Severe depression after emergency assessment: transfer

Assume that today's date is 5 November 2026. Mr Marco Browne is being transferred from the emergency department to the inpatient mental health ward today. This is original independent practice material. You are a registered nurse in the emergency department. Using the case notes, write a transfer letter to Ms Wadha Alotaibi, the receiving psychiatric nurse, handing over Mr Marco Browne's current condition and agreed observation and safety arrangements. Address the letter to Ms Wadha Alotaibi, Receiving Psychiatric Nurse, Inpatient Mental Health Ward, 24 Hospital Road, SW1P 3AA, United Kingdom. In your answer: expand the relevant notes into complete sentences; do not use note form; use letter format. The body of the letter should be approximately 180-200 words.

Choose one box per line: I = Include / C = Compress / O = Omit. Answers and reasons are on the webpage (scan QR).

	I	C	O
Patient details			
1. Name: Mr Marco Browne	☐	☐	☐
2. DOB: 12/02/1980; 46 yrs	☐	☐	☐
3. Emergency assessment and ward transfer: 05/11/26	☐	☐	☐
Social background			
4. Lives alone; daughter accompanied him to ED	☐	☐	☐
5. Consents to daughter receiving care updates; contact details verified	☐	☐	☐
6. Library assistant; currently on sick leave	☐	☐	☐
7. Collects stamps; previously attended collectors' meetings	☐	☐	☐
8. Complained that reception staff seemed unfriendly	☐	☐	☐
9. Daughter discussed an unrelated family inheritance dispute	☐	☐	☐
Medical history			
10. Depressive episode 2018; recovered following treatment	☐	☐	☐
11. Appendicectomy during adolescence; no ongoing problems	☐	☐	☐
12. No regular medicines reported; reconciliation completed	☐	☐	☐
13. No known drug allergies	☐	☐	☐
Assessment today			
14. Low mood 6/52; poor sleep, ↓ appetite and reduced intake	☐	☐	☐
15. Latest review: suicidal thoughts persist; cannot say he would remain safe alone	☐	☐	☐
16. Disclosed plan to overdose on tablets at home; reports no ingestion	☐	☐	☐
17. Medical assessment completed; physically stable for psychiatric transfer	☐	☐	☐
Assessment today			
18. No hallucinations reported; orientated and able to discuss care	☐	☐	☐
19. Psychiatric assessment: severe depression; inpatient care recommended	☐	☐	☐
20. Agrees to voluntary admission; requesting treatment	☐	☐	☐
21. Responds to calm explanations; allow time for answers	☐	☐	☐
Documented individual safety plan			
22. Team plan: continuous 1:1 observation within eyesight, including bathroom use; privacy arrangements explained/agreed	☐	☐	☐
23. Medicines/sharps secured; collaboratively reassess belongings/environmental hazards on arrival	☐	☐	☐
24. Continue observation throughout transfer → direct handover to receiving observing nurse; no gap	☐	☐	☐
25. Ward psychiatrist to review on arrival; observation unchanged until reviewed	☐	☐	☐
26. ↑ distress/suicidal intent or request to leave: stay with him, immediate registrar assessment; imminent harm → emergency response	☐	☐	☐
Treatment/Progress			
27. No psychiatric medicine started; treatment decisions await psychiatric review	☐	☐	☐
28. Encourage food/fluids; record intake	☐	☐	☐
29. Accepted sandwich and water with encouragement	☐	☐	☐
30. Quiet/cooperative; suicidal thoughts remain present despite calm behaviour	☐	☐	☐