



Acute inpatient mental health treatment is the highest level of psychiatric care. Treatment is provided in a 24-hour secure and protected, medically staffed environment with an interdisciplinary team approach. Daily evaluations by a psychiatrist, twenty-four-hour skilled psychiatric nursing care, medical evaluation, and a structured atmosphere are required. The goal of the inpatient stay is to stabilize the individual who is experiencing an acute psychiatric condition.

The following criteria are intended as a guide for establishing medical necessity for the requested level of care. The criteria are not a substitute for clinical judgment and should be applied by appropriately trained clinicians considering the unique circumstances of each patient, including comorbidities, safety, and supportiveness of the patient's environment.

PLEASE CALL 765-464-0400 TO INITIATE THE REFERRAL PROCESS

Admission Criteria

- Does the patient demonstrate actual or imminent danger to self or others, or is grossly impaired as evidenced by at least ONE of the following (suicidal, homicidal, gravely disabled, etc.)?

Referral Documentation

- Labs: CBC with diff, CMP, COVID-19, blood alcohol (must be less than $<.10$ for admission), TSH, UA, and UDS (pending, not necessary to be resultated)
- What is the patient's alcohol and other drug use history?
 - Detox/withdrawal?
 - Prescribed methadone and suboxone?
- Current medical status and relevant medical history to include
 - Vital signs
 - Preexisting medical conditions
 - COVID-19 status
 - Can the patient ambulate? Use a walking device? Perform own ADLs?
 - Incontinent? Use of catheters?
- Has the patient been agitated, required PRN medications, assaulted others, or been restrained?
- Is this admission voluntary or involuntary?

Exclusions: Use of oxygen (intermittent or continuous), IV fluids/medications, detox only, dementia, intellectual developmental disability diagnosis only, <18 years of age, and trach. Wound care will be assessed on a case-by-case basis.