

Master's Degree

Psychiatric Emergencies



Master's Degree Psychiatric Emergencies

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

Website: www.techtute.com/us/medicine/master-degree/master-psychiatric-emergencies

Index

01

Introduction

p. 4

02

Objectives

p. 8

03

Skills

p. 14

04

Course Management

p. 18

05

Structure and Content

p. 24

06

Methodology

p. 32

07

Certificate

p. 40

01

Introduction

The pressure of care in the Psychiatric Emergencies field has increased exponentially after the years of the pandemic, which has generated greater social awareness and concern about mental health. This has created a complex context for specialists in the area, who must update their knowledge to deal with increasingly delicate psychiatric emergencies. TECH has brought together a large team of specialists from different areas to develop a program that responds to this need. Experts in mental health, psychogeriatrics, child and adolescent psychiatry and other fields of interest have developed an extensive syllabus that includes the main developments in Psychiatric Emergencies. All this, in a convenient and completely online format, free of on-site classes and pre-set schedules, to provide the maximum possible flexibility.





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You will access a library of advanced content in the area of Psychiatric Emergencies, addressing developments in suicidal behavior, anxiety disorders and special pharmacopoeia”

From the most pressing anxiety disorders, mainly caused by COVID-19, to emergencies in affective or psychotic disorders, the pressure on Psychiatry specialists is greater than ever. This new paradigm, where mental illness and mental health become a major concern, opens a special framework of action for all specialists in this area.

This means that, now more than ever, there is an urgent need for updating in the most relevant psychiatric areas. Advances in the treatment of generalized anxiety disorder or emergencies, caused by the ingestion of different types of drug, encourage specialists to access first level scientific postulates, with a categorical approach that can be incorporated into their daily practice.

This Master's Degree is an extensive tour of the most relevant Psychiatric Emergencies, focusing on the developments made in recent years. Through an eminently practical perspective, the teaching team has compiled both the theory and the most rigorous clinical practice in a high quality format, with great multimedia support.

Specialists will be able to access video summaries, complementary readings, real clinical cases and self-knowledge exercises for each topic covered. All this with the advantage of having a virtual classroom available 24 hours a day, so students can study at their own pace.

This **Master's Degree in Psychiatric Emergencies** contains the most complete and up-to-date scientific program on the market. The most important features include:

- ♦ The development of practical cases presented by experts in Psychiatric Emergencies
- ♦ The graphic, schematic, and practical contents with which they are created, provide scientific and practical information on the disciplines that are essential for professional practice
- ♦ Practical exercises where self-assessment can be used to improve learning
- ♦ Its special emphasis on innovative methodologies
- ♦ Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- ♦ Content that is accessible from any fixed or portable device with an Internet connection



You will have the freedom to decide where, when and how to take on the full course load, with no on-site classes or pre-set schedules to restrict you"

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Get up to date with the most important advances in psychopathological examination in emergencies, neurological diseases, differential diagnosis of anxiety and emergencies derived from new technologies”

The program's teaching staff includes professionals from the sector who contribute their work experience to this educational program, as well as renowned specialists from leading societies and prestigious universities.

Its multimedia content, developed with the latest educational technology, will allow professionals to learn in a contextual and situated learning environment, i.e., a simulated environment that will provide immersive education programmed to prepare in real situations.

The design of this program focuses on Problem-Based Learning, by means of which professionals must try to solve the different professional practice situations that arise during the academic year. This will be done with the help of an innovative system of interactive videos made by renowned experts.

You will be able to download all the available content of the virtual classroom from the comfort of your tablet, smartphone or computer of choice.

Learn more about recent developments in the use of psychotropic drugs in psychiatric emergencies, psychomotor agitation and acute confusional state.



02 Objectives

Given the current and growing relevance of the work of psychiatrists in increasingly complex pathologies, the objective of this program is to provide specialists with the tools, techniques and theories of greater relevance in the area of Psychiatric Emergencies. TECH's careful teaching methodology and the high professional level of the teachers play a key role in guaranteeing specialists access to high-quality material that meets their requirements in order to fulfill their objective of updating their knowledge in a comprehensive manner.



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Incorporate into your daily practice the most rigorous techniques and clinical intervention in Psychiatric Emergencies”



General Objectives

- ♦ Delve into emergency psychiatric care in an integrated manner within the health care setting
- ♦ Delve into the psychiatric interview in emergency medicine and the elaboration of medical histories in this area of care
- ♦ Correctly establish a diagnostic approach in the emergency department, organism screening and psychiatric pathology approach
- ♦ Understand and master the different pathologies that are treated in the emergency department, differential diagnosis and treatment
- ♦ Handle different emergency situations in psychiatry: suicidal patients, affective disorders, emergencies in anxious and psychotic patients and in special populations (the elderly and child and adolescent)





Specific Objectives

Module 1. Psychiatry in Emergencies

- ♦ Delve into the different crises that occur daily in the psychiatric emergency room
- ♦ Delve into the management of psychiatric interviews
- ♦ Learn about various pattern of relationship models for doctor-patient relations
- ♦ Delve into first-class interviewing skills
- ♦ Apply active listening criteria and facilitate narrative activity
- ♦ Learn how to apply interviewing skills to suicidal patients
- ♦ Delve into the interviewing guidelines appropriate for dealing with agitated patients
- ♦ Analyze the different scales that are useful in psychiatric interviews
- ♦ Study the complementary tests: what and when are they necessary?

