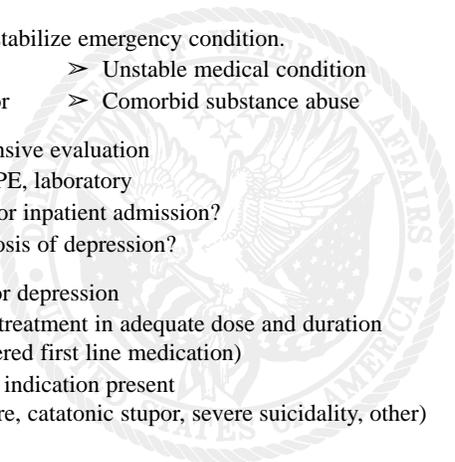


VA/DoD Clinical Practice Guideline for Management of Major Depressive Disorder in Adults: Inpatient Care

1. Evaluate and treat/stabilize emergency condition.
 - Suicidal risk
 - Violent behavior
 - Unstable medical condition
 - Comorbid substance abuse
 2. Conduct comprehensive evaluation
 - History, MSE, PE, laboratory
 - Meets criteria for inpatient admission?
 - DSM-IV diagnosis of depression?
 3. Initiate treatment for depression
 - Antidepressant treatment in adequate dose and duration (SSRI is considered first line medication)
 - ECT if primary indication present (psychotic feature, catatonic stupor, severe suicidality, other)
- 
- The seal of the Department of Veterans Affairs is faintly visible in the background. It features an eagle with wings spread, perched on a shield. The shield is decorated with stars and stripes. The words "DEPARTMENT OF VETERANS AFFAIRS" are written around the top of the seal, and "AMERICA" is at the bottom. The year "1789" is also present.

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4. Evaluate treatment for depression
 - Reevaluate daily
 - If sub-optimal response to treatment, consider additional strategy for refractory depression treatment. Change antidepressant class, T3, Li, CO3, trazodone, bupropion, anticonvulsant, ECT
 - If depressive symptoms have responded to initial treatment, evaluate for step down to a less restrictive environment (stabilization/improvement of symptoms; level of function adequate to less restrictive setting; no acute manifestation of intent to harm self or others; support level allows active participation in aftercare)
 5. If discharge criteria met, ensure appropriate level and continuity of aftercare and discharge to appropriate setting.

VA access to full guidelines: <http://www.oqp.med.va.gov/cpg/cpg.htm>

DoD access to full guidelines: <http://www.cs.amedd.army.mil/Qmo>

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