

# **Criteria for referral to Tyks Adolescent Psychiatry's specialised medical care provision**

## **Emergency referral**

- acute suicide risk/recent suicide attempt
- acute psychosis
- acute threat to those around them, severe aggression towards others
- somatic/psychological life-threatening anorexia crisis

## **Category I urgency (1–7 days)**

- severe depression with severe suicidal behaviour or psychotic symptoms
- serious suspected psychosis
- acute crisis or traumatic event with severe psychological symptoms
- somatic/psychological anorexia crisis

## **Category II and III urgency (8–21 days and more than 30 days)**

- at least moderate depression, anxiety or other emotional disorder that has not eased over the course of three months with basic-level measures
- at least moderate eating disorder that has not been alleviated by basic-level measures
- neuropsychiatric disorders and suspicions of such disorders with a mental health disorder that impairs functional capacity
- gender dysphoria with a mental health disorder requiring concomitant treatment
- prolonged functional symptoms
- assessments requiring specialised medical care in accordance with the Child Welfare Act
- psychotherapy assessments requiring specialised medical care.

## Instructions

The Tyks [Adolescent Psychiatry Referral Instructions](#) and [Eating Disorder Referral Instructions](#), also feature additional instructions specific to different disorders. If anything is unclear, please consult the local [Adolescent Psychiatry working group](#).

## Tyks Adolescent Psychiatry specialised medical care sign off criteria

Termination of the patient's treatment relationship may be considered if:

- the psychological symptoms no longer meet the criteria for a mild disorder
- pharmacotherapy has stabilised and the patient is not undergoing active rehabilitation through the outpatient clinic
- the patient has not been able to commit to a treatment relationship, which manifests as repeated cancellation or non-attendance of appointments (e.g. two consecutive uncancelled appointments or a total of three during a 12-month window)
- the patient's psychological symptoms are stable and further monitoring of their rehabilitation is possible at basic level, e.g. Kela rehabilitative psychotherapy.

At the end of the treatment relationship, the need for or priority of other services, such as basic level interventions or social services, will be assessed.