Module 2. Psychiatric Symptoms in Organic and Neurological Pathology

- ♦ Delve into the importance of taking a good medical history to screen for possible organic causes in patients who come to the psychiatric emergency department
- ♦ Highlight the value of an adequate pharmacological anamnesis
- ♦ Delve into the various organic aspects of major interest in relation to people with mental disorders
- ♦ Specialize in choosing potential complementary tests to request in psychiatric cases

Module 3. Acute Confusional Syndrome

- ♦ Identify at-risk subjects and maintain close surveillance
- ♦ Delve into non-pharmacological primary prevention measures
- ♦ Delve into the therapeutic approach after the onset of the condition
- ♦ Delve into differential diagnosis

Module 4. Anxiety Disorder Emergencies

- ♦ Differentiate between normal anxiety and pathological anxiety
- ♦ Delve into different nosological entities and approach in emergency situations
- ♦ Learn about psychological approaches to used in psychiatric emergencies
- ♦ Update neurobiological and psychological knowledge of anxiety processes
- ♦ Update on pharmacological and psychological interventions effective in different anxiety disorders
- ♦ Update on pharmacological and psychological interventions in special populations with anxiety

Module 5. Affective Disorder Emergencies

- ♦ Identify the main affective disorders
- ♦ Delve into key elements in anamnesis for this type of patients
- ♦ Identify causes of secondary depression
- ♦ Enable decision-making according to origin, severity, risks and social support
- ♦ Delve into different emergency treatment options, as well as treating special populations

Module 6. Assessment and Action in Case of Suicidal Behavior

- ♦ Provide professionals involved in the emergency care of patients with suicidal behavior with recommendations on management, global assessment, including assessment of suicidal risk and action planning
- ♦ Indicate questionnaires or scales that can be used as support, such as the assessment of suicidal behavior
- ♦ Provide guidance in the choice to discharge or admit a patient with suicidal behavior
- ♦ Provide recommendations in the development of treatment plans for patients with suicidal behavior

Module 7. Psychotic Disorder Emergencies

- ♦ Approach the concept and assessment of psychotic patients in emergency medicine
- ♦ Delve into the basic conditions of care for psychotic patients in the emergency department
- ♦ Analyze interview techniques used on psychotic patients
- ♦ Synthesize the indications that may constitute an indication for hospitalization in a psychotic patient
- ♦ Analyze the differential diagnosis for acute psychosis
- ♦ Delve into treatment plans and approaches to possible side effects

Module 8. Psychomotor Agitation

- ♦ Understand the various underlying causes of agitation (somatic, psychiatric, pharmacological or psychoactive substances)
- ♦ Identify risk factors for aggressive behaviors in agitation
- ♦ Delve into different indications for the use of verbal, pharmacological and/or mechanical restraint
- ♦ Delve into the main characteristics of the drugs used in the treatment of psychomotor agitation
- ♦ Know the legal aspects before the use of a restrictive measure in cases of agitation, as well as indication and adequate use

Module 9. Substance Use Emergencies

- ♦ Delve into the approach to states of intoxication/abstinence, reasons for care and urgent treatment plans in patients with substance dependence
- ♦ Emphasize the importance of taking a complete medical history when the patient's situation allows it
- ♦ Delve into the symptoms derived from drug use for which patients may go to the emergency department
- ♦ Identify risk factors in patients with mental disorders and concomitant substance use
- ♦ Delve into the elaboration of the treatment plan to be followed (crisis intervention, referral to a specific device, criteria for urgent hospital admission)

Module 10. Special Pharmacopoeia in Emergencies and Practical Psychotropic Drug Management

- ♦ Gain in-depth knowledge of the different psychotropic drugs used in psychiatric emergencies
- ♦ Gain in-depth knowledge of interactions, both pharmacokinetic and pharmacodynamic
- ♦ Delve into the fundamental recommendations for therapeutic options
- ♦ Identify the risk in using psychotropic drugs in the elderly, considering pluripathology and polypharmacy

“You will advance and update your knowledge throughout the program, progressively meeting all the objectives”

03 Skills

The entire teaching team of this Master's Degree has placed special emphasis, throughout the 10 modules that make up the program, on the competencies that specialists in the field of Psychiatric Emergencies must perfect and maintain up to date. In this way, the syllabus not only focuses on offering the most up-to-date theory, but also the necessary practical vision to immediately incorporate the current work methodology and therefore see continuous progress throughout the program.



