

Role: Pediatric psychiatrist (consultant)

You are the on-call child psychiatrist. This morning, you received a consult from the pediatric team about a 15-year-old male with presumed autism who has been admitted to the floor from an unaccompanied minor immigrant camp after sustaining a traumatic brain injury and seizing. The floor is asking you the best way to manage the patient's behavioral challenges while he is admitted. Just recently, a security code was called, and they had to physically restrain the patient and sedate him. He is currently sedated, so you can't interview or examine him.

This exercise begins with you, the bedside RN, the pediatric hospitalist, and the pediatric intensivist calling the patient's sibling over the phone. (In the real world you would be calling through an interpreter.) The team will gather a more thorough mental health history and then explain to the sibling what just happened and what y'all plan on doing next. Then you all will hang up and talk amongst yourselves about what's the best thing to do for the patient and staff. As of this moment, you feel the team still needs to work the patient up for medical/organic causes. You do not see an indication for, nor can you recommend, an inpatient psychiatry assignment at this time.