



MENTAL STATUS EXAMINATION

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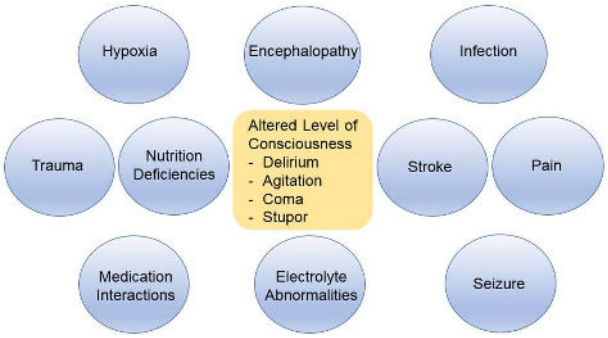
Thank you Missah! The mental status of a patient may be altered due to many reasons. Understanding the possible underlying cause helps to assess an appropriate care plan for the patient.

In this lesson, we will be talking about the need for a mental status examination, and how to approach it.

Good studying!

Need for Mental Status Examination

- Identifying the root cause of an altered mental state is not easy
- Impaired
- Symptoms may be different
- Multiple conditions
- No assumptions



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According to the NIH, Altered mental status or AMS, represents a broad spectrum of disease processes. If the cause for AMS is found, the prehospital care providers will then transition to that more-specific protocol. However, EMS providers have limited time to evaluate these undifferentiated patients. Yet, this is one of the EMT's key responsibilities.

So, what do you do when faced with an apparent AMS patient? After a primary assessment, use your situational appropriate basic tools like the Glasgow Coma Scale, Cincinnati Pre-hospital Stroke Scale, and A E I O U TIPS.

But in the real world, this is not easy as an altered mental state can happen due to many reasons.

Secondly, the patient may not be in a position to effectively communicate their symptoms. So use all your available resources on the scene.

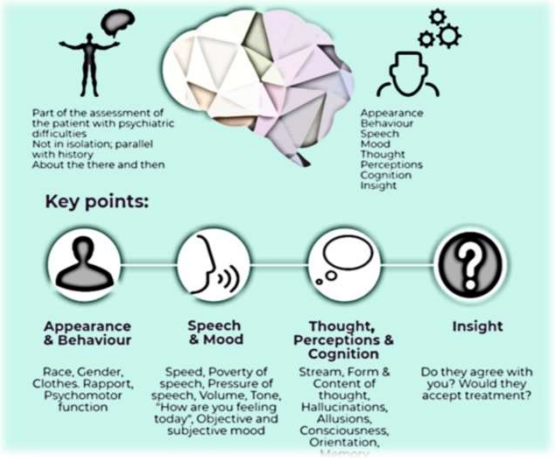
Next, consider that a different symptom of the same condition may be dominant for the patient at different times. A patient's problem today may not be the same as a previous incident. Bottom line, don't assume today's situation correlates with a previous event.

Of course, there is always a possibility that the patient can have many issues at the same time, and only the most dominant issue will be visible to you.

So, to get a comprehensive idea of the patient's current mental health, perform an unbiased Mental Status Examination, without assumptions or other expectations.

Components of Mental Status Examination

- Level of consciousness
- Attention
- Short-term and long-term memory
- Cognitive ability
- Mood
- Affect
- Behavior and appearance



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While the exact list of questions varies based on local protocols, here are some things that must be included in your examination.

Firstly, assess the level of consciousness. Is the patient aware of the surroundings? Is the patient aware of your presence?

Next, check the attention of the patient. Can the patient focus on the questions you ask? Is the person easily distracted?

