



Assessment and Disposition of Inebriated Patients

APPROVED: 

EMS Medical Director



EMS Administrator

1. Purpose and Scope
 - 1.1. To establish policy and procedures to guide in the assessment and transportation of extremely intoxicated patients presenting to Law Enforcement or the 911 system in San Mateo County.
 - 1.2. To provide for a safe discharge plan for these patients.
 - 1.3. To prevent unnecessary placement of a 5150 hold on patients who are intoxicated without additional psychiatric complaint.
2. Patient Description
 - 2.1. Patients with a primary problem of alcohol intoxication who, due to the severity of their intoxication, require transportation by ambulance to a hospital emergency department.
3. Appropriate Law
 - 3.1. California Penal Code 647(f) PC-Drunk in Public
Who is found in any public place under the influence of intoxicating liquor, any drug, controlled substance, or toluene, or any combination of any intoxicating liquor, drug, controlled substance, or toluene, in a condition that he or she is unable to exercise care for his or her own safety or the safety of others, or by reason of his or her being under the influence of intoxicating liquor, any drug, controlled substance, toluene, or any combination of any intoxicating liquor, drug, controlled substance, or toluene, interferes with or obstructs or prevents the free use of any street, sidewalk, or other public way.
 - 3.1.1. This is a civil detention (not a criminal detention).

Issue Date: April 2, 2012
Effective Date: April 2, 2012
Review Date: May 30, 2015

3.2. Welfare and Institutions Code 5150 W&I-Mental Health Involuntary Detention”

When any person, as a result of mental disorder, is a danger, to others, or to himself or herself, or gravely disabled, a peace officer, member of the attending staff, as defined by regulation of an evaluation facility designated by the county, designating members of a mobile crisis team provided by Section 5651.7 or other professional person designated by the county may, upon probable cause, take or cause to be taken into custody and place in a facility designed by the county and approved by the State Department of Mental Health as a facility for 72-hour hold treatments and evaluation.

4. Field Process

4.1. When 911 is contacted, PD at scene will determine with the responding EMS crew if the patient is capable of ambulating or can speak coherently.

4.1.1. When local law enforcement agency is not on scene then the EMS provider may consider contacting law enforcement.

4.2. If the patient's apparent complaint is intoxication with alcohol, drugs, controlled substances or toluene and is not capable of ambulating, and requires medical clearance, the officer will create a booking sheet for California Penal Code 647(f) PC-Drunk in Public.

4.3. The booking sheet will be given to the transporting paramedics and the patient will be transported to the closest emergency department.

4.4. The paramedic will give the booking sheet to the emergency department charge nurse.

4.5. A 5150 will not be written by the law enforcement officer if the obvious primary cause for EMS transportation is alcohol and/or drug intoxication.

4.6. If the patient is ambulatory, then law enforcement should transport the patient without requesting 911. The patient will be transported to the closest ED if medical clearance is needed or to the facility (detoxification or incarceration) of the officer's choice.

5. ED Guidelines

5.1. The ED will receive the patient and the booking sheet.

5.2. Paramedics will give the booking sheet to the emergency department charge nurse. The ED will need to have access to the information prior to the patients disposition so the arresting agency is known and can be contacted.

5.3. ED treatment for the patient will be guided by the physician.

5.4. The continuation of prehospital restraint will be determined by the ED physician and hospital policy after consultation with the arresting officer.

5.5. If this patient chronically presents to the hospital in an inebriated state, consider contacting local law enforcement for referral to the Crisis Team.

6. ED Disposition and Notification of the Arresting Agency.

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- 6.1. If the patient is to be admitted, hospital staff will contact the arresting agency by phone – this will allow the case to be closed and the 647(f) form to be completed. The contact information is on the booking sheet
- 6.2. If the patient becomes violent, call 911.
- 6.3. If the patient is to be discharged contact the arresting agency, (the contact information will be on the booking sheet).
 - 6.3.1. Avoid notifying the patient that law enforcement will be responding.
 - 6.3.2. The officer will respond and take custody of the patient. The officer will determine if the patient is appropriate for First Chance or will be transported by the officer to jail.
 - 6.3.3. The patients discharge instructions should be given to the officer.
 - 6.3.4. If the patient is insistent on leaving the ED do not interfere, but contact the arresting agency as soon as possible.
 - 6.3.5. If safe discharge to family or friends is available, contact the arresting agency prior to discharge to obtain the arresting officer or agency's authorization. The officer will likely release the patient. This is a civil charge, not a criminal charge and the officer does not have to be present to authorize release.

Algorithm for Inebriate Assessment and Disposition

