners, are discussing John's examination under an emergency examination order
Edward	Have you seen Matilda, the Psychiatric Registrar?
Isobel	I believe she's seeing John Smith in cube 11.
Edward	Oh, that's good. I went to examine John at both 20 past midnight and 5 past 2 and he was still not able to engage in the examination due to the effects of the medications he had taken and his intoxication; he was still so drowsy! We need to ensure that he is examined shortly as the emergency examination order is only in effect for 6 hours.
Isobel	I gave Matilda a handover regarding John's history, current presentation and risk, she also knows that John's on an emergency examination order.
Matilda	I have examined John Smith. He outlined some significant stressors that have led to his suicidal ideation and actions, which have also been compounded by his non-compliance with his current treatment. John has agreed to an admission to restart his medications and re-engage in treatment. So he will be admitted as a voluntary patient.
Edward	Have you contacted the on-call psychiatrist about this plan?
Matilda	<p>I've spoken to him by phone and he's agreed to the following plan:</p> <ul style="list-style-type: none">• admission• 15 minute visual observations• physical observation to continue 4 hourly• commence on an Alcohol Withdrawal Scale, and• review by his treating team in the morning. <p>John is happy for us to keep his wife Anita informed, so I have advised her of the admission and she has gone home and will return in the morning to the inpatient unit to see the team. Isobel, would you mind calling the ward and arranging the admission? I will document on part 3 of the emergency examination order form, the reasons that the assessment documents were not made and detail the management plan and the discussion with the consultant psychiatrist.</p>
Edward	I'll go and see if his chart has been completed with the medical clearance and investigations, so that you can document all of that and ensure that we have everything together for his admission.