
Psychiatric Records

Healthcare facilities have the legal responsibility to correctly assess the risk of harm to self and others and risk of elopement presented by every psychiatric patient under their care. Such facilities must take appropriate measures to prevent elopement and consequent harm to others.

The Court of Appeal of Louisiana ruled recently that to make a correct assessment of a particular psychiatric patient's risk of harm to self and others and risk of elopement, a healthcare facility which accepts the patient for psychiatric care must obtain and review the treatment records of all of the patient's prior psychiatric care episodes which are known or become known to the staff of the facility.

Once a history of harm to self or others and/or elopement is known, the legal standard of care calls for adequate measures to be taken to prevent harm to self and others and patient elopement.

In this case, however, the patient's records from prior involuntary commitments to a state mental hospital were not obtained, despite the patient telling the staff upon his admission to the psychiatric unit of an acute-care medical facility that he had in the past been committed involuntarily to a specific state mental hospital. The court noted with alarm that no effort was made by the acute-care hospital even to phone the state mental hospital to discuss the patient.

The patient was unadvisedly given a grounds pass to come and go unaccompanied. He eloped, and raped and murdered a young woman in front of her children. The victim's family got a substantial jury verdict against the hospital.

The court also found fault for letting the patient have a medication for which he had a history of abuse, which would have been revealed by his prior records. **Davis vs. Puryear**, 673 So. 2d 1298 (La. App., 1996).

Healthcare facilities which provide psychiatric care must seek out patients' records of prior psychiatric care, and review the records to assess each patient's risk of doing harm to self and others and of eloping from the treatment setting.

An acute-care medical facility in this case accepted a chronic paranoid schizophrenic patient for its psychiatric unit. He agreed to voluntary admission in lieu of involuntary commitment.

He told the staff member admitting him that he had been held involuntary at a state mental hospital. However, no effort was made to obtain the records.

The patient's psychiatric treatment records would have revealed repeated involuntary mental health commitments for danger to self and others, numerous elopement attempts, and a history of violent attacks on family members, arson fires, drug abuse, sexual assaults and domestic violence.

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COURT OF APPEAL OF LOUISIANA, 1996.

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