

**St. Mary's Warrick Serenity Unit  
ADMISSION CRITERIA CHECKLIST  
FOR INPATIENT TREATMENT**

ADDRESSOGRAPH

06-01-02B

- \_\_\_\_\_ 1. Recent (within 72 hours) attempted suicide.
- \_\_\_\_\_ 2. Documentation of suicide ideation requiring suicide precautions.
- \_\_\_\_\_ 3. Assaultive behavior as a result of a psychiatric disorder
- \_\_\_\_\_ 4. Documentation of self-mutilative behavior as a result of a psychiatric disorder.
- \_\_\_\_\_ 5. Major depression (must have five or more of the following symptoms in the same 2 week period and at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure)
  - \_\_\_\_\_ a. Depressed mood most of the day, nearly every day
  - \_\_\_\_\_ b. Markedly diminished interest or pleasure in all, or almost all activities most of the day, nearly every day
  - \_\_\_\_\_ c. Significant weight loss when not dieting or weight gain, or decrease/increase in appetite nearly every day
  - \_\_\_\_\_ d. Insomnia or hypersomnia nearly every day
  - \_\_\_\_\_ e. Psychomotor agitation or retardation nearly every day
  - \_\_\_\_\_ f. Fatigue or loss of energy nearly every day
  - \_\_\_\_\_ g. Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day
  - \_\_\_\_\_ h. Diminished ability to think or concentrate, or indecisiveness, nearly every day
  - \_\_\_\_\_ i. Recurrent thoughts of death, recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide
- \_\_\_\_\_ 6. Acute onset or acute exacerbation of hallucinations, delusions, illusions, the magnitude and severity of which threatens the patient's well-being.
- \_\_\_\_\_ 7. Inability of the patient to comply with prescribed psychiatric health regimens (i.e., taking prescribed psychotropic medications, going to outpatient appointments to receive prescriptions and/or IM medications, etc.) in a patient who has a chronic history of decompensation without psychotropic medications, with documentation of reasonable expectation of improved compliance with inpatient hospitalization within a short period of time (less than or equal to 14 days).
- \_\_\_\_\_ 8. Potential hazard to the health or life of a patient who, due to concurrent psychiatric illness, is unable to comply with prescribed medical health regimens (e.g., insulin dependent diabetes, etc.).
- \_\_\_\_\_ 9. Acute onset of inability to cope with stressful situation.
- \_\_\_\_\_ 10. Acute onset of inability to care for self or attend to activities of daily living. AND documentation of reasonable expectation that resumption of self-responsibility will occur following appropriate treatment.
- \_\_\_\_\_ 11. Manic state admitted for injectable neuroleptics or rapid modification of psychotropic drugs or initiation of Lithium treatment.
- \_\_\_\_\_ 12. Evidence of symptoms and/or behavior or verbalization reflecting significant risk or potential danger (or actual demonstrated danger) to self, others or property. (**\*\*Must be documented a minimum of every seven days.**)
- \_\_\_\_\_ 13. Other \_\_\_\_\_

**EXCLUSIONARY CRITERIA:** Indicators that admission to an inpatient mental health program may be inappropriate.

- \_\_\_\_\_ 1. Medical conditions that preclude active participation in treatment.
- \_\_\_\_\_ 2. Uncomplicated brain dysfunction/dementia of Alzheimer's type with no psychiatric symptomatology.
- \_\_\_\_\_ 3. Pending criminal charges or disposition and/or institutionalization in lieu of detention or correctional process.
- \_\_\_\_\_ 4. Repeated admissions without evidence of improvement or change.
- \_\_\_\_\_ 5. Other \_\_\_\_\_

**Screen completed by Qualified Mental Health Professional**

**Signature**

**Title**

**Date**

**Time**