

# Big Book of Emergency Department Psychiatry, “A Guide to Patient Centered Operational Improvement”

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CRC Press, Taylor & Francis Group

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This is a very important and timely book and a kind of a manifesto. It is truly an ED multidisciplinary effort written for multidisciplinary ED teams that should be applauded. It addresses acute issues and challenges facing professionals as well as some chronic dilemmas that have not been resolved by any health system worldwide. Anyone working in the frontlines in the emergency departments (EDs) dealing with behavioral disorders and mental illness will identify with the authors and their detailed accounts of their daily routine. On the list of the acute issues they tackle, we find the common scenarios of confusional states, suicidal behavior, intoxication and overdose situations, agitated patients, psychosis and many emergent presentations. The chronic issues addressed are mainly operational and universal including, bed shortages, poor working conditions, burnout of the workforce and funding of services. The reader is into a treat from seasoned and experienced psychiatrists, psychologists, social workers, nurses and allied professions. They master the art of narrative and storytelling with a subtle inclusion of guidelines and assessment tools and admirably avoid the dryness of textbooks making it an unexpected page turner. They bring along the tools they use in their everyday work experience so that it becomes an enjoyable and educational experience. Nineteen authors contribute to the breadth of knowledge and expertise showcased in 5 sections and 21 chapters. It is a much needed reference and in my opinion the strength of the book is in the following areas:

- Demonstration of a deep understanding of how multidisciplinary teams (MDTs) really operate and function, thus providing us not just with the individuals' abilities, qualifications and skills needed to do the job but also an insight into team dynamics and the challenges they face whilst doing their jobs.

- The authors capture the minutiae of the daily routine that are easily identified with by anyone who worked in ED. You can almost visualize them doing their work as juniors facing the uncertainties of the job and using acronyms to complete assessments all the way to being mature and proficient, collaborating with colleagues in

other disciplines to provide humane and efficient interventions and leading teams.

- It is written with the patient in mind with courageous descriptions of challenging presentations

- Demonstration of a tactful and insightful use of nomenclature avoiding labeling, stigmatizing and too much concern about political correctness.

- Comprehensive and thorough referencing when necessary and efficient provision of the information keeping the book lean and sufficient.

Having said that, I feel it could have been much better:

If the title was “Book of Patient Centered Operational Improvement of Emergency Department Psychiatry”, but I guess it wouldn't be as catchy as the current prescribed one.

If tables and boxes could have been added to summarize and highlight the learning points, or pearls for ease of reference.

If it were more representative of the American experience and not so focused on one city, New York. This is also a limitation when we consider the generalizability to other countries.

Finally, I urge the author/editor to revise chapter 12.12.5.1 “opioid overdose facts for first responders” and correct the unfortunate error of naming Naltrexone instead of Naloxone as the antidote for opioid overdose, the reference being the same one the authors quote; Boyer (2012).

## REFERENCES

Big Book of Emergency Department Psychiatry, “A Guide to Patient Centered Operational Improvement.” Edited By Yener Balan, Karen Murrell, Christopher Bryant Lentz. CRC Press ,Taylor & Francis Group. 2018.

Boyer, E W. (2012) Management of opioid analgesic overdose. The New England Journal of Medicine 367(2): 146– 155.

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