



ASSESSMENTS

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Thank you Justin. Welcome to the third lesson where we discuss telltale qualities to look for, while assessing a person with suspected abnormal behavior.

Hence, better understanding some of the aspects of an individual's appearance and conduct can provide vital clues to evaluate a patient's psychiatric condition, and decide on the appropriate care.

So, let's get started.

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General Appearance

- Look closely at nails, clothes, and hair
- Possibility of mental illness if
  - ✓ Looks disheveled
  - ✓ Wears dirty clothes
  - ✓ Has a bad body odor
  - ✓ Hair is uncombed and in disarray
  - ✓ Nails are unkempt and dirty
  - ✓ No bath for many days
  - ✓ Dirty and torn clothes



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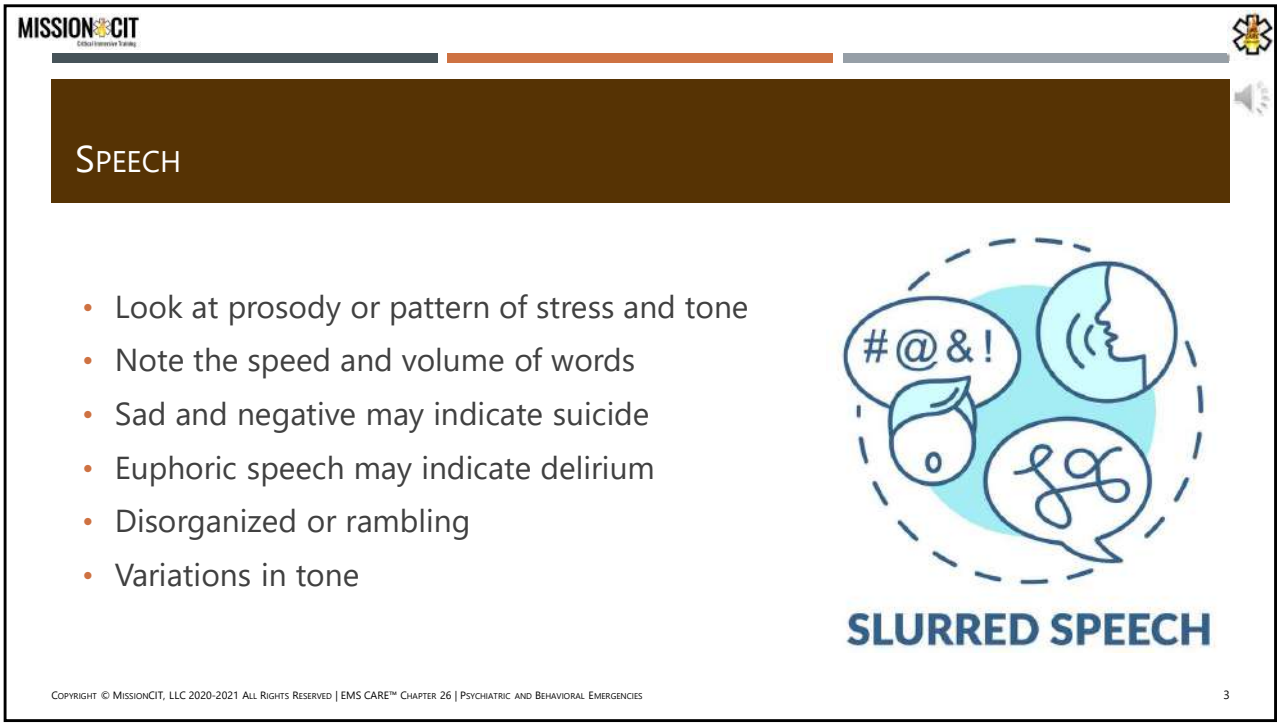
The general appearance of a patient can tell you a lot about that person's mental condition.

Specifically, look at the clothes, hair, and nails of the patient to get an idea. Everything is not alright if a person

- Looks disheveled
- Wears dirty clothes
- Has a bad body odor
- Hair is uncombed and in disarray

- Nails are unkempt and dirty
- Looks like he or she hasn’t taken a bath for a few days
- Clothes are torn, dirty, or mismatched

These signs tell you that the patient has not been in a good condition and may need medical help, depending on other factors such as behavior and mood swings.



