Lecture Topic: The Geropsychiatric Patient in the ED

1. A 78 year old male tells you he just has no energy. His wife died six months ago. His family reports that he is not eating and stays in bed all the time. He says, “It is an effort to do anything. Of course I miss my wife. I wish I were with her.” When asked if he eats, he states, “I eat enough. I don’t like what my daughters make for me. I order in food.” When asked about his children, he replies, “We were never close. I think they feel guilty because their mother is gone.” When asked if he is depressed, the patient replies, “No, I’m not depressed. I’m lonely.”

Medical workup is unremarkable. Which of the following risk factors should raise your concern about this patient’s safety?

A. Poor diet
B. Poor relationship with children
C. Death wish
D. No medical care
E. Loss of wife

Answer: E

2. A 72 year old female presents to the ED very confused and rambling. Her husband brought her to the emergency department. He reports that everything was fine: “We were having a great time at a party, laughing, drinking, having a good time. Then, all of a sudden, she started seeing bugs crawling all over the room. She quickly became very paranoid. I’ve never seen her like this before.” No prior psychiatric history and no family psychiatric history. Past medical history: Hyperlipidemia, Hypertension. Upon examination, patient has a heart rate of 120, BP 160/90. Her oral mucosa is dry, her conjunctiva are injected. Patient is very disorganized and paranoid. She states the devil is chasing her.

Labs – CBC, BMP, UA – WNL
CXR – Neg
CT of head – Neg
BAL - 170

What is the most likely diagnosis?

A. Alcohol intoxication
B. Stroke
C. Cannabis/Formaldehyde intoxication
D. Brief Reactive Psychosis
E. Schizophrenia

Answer: C
3. A 80 year old female presents to the ED via local EMS. Neighbors called the police because the patient was reported to be throwing furniture off the balcony on the 10th floor. The patient is very labile and thrashing about, shouting obscenities, and swinging at the nursing staff. When the gurney straps are released, she lunges wildly at staff and other patients. The patient has never been to your hospital before. Family cannot be located. Your best course of action for the safety of this patient and your staff is:
   A. Haloperidol 5 mg IV
   B. Hydroxyzine 50mg IM
   C. Risperidone 37.5mg IM
   D. Lorazepam 2 mg IM
   E. Haloperidol 2 mg IM

Answer: E