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Add to your professional curriculum the most up-to-date knowledge and skills in the area of Psychiatric Emergencies"



General Skills

- ◆ Gain knowledge about the phases in emergency care
- ◆ Identify the clinical characteristics of patients attending the emergency department
- ◆ Get to know different pattern of relationship models between physicians and patients
- ◆ Gain knowledge about the mistakes that are most commonly made in clinical psychiatric interviews

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TECH's teaching and technical staff is committed to you receiving the best possible academic experience, as they will be available to solve any doubts or suggestion”





Specific Skills

- ♦ Analyze the different complementary tests required to guide differential diagnosis, diagnosis and treatment
- ♦ Take an adequate medical history to detect possible organic causes in psychiatry
- ♦ Identify the signs and symptoms that enable establishing an accurate diagnosis of the disease
- ♦ Apply the knowledge acquired to correctly deciding on one of various treatment options
- ♦ Get to know the care circuit of psychotic patients in the emergency department
- ♦ Identify and know the different approaches to patients with affective disorders in the emergency department
- ♦ Assess the emergencies derived from the consumption of toxic substances
- ♦ Know the states of intoxication/abstinence, reasons for care and emergency treatment plan in pain pathology
- ♦ Get to know and manage emergencies in special situations: bereavement, elderly and child and adolescent populations, pregnant or breastfeeding women
- ♦ Guide the therapeutic decision of admission or discharge in suicidal patients
- ♦ Prepare treatment plans for patients with suicidal behavior
- ♦ Differentiate between adaptive and pathological reactions, both in the grieving process and in order to establish an adaptive process

04 Course Management

The group of psychiatric physicians brought together by TECH for this program completes a broad teaching staff, with multidisciplinary skills in the Psychiatric Emergencies. Specialists will therefore have access to a syllabus that covers all topics from a first-hand clinical perspective, written by psychiatrists who know the daily and current reality of each of their areas.





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Tutoring will be completely personalized, and you will be able to communicate directly with the professors to address any topic that arouses your interest”

International Guest Director

Member of the French National Commission of Psychiatry, Dr. Raphaël Gourevitch has become a leading authority in the field of **Mental Health**. He has developed most of his work at the Sainte-Anne Hospital in Paris, where he has contributed significantly to optimize the recovery of patients with emotional pathologies such as **Acute Depression**, **Post Traumatic Stress Disorder** or **Severe Anxiety**. All this through the creation of highly personalized treatments and disruptive pharmacological therapeutic interventions.

On the other hand, he balances this clinical work with his facet as a **researcher**. In fact, he has a wide scientific production on subjects such as Emergency Services versus **Psychiatric Emergencies** at home, the emotional impact of the pandemic caused by **COVID-19** or **common mental disorders** in society such as **Insomnia**. In this same line, he has made great contributions to the **National Suicide Observatory** of the French Government. In this regard, she has been in charge of leading a group of health professionals who offer urgent **home care** to people who are at risk of ending their lives and who have even carried out **self-harming attempts**. Thanks to this, he has been able to help multiple patients acquire coping skills to manage intrusive thoughts effectively.

It should be noted that, in his commitment to excellence, he actively participates in international **congresses and symposiums**. As such, he shares his solid knowledge in areas such as the most cutting-edge drugs to treat **Schizophrenia**, innovative procedures such as **Therapeutic Isolation** and even techniques to assess the likelihood of users to suffer violence in their respective homes. Consequently, he has succeeded in raising awareness in the healthcare community of the importance of taking measures to help individuals achieve optimal psychological well-being.



Dr. Gourevitch, Raphaël

- Head of the Psychiatry and Neurosciences Unit at the Sainte-Anne Hospital in Paris
- Head of the National Suicide Observatory of the French Government
- Doctorate in Medicine
- Member: Official College of Physicians in France, National Commission of Psychiatry in France

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Thanks to TECH, you will be able to learn with the best professionals in the world”

Management



Dr. Sánchez-Cabezudo Muñoz, Ángeles

- Specialist in the Short Stay Unit of the Toledo Hospital Complex
- Psychiatrist at the Mental Health Outpatient Clinic of the Toledo Hospital Complex
- Specialist in the Short Stay Unit of the Virgen del Prado Hospital
- Psychiatrist at the 12 de Octubre University Hospital
- Psychiatrist at the Mental Health Center Usera
- Researcher and teaching medical specialist, Brief Hospitalization Unit, Virgen del Prado Hospital
- Degree in Medicine and Surgery from the Complutense University of Madrid
- Specialist in Psychiatry, La Paz University Hospital
- Diploma in Clinical Management in Psychiatry, Pompeu Fabra University
- He is a member of the working group on the prevention of suicidal behavior in Castilla la Mancha

Professors

Dr. Cruz Forcade, José Fernando

- ♦ Psychiatry Specialist at the Toledo Hospital
- ♦ Physician at the Psychiatric Emergency Department of the Alarcón Foundation University Hospital
- ♦ Specialist via MIR at the Neuropsychiatric El Sauce Hospital Mendoza, Argentina
- ♦ Master's Degree in Behavior Therapy by the National University of Distance Education
- ♦ Degree in Medicine from the National University of Cuyo. Mendoza, Argentina

Dr. Carpio García, Laura

- ♦ Specialist in Psychiatry and Mental Health, Toledo Hospital Complex
- ♦ Specialist in Geriatrics, Hospital of Guadarrama, Virgen de la Poveda Hospital and San Carlos Clinical Hospital
- ♦ Degree in Medicine, University of Salamanca
- ♦ Specialist in Geriatrics, San Carlos Clinical Hospital
- ♦ Specialist in Psychiatry and Mental Health, Misericordia Provincial Hospital, Toledo Hospital Complex