Speech is another important assessment of a person's well-being.

While assessing the speech, look for prosody or the pattern of stress and tone in it. Also, make a note of the speed and the volume of words used by the patient. For example, if a person's tone is sad and negative, and if there is talk of suicide, you can conclude that it is a possibility, and that person needs help.

On the other hand, euphoric speech that sounds abnormally excited can indicate delirium, which may

again require help, depending on its level.

Likewise, if a person’s speech is disorganized or if it is rambling, it is a sign of delusion or hallucination.

Another aspect to look for is variations. In conditions like bipolar disorder and schizophrenia, there can be active and passive phases, and the behavior of a patient may vary accordingly. During the active phase, an individual may talk a lot with an excitable tone while during the passive phase, the individual may seem withdrawn with just a few words.

Overall, what a patient says should make sense to you and it should sound normal. Any variations and inconsistencies are worth noting down.

Posture and Gait

- Posture and gait are important psychomotor behavior
- Slumped, withdrawn posture indicate mental health
- Reduced velocity in gait, small stride length, increased gait cycle, and double limb support
- Reduced walking speed, arm swing, and vertical head movement



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Many psychiatric disorders are characterized by changes in psychomotor behavior. Posture and gait are two of the most important behaviors that reflect the health of the underlying nervous system.

In the world of psychiatry, problems in gait denote a defective brain function as such patients develop balance disorders that impact both the gait and the posture.

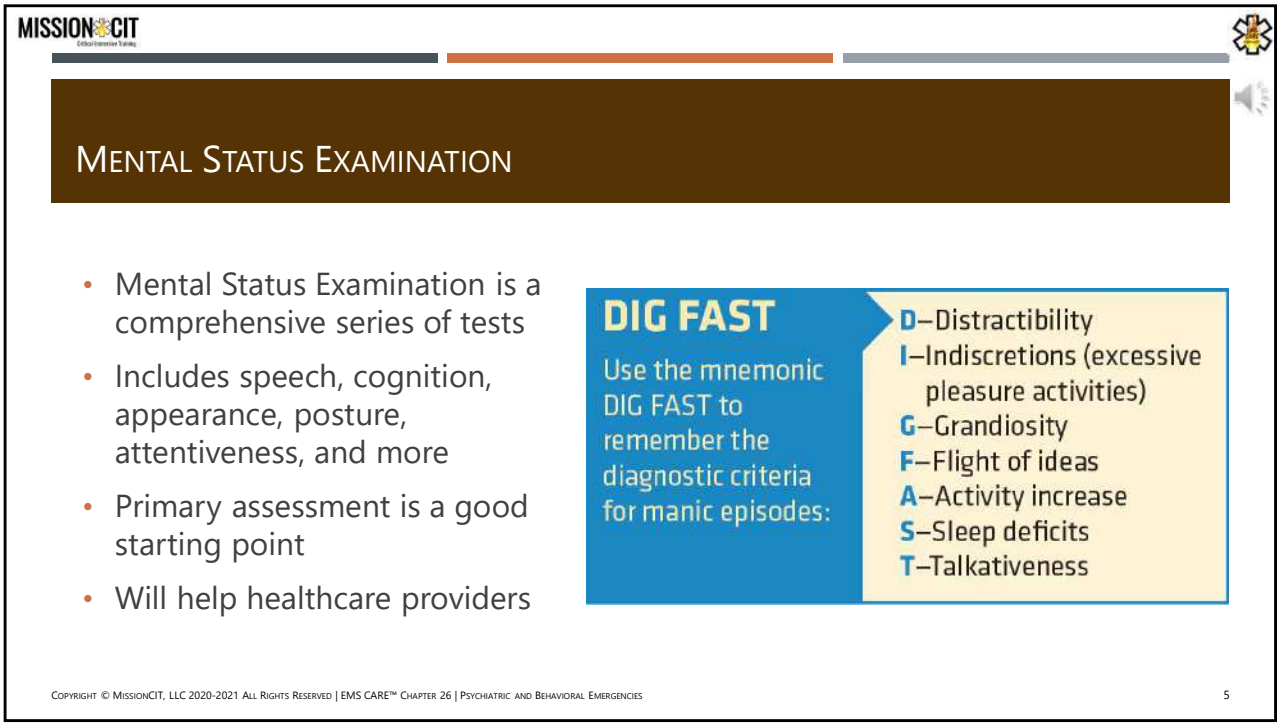
For example, a slumped sitting posture indicates clinical depression, negativity, withdrawal, and fear while an

