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

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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.

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and Renée Crown University Honors

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Honors Capstone Project in Psychology & Neuroscience

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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.
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