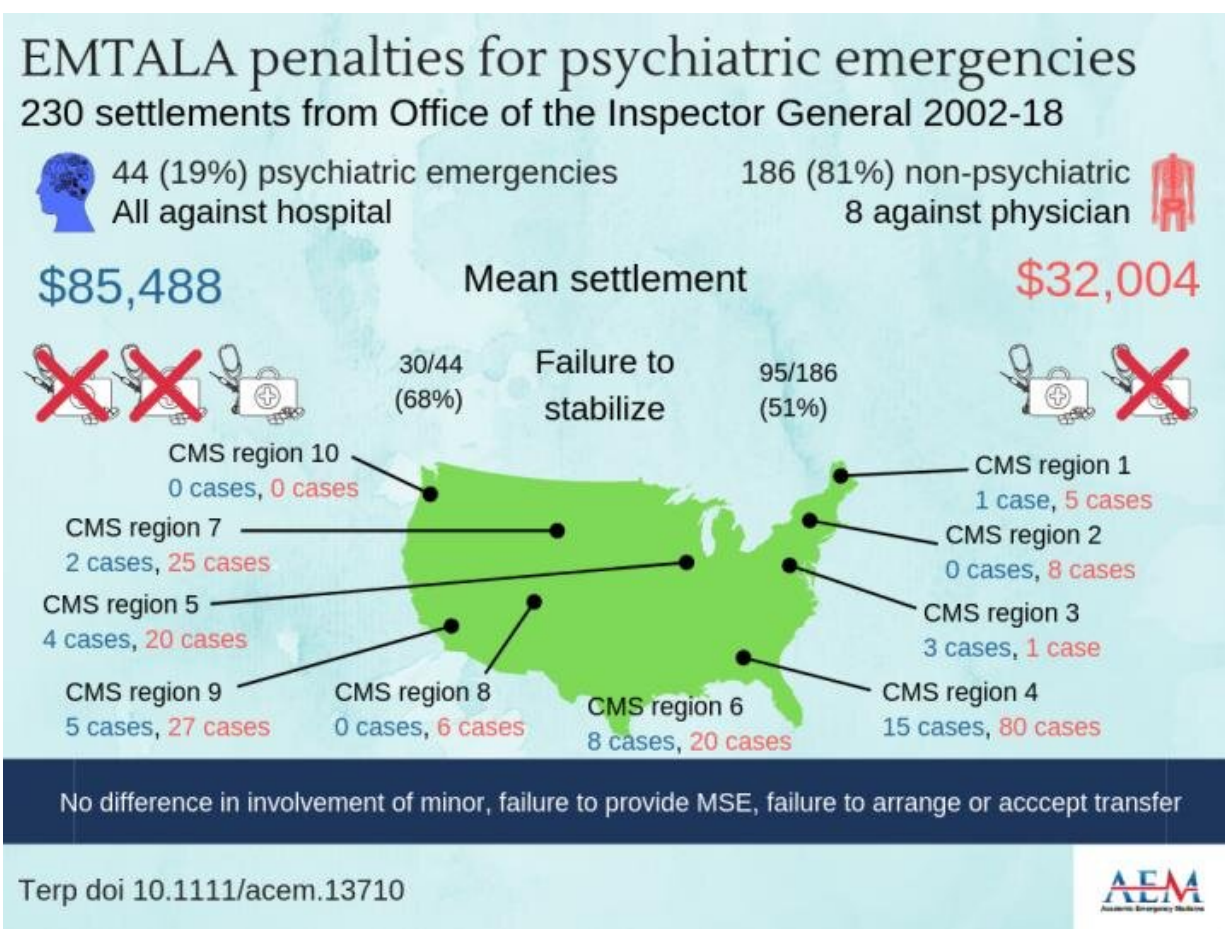


One in five civil monetary penalties due to EMTALA violations involved psychiatric emergencies

May 13 2019



230 settlements from Office of the Inspector General 2002-18. Credit: Kirsty Challen, B.Sc., Mbchb, Mrs, Ph.D., Lancashire Teaching Hospitals, United Kingdom

Nearly one in five civil monetary penalty settlements related to Emergency Medical Treatment and Labor Act (EMTALA) violations involved psychiatric emergencies. That is the conclusion of a study to be published in the May 2019 issue of *Academic Emergency Medicine* (AEM), a journal of the Society for Academic Emergency Medicine (SAEM). Settlements related to psychiatric emergencies were costlier and more often associated with failure to stabilize than for nonpsychiatric emergencies.

The lead author of the study is Sophie Terp, MD, MPH, assistant professor of clinical emergency Medicine, Keck School of Medicine, University of Southern California, Los Angeles, CA.

The research suggests that administrators should evaluate and strengthen policies and procedures related to psychiatric screening examinations, stabilizing care of psychiatric patients boarding in emergency departments, and transfer policies.

According to Terp, et al., recent large, notable settlements related to EMTALA violations suggest that there is considerable room to improve access to and quality of care for patients with psychiatric emergencies.

Commenting on the study is Matt C. Innes, in-house counsel for Integrative Emergency Services (IES) Healthcare:

"This is an important read for [emergency](#) department physician group leaders and hospital leaders. This article offers critical insight on an emerging issue in the [emergency department](#) and prompts discussion on how to best prepare for treatment of psychiatric patients to comply with EMTALA obligations."

More information: Sophie Terp et al, Civil Monetary Penalties Resulting From Violations of the Emergency Medical Treatment and

Labor Act (EMTALA) Involving Psychiatric Emergencies, 2002 to 2018, *Academic Emergency Medicine* (2019). [DOI: 10.1111/acem.13710](https://doi.org/10.1111/acem.13710)

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