upright sitting posture is a positive sign.

Similarly, research shows that a significant reduction in gait velocity, smaller stride length, increased gait cycle duration, and double limb support for longer periods are indicators of mental disorders.

Further, sadness, depression, or loneliness is characterized by a reduced walking speed, arm swing, and vertical head movements.

So, keep an eye out for these symptoms to help with evaluation.



The overall treatment of a patient suffering from mental health issues involves a detailed examination of the mental status. This mental status examination, also called MSE, is a comprehensive series of tests that help to determine the mental functioning of an individual. This includes speech, cognition, appearance, attentiveness, and more.

Your primary assessment as an emergency first responder is invaluable in this MSE. So, make a detailed note of the patient's mental status from the point of first contact until the patient is hospitalized, as this will help

the healthcare provider to get a deeper understanding of the patient’s history and behavior.

Mood Swings

- Length and severity of mood swings indicate a problem
- Periods of high and low
- Evaluate frequency and duration
- Talk to patient and family members to understand the pattern



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Mood changes are a common part of everyday life as everyone feels happy after accomplishing something and sad at a loss. However, the length and severity of these feelings, along with their impact on everyday activities is what helps to understand the possibility of a psychiatric disorder.

Many mental illnesses such as severe depression and bipolar disorder are characterized by mood swings. The key difference between the two conditions is that people suffering from depression tend to be sad, lonely, feel guilty, and can have a loss of interest in all activities

while a person suffering from bipolar experience these symptoms too, along with periods of high energy and euphoria.

In other words, patients suffering from depression are sad and lonely for longer periods while those having bipolar alternate between periods of high and low.

So, evaluate these mood swings. Talk to the patient if possible to get an idea of the mood swings. You can also talk to neighbors, family members, and friends to understand the pattern of mood swings.

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THOUGHTS, PERCEPTIONS AND JUDGMENTS

- Ability to articulate thoughts well
- Look for words and tone
- Perception or outlook of life
- Capable of handling situations?
- Explain a suicide plan?



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The thoughts, perception, and judgment capabilities of a patient can tell you a lot about the severity of the problem they are going through.

For example, if a person is able to clearly articulate their thoughts in such a way that you can understand, they may be experiencing only mild or moderate symptoms that may not require an immediate hospitalization. Of course, look for other aspects too such as the words and tone. If the patient sounds highly suicidal, you may need to take steps for intervention. But overall, the chances for severe mental illness is relatively less when a person

can articulate the thoughts well.

Next, look at the perception. Does a person sound extremely sad, negative, and has a very pessimistic outlook of the future? If yes, it could indicate an underlying problem. Also, if a person's perception is far-removed from reality or if a person has unrealistic fears such as an alien attack, these could indicate a possible case of delusion, hallucination, and mild delirium.

Finally, evaluate a person's judgment. Can the patient clearly explain a suicide plan? Is the patient capable of handling the situation and bringing it under control without help? Answers to such question can help you decide the appropriate care.