Dr. Benito Ruiz, Adolfo

- ◆ Medical specialist in Psychiatry at the Toledo Hospital Complex
- ◆ Area Specialist Physician of Psychiatry at the Toledo Hospital Complex
- ◆ Area Specialist Physician of Psychiatry at the Mental Health Center Francisco Díaz
- ◆ Principal investigator in several studies related to Psychiatry
- ◆ Author and co-author of dozens of scientific articles related to his specialty
- ◆ Author and co-author of numerous book chapters
- ◆ Professor in Mental Health courses and university degree studies
- ◆ Doctor of Medicine from the University of Alcalá
- ◆ Master's Degree in Psychotherapy, Integrated Perspective from the University of Alcalá de Henares
- ◆ Research Award at the Biomedical Research Foundation of the Príncipe de Asturias University Hospital

Dr. Sánchez-Revuelta, Marina

- ◆ Specialist in Psychiatry, Child and Adolescent Mental Health Unit, Addictive Behavior Unit and Brief Hospitalization Unit, Psychiatry Service, Toledo Hospital Complex
- ◆ Degree in Medicine from the Complutense University of Madrid
- ◆ Master's Degree in Medicine, Complutense University of Madrid

Dr. Alvites Ahumada, María Pilar

- ♦ Psychiatry Coordinator, Adult Mental Health Unit, Toledo Hospital Complex
- ♦ Area Specialist in Psychiatry Toledo University Hospital
- ♦ Psychiatry Specialist, Regional Working Group on Suicide, SESCOAM
- ♦ Psychiatry Specialist, Child and Adolescent Area, La Mancha Hospital Center Complex and Nuestra Señora del Prado General Hospital
- ♦ Hospitalization Physician. San Pablo Hospital Complex
- ♦ Degree in Medicine and Surgery, National University of Trujillo
- ♦ Psychiatry Specialist in Psychiatry. Misericordia Provincial Hospital of Toledo
- ♦ PGY1 Psychiatry Resident. Icahn School of Medicine at Mount Sinai
- ♦ Specialist in Child and Adolescent Psychiatry. SESCOAM
- ♦ Master's Degree in Suicidal Behavior, Pablo Olavide University
- ♦ Master's Degree in Clinical Psychology and Psychotherapy in Childhood and Adolescence. University Institute of Dynamic Psychology Psychospace, INUPSI
- ♦ Master's Degree in Psychiatric Treatment Update in minor patients. CEU Cardenal Herrera University
- ♦ Child and Adolescent Psychiatry Expert, University of Barcelona





Dr. García, Elías

- ◆ Psychiatrist expert in Child and Adolescent Pathology
- ◆ Psychiatrist, Transition/First Consumption Program, Toledo Hospital Complex
- ◆ Psychiatrist, Tetuan and Ciudad Lineal Mental Health Unit, Madrid
- ◆ Psychiatrist at Clínica San Miguel, Madrid
- ◆ Psychiatrist, General Hospital of Ciudad Real
- ◆ Graduate in Medicine and Surgery from the Navarra University
- ◆ Specialist in Psychiatry, La Paz University Hospital
- ◆ Master's Degree in Psychotherapy, Integrated Perspectives, University of Alcalá
- ◆ Postgraduate Studies in Child and Adolescent Psychiatry, University of Barcelona
- ◆ Postgraduate Studies in Treatment of Child and Adolescent Psychiatric Pathology, Cardenal Herrera Oria University

Dr. Santolaya López, Laura

- ◆ Specialist in Psychiatry, Toledo Hospital Complex
- ◆ Degree in Medicine from the European University of Madrid
- ◆ Specialization in Clinical Interviewing Skills and Doctor-Patient Relationship by the Toledo Hospital Complex
- ◆ Specialty in Updating and Training of Basic Therapeutic Skills by the Ministry of Health
- ◆ Book chapter "Clinical cases on the use of duxoletin. Duxoletin in anxiety and depression"

05

Structure and Content

The Relearning pedagogical methodology employed by TECH ensures that all the most important key concepts and content in Psychiatric Emergencies are reiterated progressively throughout the program. This results in a substantial saving of the study hours required to complete the program, making the whole process more effective and straightforward. In addition, specialists will have all kinds of high-quality multimedia resources created by the teachers themselves, serving to study and research the most relevant areas in this field in depth.



