



HUDSON VALLEY REGIONAL EMERGENCY  
MEDICAL SERVICES COUNCIL, INC.  
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## Hudson Valley REMAC Advisory

2018-05

**Re-Issue Date- 08/23/2022**

Psychiatric Patient Destination

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Pursuant to discussion at the Hudson Valley Regional Emergency Medical Advisory Council's March meeting this letter is being sent to all receiving hospitals and EMS Agencies that participate in the 911 system in the Hudson Valley. Currently, and as has been the case for the last several years, there is a shortage of inpatient psychiatric beds. Most facilities that have an inpatient psychiatric unit tend to operate at their maximum operating capacity. As a basic premise of Emergency Department care, all facilities that participate in the 911 system need to be capable of the immediate stabilization of an emotionally disturbed patient.

While it would be preferable that all psychiatric patients be transferred as a specialty referral, this letter serves as a reminder that psychiatric patients can and should be transported by EMS to the closest facility capable of immediately stabilizing the patient. At the time of their evaluation those patients in need of admission for psychiatric management can be transferred to an inpatient unit from the ED when a bed is available.

While article 30 of the New York State Public Health Law defines ambulance service, it does not require ambulances to transport patients to specific hospital destinations except as defined in Part 800.

The NYS DOH BEMS Policy states:

Based on the mechanism of injury, assessment findings, treatment, state and local protocol, a patient, in need of emergency medical care must be taken to the nearest appropriate health care facility capable of treating the illness, disability or injury of the patient.

Prior to admission of psychiatric conditions patients must be medically treated and cleared.

Under no circumstances should a hospital be refusing an inbound EMS unit because they do not have inpatient psychiatry. Since most inpatient units operate at full capacity, doing so unfairly overwhelms the Emergency Departments of facilities that have these services and places undue burden on EMS agencies to transport psychiatric patients an extended distance.

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