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MEMORY LOSS

- Dementia causes confusion, short-term memory loss, and disorientation
- Alzhiemer's and Parkinson's can have memory loss from mild to severe cognitive decline
- Memory loss can happen due to many conditions like hyperglycemia, hypotension, and even wounds

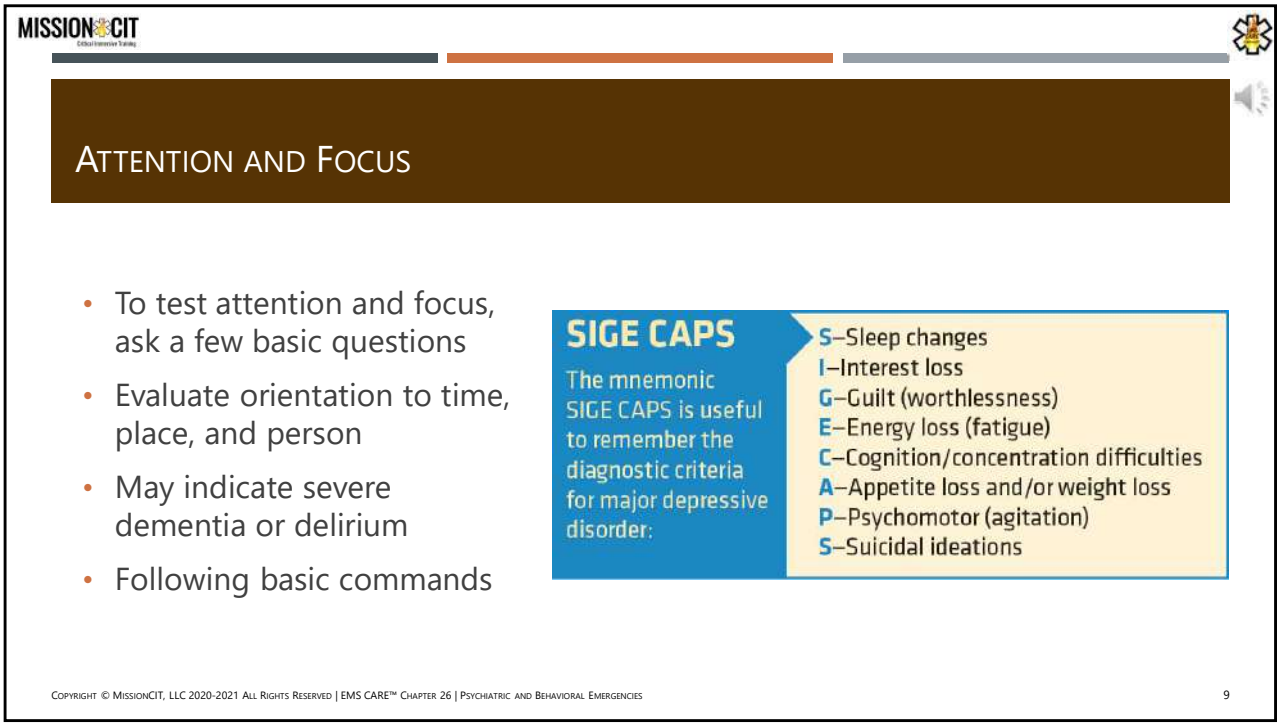


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Dementia is a medical condition that causes confusion, short-term memory loss, ability to retain new information, and disorientation. Similarly, delirium is another condition that is associated with memory loss, but the difference is that in dementia the memory loss is gradual and predictable while in delirium, the memory loss is sudden, and is often reversible.

Dementia is more likely to occur in older people and is often considered a part of the aging process. It merits to note that there are seven stages in dementia that range from mild cognitive to severe cognitive decline.

That said, never assume that it is dementia when you get a call from a geriatric patient as this short term memory loss can also occur due to a host of other reasons such as hyperglycemia, hypotension, and even wounds.