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By downloading all the content on the program, you will have a very useful reference guide, which you will be able to use even after completing the program”

Module 1. Psychiatry in Emergencies

- 1.1. Demand Analysis
 - 1.1.1. Crisis Intervention
 - 1.1.2. Types of Crisis
- 1.2. Particularities of Psychiatric Medical Histories in Emergency Medicine
- 1.3. Medical Anamnesis and Organicity
 - 1.3.1. Medical Record in the Emergency Department
 - 1.3.2. Specific Equipment in Psychiatric Emergency Departments
- 1.4. Psychiatric Anamnesis
 - 1.4.1. General Principles of Psychiatric Interviewing
 - 1.4.2. Psychiatric Examinations
- 1.5. Interviewing Skills
 - 1.5.1. Styles in Aid Relationships
 - 1.5.2. Interviewing Skills
 - 1.5.3. Common Mistakes in Interviews
- 1.6. Phases of the Interview
 - 1.6.1. Initial Phase of the Interview
 - 1.6.2. Intermediate Phase of the Interview
 - 1.6.3. Termination Phase of the Interview
- 1.7. Interviews in Special Situations
- 1.8. Documenting Medical Record in Psychiatric Emergencies
- 1.9. Psychopathological Examinations in the Emergency Department
- 1.10. Diagnostic Scales and Complementary Tests in Psychiatry





Module 2. Psychiatric Symptoms in Organic and Neurological Pathology

- 2.1. Cardiovascular Pathologies
 - 2.1.1. Arrhythmias
 - 2.1.2. Ischemic Heart Disease
 - 2.1.3. Mitral Valve Prolapse
 - 2.1.4. Heart Failure
- 2.2. Oncologic Pathologies
- 2.3. Endocrine Pathologies
 - 2.3.1. Toxic and Metabolic Causes of Psychiatric Symptoms
 - 2.3.2. Electrolyte, Calcium and Magnesium Disorders
 - 2.3.3. Disorders of Acid-Base Balance
 - 2.3.4. Acute Intermittent Porphyria
- 2.4. Rheumatologic Pathologies
 - 2.4.1. Collagen Vascular Diseases
 - 2.4.2. Mixed Connective Tissue Diseases
 - 2.4.3. Vasculitis
- 2.5. Renal Pathologies
- 2.6. Infectious Pathologies
- 2.7. Respiratory Diseases
- 2.8. Liver Diseases
 - 2.8.1. Hepatic Encephalopathy
- 2.9. Neurological Disorders
 - 2.9.1. Neurological Disorders that May Cause Urgent Psychiatric Symptoms
 - 2.9.1.1. Neurodegenerative Diseases
 - 2.9.1.2. Secondary Dementias
 - 2.9.1.3. Space Occupying Lesions
 - 2.9.1.4. Stroke
 - 2.9.1.5. CNS Infections
 - 2.9.1.6. Autoimmune Processes
 - 2.9.1.7. Inborn Errors of Metabolism
- 2.10. Approach to Urgent Psychiatric Symptoms and Potential Neurological Causes

Module 3. Acute Confusional Syndrome

- 3.1. Overview
- 3.2. Etiology and Risk Factors
 - 3.2.1. Disorders Frequently Associated with Confusional State
 - 3.2.2. Threatening Causes of Confusional State
- 3.3. Neuropathogenesis
- 3.4. Diagnosis
 - 3.4.1. CIE-10 Diagnostic Guidelines for Confusional State
 - 3.4.2. Confusional State in DSM-5
- 3.5. Differential Diagnosis
 - 3.5.1. Confusional State vs. Cognitive Impairment
- 3.6. Types of Delirium
 - 3.6.1. Acute
 - 3.6.2. Persistent
 - 3.6.3. Hypoactive
 - 3.6.4. Hyperactive
 - 3.6.5. Mixed Level of Activity
- 3.7. Patient Examination
- 3.8. Prevention
 - 3.8.1. Environmental Measures in the Management of Confusional State
- 3.9. Prognosis
- 3.10. Treatment
 - 3.10.1. Specific Strategies for Confusional State
 - 3.10.2. Pharmacological Treatment of Confusional State

Module 4. Anxiety Disorder Emergencies

- 4.1. Normal Anxiety vs. Pathological Anxiety
- 4.2. Emergency Psychiatry Objectives in Anxious Patients
- 4.3. Clinical Manifestations of Anxiety
- 4.4. Differential Diagnosis of Anxiety
- 4.5. Anxiety Crises and Agoraphobia
 - 4.5.1. Prevalence
 - 4.5.2. Medical treatment
 - 4.5.3. Combined Treatments

- 4.6. Generalized Anxiety Disorder
 - 4.6.1. Contextualization
 - 4.6.2. Treatment
- 4.7. Post-Traumatic Stress Disorder.
 - 4.7.1. Contextualization
 - 4.7.2. Approach in Emergencies
- 4.8. Obsessive Pictures
- 4.9. Somatic Symptom Disorder
 - 4.9.1. Contextualization
 - 4.9.2. Clinical Manifestations according to DSM-5
 - 4.9.3. Differential Diagnosis and Diagnoses
 - 4.9.4. Treatment
- 4.10. Anxiety in Special Populations
 - 4.10.1. Anxiety in Elderly Patients
 - 4.10.2. Anxiety in Child and Adolescent Populations
 - 4.10.3. Anxiety during Pregnancy and Lactation