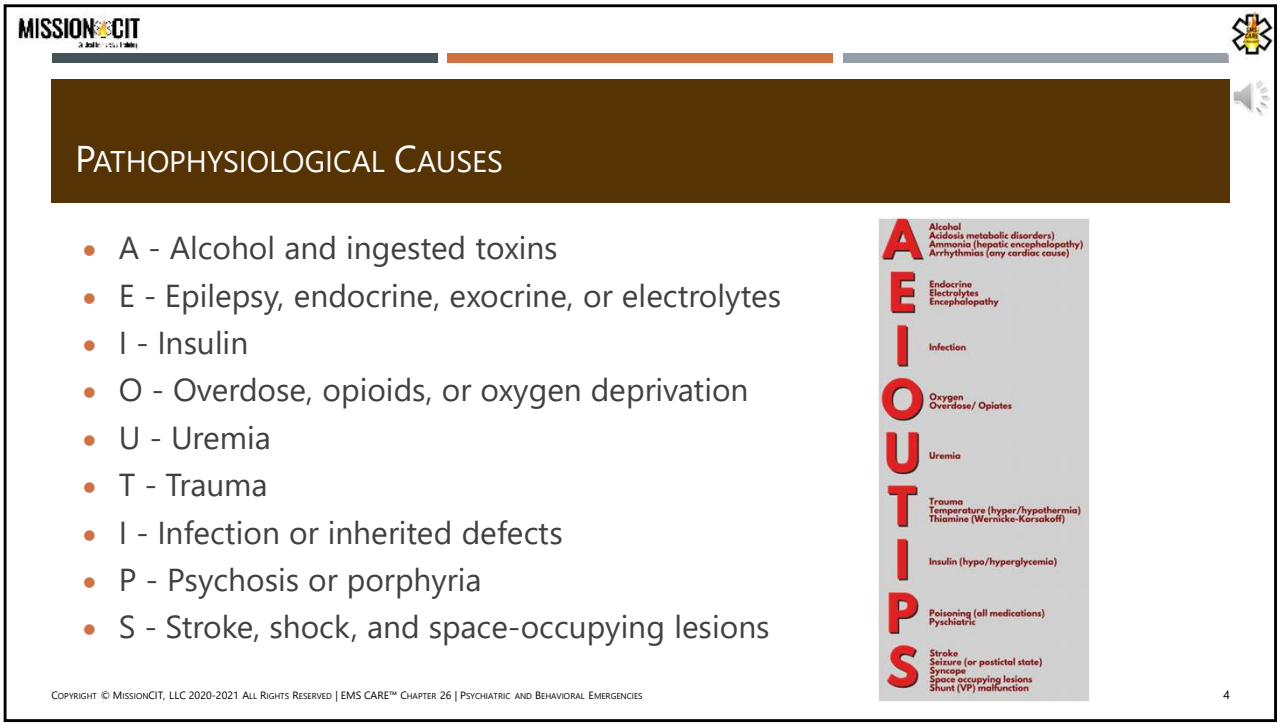
Moving on, check the patient's memory including the

short-term and long-term memory. Check if the patient is able to recollect the words he or she said earlier? Likewise, check for long term memory by asking the date of birth, names of family members, and more.

Th next aspect you must check for is the cognitive ability of a person. Can the patient answer simple questions that require a little bit of thinking? Can he or she do simple math problems or spell out simple words?

Assess the patient’s mood as it reflects the emotional state. Also, check the patient’s affect, which is the patient’s demeanor and response to stimuli.

Alongside, closely look for behavior and appearance of the patient.



An important part of the mental status examination is the pathophysiological cause of the altered mental status. A commonly used mnemonic is A E I O U TIPS, where

- A - stands for Alcohol and ingested toxins
- E stands for Epilepsy, endocrine, exocrine, or electrolytes
- I stands for Insulin
- O stands for Overdose, opioids, or oxygen deprivation
- U stands for Uremia

- T stands for Trauma
- I stands for infection or inherited defects
- P stands for psychosis or porphyria
- Finally, S stands for stroke, shock, and space-occupying lesions

With this, we have come to the end of this lesson. Next, Missah will talk about Delirium.