Spring 5-1-2011

Assessment of SUNY Upstate Medical University’s Child Telepsychiatry Consultation Program

Mary E. Lau

Follow this and additional works at: https://surface.syr.edu/honors_capstone

Part of the Clinical Psychology Commons, Neuroscience and Neurobiology Commons, and the Psychiatry and Psychology Commons

Recommended Citation

Lau, Mary E., "Assessment of SUNY Upstate Medical University’s Child Telepsychiatry Consultation Program" (2011). Syracuse University Honors Program Capstone Projects. 304.
https://surface.syr.edu/honors_capstone/304

This Honors Capstone Project is brought to you for free and open access by the Syracuse University Honors Program Capstone Projects at SURFACE. It has been accepted for inclusion in Syracuse University Honors Program Capstone Projects by an authorized administrator of SURFACE. For more information, please contact surface@syr.edu.
Assessment of
SUNY Upstate Medical University’s
Child Telepsychiatry Consultation Program

A Capstone Project Submitted in Partial Fulfillment of the
Requirements of the Renée Crown University Honors Program at
Syracuse University.

Mary E. Lau

Candidate for B.S. Degree
and Renée Crown University Honors

May 2011

Honors Capstone Project in Psychology & Neuroscience

Capstone Project Advisor: __________________________
Bruce Way, Ph.D.

Honors Reader: __________________________
Wanda P. Fremont, Ph.D.

Honors Director: __________________________
James Spencer, Interim Director

Date: __________________________
ABSTRACT

Objectives: The project assesses the child telepsychiatry services provided by SUNY Upstate psychiatrists to several county mental health clinics in central New York State. Method: Data for forty-five patients was extracted from pre-consultation forms completed by the referring clinic and post-consultation summaries completed by the Upstate psychiatrists that occurred between July 13th, 2009 and May 12th, 2010. The study identified characteristics of patients for whom telepsychiatry consultations were sought, reviewed recommendations provided by the telepsychiatry consultant, and noted recommended changes in therapy and medication. Results: Analysis of the data showed that there was a large variation in patient characteristics such as age (ranged from 3 to 17), current living situation, and psychological symptoms. In addition to a family history of mental illness (80%), the most common symptoms were physical aggression (60.0%), defiant/oppositional behavior (57.8%) and attentional problems (55.6%). The most common reason for referral was diagnostic clarification (67%). The child telepsychiatrist recommended a change in medication for most (80.8%) of the patients who were on medications, and to begin medications for most (63.2%) who were not receiving medication at the time of consult. Further, the telepsychiatrist often recommended the addition of family therapy (71.1%) and counseling at school (17.8%). Conclusion: The child telepsychiatric program at Upstate seemed effective. It reached a large variety of children with significant mental disorders. The consultants provided diagnostic clarification and recommended modification of treatment for most. However, this assessment is limited as examined as it did not include follow-up information on whether consultant recommendations were followed and, if they were, whether they were effective.
# TABLE OF CONTENTS

Acknowledgements

Advice to Future Honors Students

Assessment of SUNY-Upstate Medical University’s Child Telepsychiatry Consultation Program

1. Introduction
   a. Prevalence
   b. Shortage of Clinicians
   c. Need for an Early Accurate Diagnosis and Early Treatment
   d. Expected Benefits of Telepsychiatry Consultations
   e. Child Telepsychiatry at SUNY Upstate Medical University
   f. Objectives of Research Study

2. Method

3. Results
   a. Characteristics of Patients
   b. Demographics
   c. Reasons for Referral
   d. Treatment at Time of Consult
   e. Current Medication(s)
   f. Psychological Symptomology
   g. History of Abuse
   h. Recommended Changes in Therapy
   i. Recommended Changes in Medication
   j. Recommended Evaluations

4. Discussion

References

Appendices

Capstone Summary