Module 5. Affective Disorder Emergencies

- 5.1. Preliminary Concepts: Major Affective Disorders
 - 5.1.1. Depression in the Emergency Department
 - 5.1.2. Bipolar Affective Disorder in the Emergency Department
 - 5.1.3. Schizoaffective Disorder
 - 5.1.4. Adaptive Disorders in Emergency Medicine
- 5.2. Identification and approach to Affective Patients in Emergency Medicine
 - 5.2.1. Key Elements in Anamnesis
 - 5.2.2. Causes of Secondary Depression
- 5.3. Psychopathological Examination of the Major Syndromes Effective in the Emergency Department
 - 5.3.1. Psychopathology of Depression
 - 5.3.2. Psychopathology of Mania
 - 5.3.3. Complementary Examinations
 - 5.3.4. Use of Imaging Tests

- 5.4. Decision-Making in Cases of Affective Patients
- 5.5. Emergency Treatment for Affective Patients
 - 5.5.1. Pharmacological Treatment Indications
 - 5.5.2. Psychotherapeutic Guidelines
- 5.6. Affective Disorders in Elderly Patients
 - 5.6.1. Depression in the Elderly
 - 5.6.2. Mania in the Elderly
- 5.7. Affective Disorders in Pregnant / Breastfeeding Patients
- 5.8. Affective Disorders in Child and Adolescent Populations
- 5.9. Affective Disorders in Medical Pathology
- 5.10. Emergency Bereavement Care

Module 6. Assessment and Action in Case of Suicidal Behavior

- 6.1. Suicidal Behavior
- 6.2. Epidemiology
- 6.3. Risk Factors and Protection
- 6.4. Pathophysiology
 - 6.4.1. Neurobiology
 - 6.4.2. Psychological, Psychodynamic and Neuropsychological Perspective
- 6.5. Clinical Characteristics and Diagnosis
 - 6.5.1. Nomenclature Used in Suicidal Behavior
 - 6.5.2. Aspects to Be Assessed in Patients Displaying Suicidal Behavior
- 6.6. Suicide Risk Assessment
 - 6.6.1. Patient Profile
 - 6.6.2. Directed Anamnesis of Suicidal Risk
 - 6.6.3. Risk/Rescue Scales
- 6.7. Suicide Risk Treatment
- 6.8. Difficulties in Assessing Suicidal Risk
- 6.9. Therapeutic Attitude toward Suicidal Risk
 - 6.9.1. The Need for Admission
 - 6.9.2. Outpatient Treatment
 - 6.9.3. Therapeutic Plan
- 6.10. Some Spatial Considerations on Suicide

Module 7. Psychotic Disorder Emergencies

- 7.1. Epidemiology and Prognosis
- 7.2. Patient Phases in Psychosis
 - 7.2.1. First Episode Phase
 - 7.2.2. Patient Phases with History of Psychosis
- 7.3. Differential Diagnosis in Psychosis
 - 7.3.1. Differential Diagnosis in Non-Psychiatric Pathologies
 - 7.3.2. Differential Diagnosis in Psychiatric Pathologies
- 7.4. Psychotic Patient Clinical Interviews
 - 7.4.1. Interview Techniques and Approach Measures
- 7.5. Frequent Symptoms in Psychotic Disorders and Notions for Exploration
- 7.6. Special Problems:
 - 7.6.1. Children
 - 7.6.2. Elderly People
 - 7.6.3. Pregnant/Breastfeeding Women
- 7.7. Pharmacological Treatment in Emergency Medicine
- 7.8. Treatment Plans for Psychotic Patients in the Emergency Department
- 7.9. Dealing with Acute Complications Associated with Pharmacologic Treatments

Module 8. Psychomotor Agitation

- 8.1. Psychomotor Agitation
- 8.2. Psychomotor Agitation and Violent Behavior
- 8.3. Etiology of Psychomotor Agitation:
 - 8.3.1. Organic Disorders
 - 8.3.2. Psychiatric Behaviours.
 - 8.3.3. Use of Medications or Psychoactive Substances
 - 8.3.4. Mixed Etiology
- 8.4. Approach and Safety Measures in Interviewing Agitated Patients
- 8.5. Risk Factors for Aggression
 - 8.5.1. Demographics
 - 8.5.2. Life History
 - 8.5.3. Medical History
 - 8.5.4. Vital Organ Risk Predictors
 - 8.5.5. Imminent Risk Factors

- 8.6. Clinical Assessment of Aggressiveness
 - 8.6.1. Conducting Anamnesis
 - 8.6.2. Neuropsychiatric Examination
 - 8.6.3. Complementary Tests
- 8.7. Addressing Agitation by Verbal De-Escalation
- 8.8. Pharmacological Approach to Psychomotor Agitation
- 8.9. Restrictive Measures
 - 8.9.1. Description
 - 8.9.2. Controls to Be Performed during Therapeutic Restraint
 - 8.9.3. Restraint Removal
- 8.10. Psychomotor Agitation in Special Populations