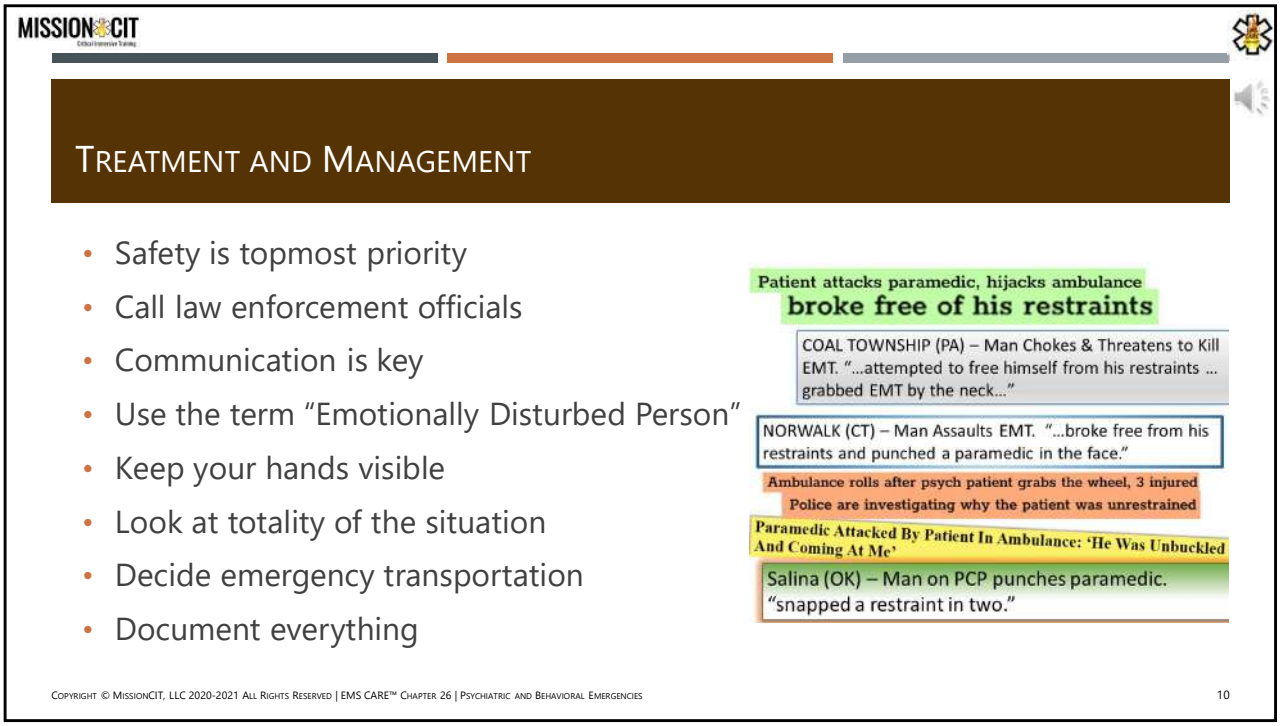
Attention and focus are other aspects that give an insight into the mental health of a patient. This is important because an inattentive patient cannot cooperate during an evaluation process, and it can impede testing and treatment as well. To test the attention and focus levels, ask a few basic questions such as the name of the person, address, birth date, and so on.

Also, evaluate the person's orientation to time, place, and person. Does the person understand the current location and the date or time? When a patient is unable to answer these basic questions, it could indicate severe

dementia or delirium, both of which may require hospitalization.

Next, check if the patient can follow basic commands like identifying the left and right hand. Ask the patient to do simple things like lifting the right leg or raising the left hand to assess the ability to follow commands.

Decide on the appropriate care based on the outcome to such attention and focus evaluations.



Here are some tips to keep in mind while assessing, treating, and managing patients with psychiatric disorders.

- Your safety is the topmost priority, so make sure you wear PPEs. Reach out to a law enforcement officer if you feel unsafe.
- Communication is the key to establishing a good rapport and trust. Be calm and use soothing words to gain the trust of the patient.
- Be persuasive without being too dominant or authoritative.

- Keep your hands in a visible place, so the patient doesn't feel intimidated by your presence.
- While communicating, stay away from words such as crazy or retarded. The protocols require you to use the term Emotionally Disturbed Person or E D P
- Look at the totality of the situation while evaluating
- See around for clues that can give you an idea of the patient's condition. This is highly pertinent in the case of poisonings and overdoses
- Decide on emergency transportation
- Check the patient's vitals, and stabilize the patient if needed.
- Finally, do a thorough assessment of the patient and the situation, and document everything you see. This can go a long way in helping a healthcare provider give the most appropriate care for the patient.

With this, we come to the end of the lesson on assessments. Next, Justin will take you through the factors of behavioral change.