

Eating Disorder Guideline for Emergency Department Patients

General Principles for Treatment:

1. Children with eating disorders may present with primary psychiatric or primary medical chief complaints.
2. Some patients will be admitted to the Adolescent Medicine Team for acute medical stabilization. For a patient going to inpatient Adolescent Medicine, psychiatric evaluation not required while in the Emergency Department.
3. Some patients will require a psychiatric admission, and therefore need medical clearance prior to admission. Adolescent Medicine consultation in ED not required prior to psychiatric admission if “medically cleared” by criteria below. If medical questions, do consult adolescent medicine team.
4. Please offer food/beverage to the patient while awaiting ED work-up and disposition. If mealtime, order them a meal in the EMR.
5. **No IVF bolus while in ED.** At risk for cardiac compromise (weight loss/malnutrition) and IVF bolus can lead to cardiac overload/failure. If dehydration, give PO fluids or IVF’s at a slow rate.

Psychiatric Evaluation of patient with eating disorder:

1. Physical exam
2. Weight and height (do not tell patient their weight)
3. Place on CRM
4. Orthostatic BP and HR (patient supine for 5 minutes, take HR/BP; patient standing for 1 min, take HR/BP; patient standing for 3 minutes, take HR/BP)
5. Istat
6. EKG
7. Urine drug screen age > 12 years
8. Pregnancy testing females age >12 years
9. Order a meal in EMR if anticipate ED stay during a meal time.

If any screening test meets medical admission criteria listed below, then child is not medically clear and Adolescent Medicine consultation required.

Medical Evaluation of patient with eating disorder:

1. Above labs/tests for Psych. Eval. plus labs listed below for medical admit.
2. Consult Adolescent Medicine
3. Order a meal if anticipate patient will be in the ED during a meal time.

LABS

CBC with diff	LFT's
BMP	Prealbumin
Albumin	Urinalysis
Ca/Mg/Phos	Vitamin D 25 Hydroxy Total D
ESR	Prolactin (males and females)
TSH Reflex	Pregnancy (females)
Tissue Transglutaminase	Estradiol (females)
IgA	Testosterone, Total (males only)

Medical Admission Indications:

1. Critically underweight, which could include >10% of total body weight lost in <3 months, or weight loss over time with current body weight at a BMI that is <16 kg/m²
2. Dehydration
3. Electrolyte Disturbance (low K, Na, Phosphate)
4. Prolonged QTc or cardiac arrhythmia
5. Abnormal VS's:
 - a. HR <50 awake, < 45 asleep
 - b. BP < 90/45
 - c. Orthostasis: HR increase >20, BP decrease > 10
6. Arrested growth and development
7. Uncontrolled Binging/Purging
8. Malnutrition complications: Syncope, seizure, pancreatitis, cardiac failure

Psychiatric and/or Medical Admission Indications*:

1. Failure of outpatient treatment
2. Acute food refusal (typically refusing \geq 2 meals/snacks in 24-hour period)
3. Co-morbidity such as SI, severe depression, diabetes, severe family dysfunction

* If a child meets any of these last 3 criteria, and not any other above criteria for medical or psychiatric admission, then a discussion with adolescent medicine is required to determine the best primary admission service: med or psych.

Family Handout for Medical Admission on Next Page

Hasbro Children's Hospital
What to expect during an Eating Disorder hospitalization for patients and parents
(for patients being admitted medically, NOT to Seyla 6 Unit)

The medical recommendation at this time is that you be admitted to the pediatric inpatient unit at Hasbro Children's Hospital for the medical management of disordered eating. The goals of your inpatient hospitalization are as follows:

- Slowly and steadily correct your malnourished state in a controlled environment
- Correct any disturbances in your body electrolytes e.g. potassium, phosphorous, magnesium
- Prevent unhealthy nutritional behaviors
- Enhance your knowledge of your personal nutritional needs
- Empower you to learn healthy eating behaviors
- Provide resources to help you address the complex emotional and family issues that are involved in your nutritional behavior
- Support your continued physical and emotional development

Your care will be managed using a multidisciplinary team approach. The team consists of: you, your family, Nurses, Physicians (Adolescent Medicine Attendings, Psychiatrist, Pediatric Interns/Residents), Nurse Practitioner, Registered Dietitians, Diet Technicians, Social Work, Child Life Specialist and Hospital Teacher. You will receive written information about the role that each of these people on the treatment team will play once you reach the inpatient unit.

While you are in the hospital you will undergo daily weights, labs, and regular monitoring of your vital signs and physical exam. You will be asked to stay in bed for at least the first day of your hospitalization, in order to allow your body the chance to start recovering. After the first day, the medical team will assess whether you are able to walk or use the wheelchair around the inpatient unit.

You will be placed on a meal plan that is specific to your unique nutritional needs, and will eat in a supervised setting with other patients. During the course of the hospital stay, the dietitians will monitor you closely and adjust your meal plan as needed. If you are unable to eat the solid food presented, you will be asked to drink a liquid nutritional supplement (Ensure Plus). If you are unable to drink this solid food replacement by mouth, a tube will be placed through your nose and into your stomach and the supplement will be given through the tube.

Hospital Procedure Rules:

- Access to a laptop for school work with parent supervision is typically allowed. Computer use for activities other than school work is not allowed during the admission
- No duffel, backpacks, suitcases, bags of any kind allowed in the room. Once patient is unpacked all bags must be sent home or locked in a separate cabinet by the nurse
- Cell phones are not allowed; access to land line phone use is determined by the treatment team
- No use of "fit bits" or similar devices while in the hospital
- Parents are welcome 24 hours/day; siblings are allowed to visit during hospital visiting hours
- Bathrooms will be locked when not in use, and bathroom use is supervised for patient safety

Upon admission to the inpatient unit, your nurse will review the inpatient treatment plan in more detail. If you have questions about any of the information above prior to coming to the inpatient unit, please do not hesitate to ask the Emergency Department providers.

We will look forward to working with you during your hospitalization!

-The Hasbro Eating Disorder Program Inpatient Treatment Team