Module 9. Substance Use Emergencies

- 9.1. Measures. Signs Suggestive of Substance Use
- 9.2. Opiate Use Emergencies
 - 9.2.1. Opiate Intoxication
 - 9.2.2. Opioid Withdrawal
- 9.3. Cocaine Use Emergencies
 - 9.3.1. Cocaine Intoxication
 - 9.3.2. Cocaine Withdrawal
- 9.4. Cannabis Use Emergencies
 - 9.4.1. Cannabis Poisoning
- 9.5. Benzodiazepines Use Emergencies
 - 9.5.1. Benzodiazepine Intoxication
 - 9.5.2. Benzodiazepine Withdrawal Syndrome
- 9.6. Alcohol Use Emergencies
 - 9.6.1. Acute, Typical or Simple Intoxication
 - 9.6.2. Pathological Inebriation
 - 9.6.3. Treatment of Acute Alcohol Poisoning
 - 9.6.4. Alcohol Withdrawal Syndrome
 - 9.6.5. Delirium Tremens
 - 9.6.6. Convulsive Seizures
 - 9.6.7. Alcohol Use Psychiatric Emergencies
- 9.7. Amphetamine and Hallucinogenic Emergencies
- 9.8. Dual Pathology in the Psychiatric Emergency Department
- 9.9. Pathological Gambling Emergencies
- 9.10. New Technology Emergencies





Module 10. Special Pharmacopoeia in Emergencies and Practical Psychotropic Drug Management

- 10.1. Use of Psychotropic Drugs in Emergency Medicine
- 10.2. Benzodiazepines in Emergency Medicine
 - 10.2.1. Metabolism
 - 10.2.2. Average Life
 - 10.2.3. Most Common Indications in Emergency Medicine
 - 10.2.4. Special Considerations in the Use of Benzodiazepines
- 10.3. Antipsychotics
 - 10.3.1. Special Indications in Emergency Medicine
 - 10.3.2. Special Considerations in the Use of Antipsychotics
 - 10.3.3. Most Frequent Interactions in the Use of Antipsychotics
- 10.4. Antidepressants
 - 10.4.1. Main Side Effects
 - 10.4.2. Interactions
- 10.5. Eutimizers
 - 10.5.1. Lithium Carbonate
 - 10.5.2. Valproic Acid
- 10.6. Use of Psychotropics in Elderly Patients
- 10.7. Use of Psychotropics in Child and Adolescent Populations
- 10.8. Use of Psychotropics in Pregnant / Breastfeeding Women
 - 10.8.1. Use of Psychotropics in Pregnant Women
 - 10.8.2. Use of Psychotropics in Infants
- 10.9. Psychotropics Emergencies
 - 10.9.1. Neuroleptic Malignant Syndrome
 - 10.9.2. Extrapyrimal Symptoms
- 10.10. Psychopharmaceuticals in Medical Diseases

06 Methodology

This academic program offers students a different way of learning. Our methodology uses a cyclical learning approach: **Relearning**.

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.



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Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"

At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

With TECH you will experience a way of learning that is shaking the foundations of traditional universities around the world.



According to Dr. Gervas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the physician's professional practice.

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Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method”

The effectiveness of the method is justified by four fundamental achievements:

1. Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate real situations and the application of knowledge.
2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

Professionals will learn through real cases and by resolving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.



At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

With this methodology, more than 250,000 physicians have been trained with unprecedented success in all clinical specialties regardless of surgical load. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

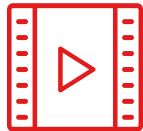
Relearning will allow you to learn with less effort and better performance, involving you more in your specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to success.

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by TECH's learning system is 8.01, according to the highest international standards.



This program offers the best educational material, prepared with professionals in mind:



Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is highly specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



Surgical Techniques and Procedures on Video

TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



Interactive Summaries

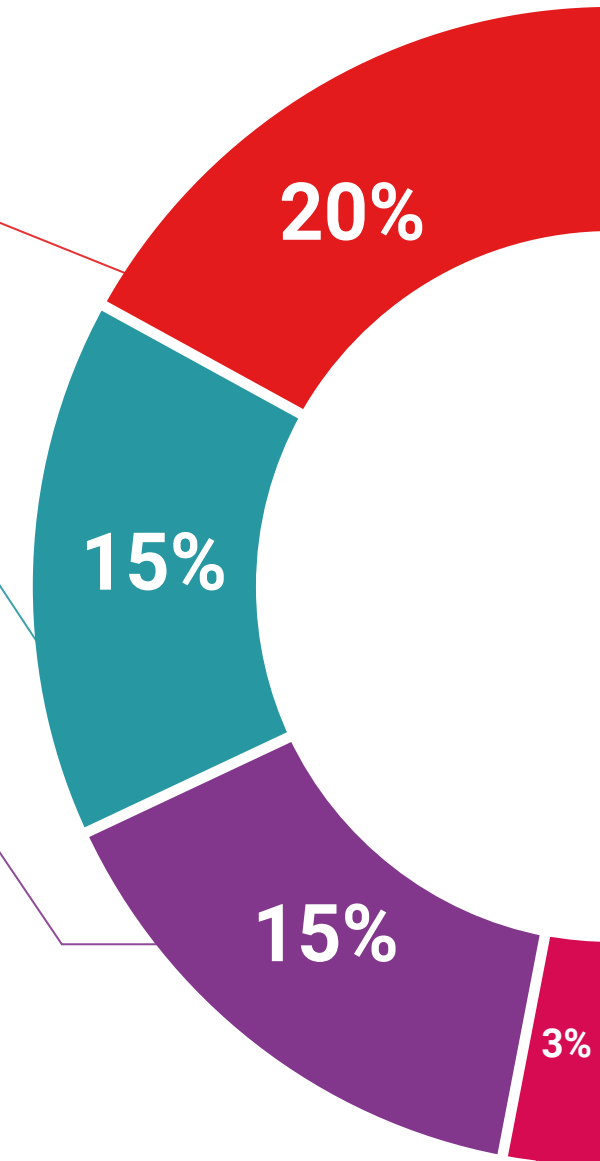
The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

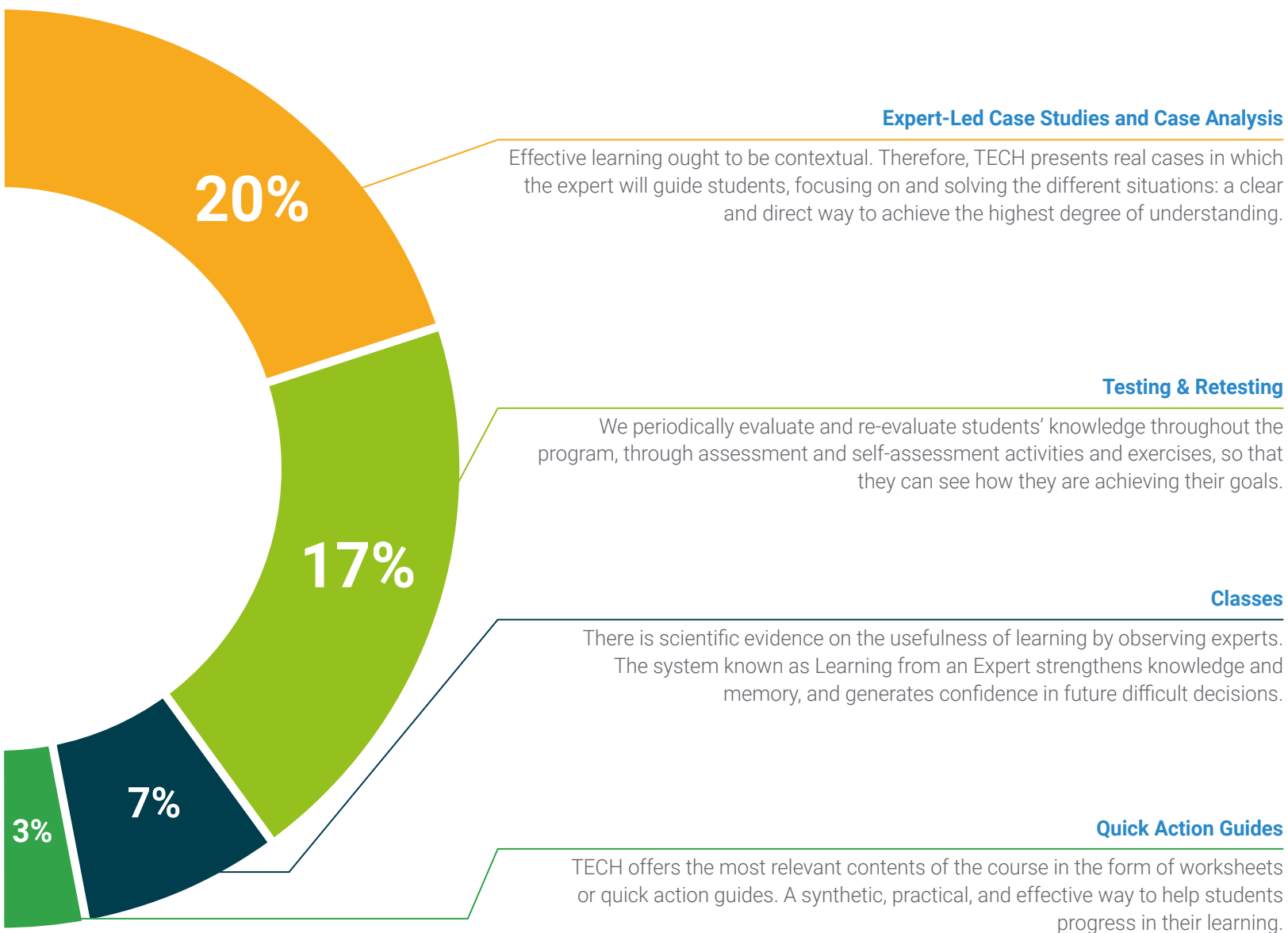
This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.





07 Certificate

The Master's Degree in Psychiatric Emergencies guarantees students, in addition to the most rigorous and up-to-date education, access to a Master's Degree diploma issued by TECH Global University.



“

Successfully complete this program and receive your university qualification without having to travel or fill out laborious paperwork”

This program will allow you to obtain your **Master's Degree diploma in Psychiatric Emergencies** endorsed by **TECH Global University**, the world's largest online university.

TECH Global University is an official European University publicly recognized by the Government of Andorra ([official bulletin](#)). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

This **TECH Global University** title is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: **Master's Degree in Psychiatric Emergencies**

Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**





tech global university

Master's Degree
Psychiatric Emergencies

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

Master's Degree

Psychiatric Emergencies