Psychiatric Hospitalization Guide
For Caltech Students
A Message From The Director of Health and Counseling

Students, families, friends, and members of the support network:

If you or your loved one have been admitted to the hospital, you may have many questions or concerns. This guide offers resources to help you navigate the process, as well as aid you in considering how an inpatient hospital stay fits into an effective treatment plan.

Our first priority is to work collaboratively with the student to ensure that they* are safe, and that they can engage in treatment to facilitate stabilization and a pathway to recovery. Inpatient hospitalization is a clinical intervention that is useful when a student is having thoughts of ending their life, represents a significant safety risk to others, or if the student is unable to care for themselves. A student may also be a candidate for inpatient care based on other factors, such as the need for stabilization of a manic episode, substance detoxification or rehabilitation treatment, or medication adjustment. Most hospitalizations are voluntary, which means that the student and their treatment provider agree that inpatient care is necessary to meet specific goals of stabilization and ensuring safety. Sometimes students are unwilling to enter the hospital voluntarily, but inpatient care is mandated after an assessment by an intake coordinator at a hospital, an emergency services first responder, or law enforcement.

In all cases, the Caltech Health and Counseling Services staff is committed to supporting students during the hospitalization process and transitional care. Our goal is to help students engage in treatment that is commensurate with their needs, and to co-create a plan that will restore students’ level of functioning in order to promote reintegration into the campus environment. The partnership between the student, inpatient treatment team, Health and Counseling Services, the Deans’ office, and the student’s family and/or social supports is critical to the success of the inpatient stay and transition to aftercare. This guide will outline the process and the ways in which these constituents can work together to create an effective treatment and aftercare plan.

We recognize that this can be a stressful experience, and we encourage all parties to ask thoughtful questions, advocate for themselves, and take an active role in treatment. We welcome your feedback and collaboration in this process.

Best,

Jennifer Howes, Ph.D.

Director of Health and Counseling Services

*they/their pronouns used to be respectful of all gender identities
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Why Might Caltech Students Need to Go to the Hospital?

There are several reasons why Caltech students may need to consider psychiatric hospitalization, including such concerns as:

• Feeling suicidal
• Being worried that you may hurt yourself or someone else
• Being worried about your drug or alcohol use
• Feeling so stressed or out of control that you cannot care for yourself
• Having unusual experiences, such as hallucinations
• Feeling too overwhelmed to function

Hospitalization provides an opportunity to begin stabilizing a crisis situation. The hospital provides a safe, supportive environment where you can begin to understand what led to the need for hospitalization and to make a plan for your outpatient care.
What Will Happen Once I Get to the Hospital?

Health and Counseling Services will typically refer students in need of psychiatric hospitalization to Las Encinas Hospital in Pasadena. If Las Encinas Hospital does not have the capacity to admit a Caltech student, it may be necessary to seek care at another facility. In situations when medical care is needed, students should go to the Emergency Department at Huntington Memorial Hospital. Students with Kaiser Permanente insurance will likely be transferred to a facility that is some distance from campus.

Here is the contact information for the most commonly used hospitals near the Caltech Campus:

**Las Encinas Hospital**  
2900 E. Del Mar Boulevard  
Pasadena, CA  91107  
(626) 795-9901  
www.LasEncinasHospital.com

**Huntington Memorial Hospital**  
*Used when medical care is needed*  
100 W. California Boulevard  
Pasadena, CA  91105  
(626) 421-7733  
www.HuntingtonHospital.org

**Alhambra BHC Hospital**  
4619 Rosemead Boulevard  
Rosemead, CA  91770  
(626) 286-1191  
www.BHCAlhambra.com

When you arrive at the hospital, you’ll check in at the front desk and tell the reception staff that you’re there for an assessment. They’ll ask you to fill out some initial paperwork, and then you’ll meet with an intake worker to talk about the reasons you’ve come for an assessment. Depending on how many people are also being assessed, you may need to wait for a little while before you are seen. At Huntington Hospital, the wait is often longer because you will be in the Emergency Department.

When you meet with the intake worker, they’ll take your blood pressure, ask you some medical questions, and talk with you about the reasons you came to the hospital. They’ll ask you about any difficulties you’ve been having recently and in the
past; about your drug and alcohol use; about any history of medications or counseling; and if you’ve been having any suicidal thoughts. It’s important to be open and honest with the intake worker, even if these are personal questions.

So that you’re not there by yourself, it’s customary for us to ask one of the Residence Life Coordinators (RLCs) to join you at the hospital. This can be very useful for several reasons. If you are admitted to the hospital, the RLC can go back to your room (if you live on campus) and get any clothes, books, or other belongings that you request. If you are admitted to the hospital, the RLC can also play an important role in letting your RA, friends, family, or other people know where you are. It’s important to think about what message you want to give to friends, roommates, or other people who will wonder where you are. You’re in charge of the message - and it’s important to think about what you want other people to know. At the very least, it’s important to let your friends know that you’re safe.

After you meet with the intake worker, they will make one of three recommendations:

1) The intake worker might say that there’s not an immediate need for you to be in the hospital. If your therapist recommended that you get an assessment at the hospital, the RLC can help you convey this message to your therapist as soon as possible. You can return to campus or your apartment.

2) Alternatively, the intake worker might recommend that you voluntarily come to the hospital for a short amount of time. This is common in situations where it may be beneficial to take a short time away from your academic work to focus on making sure that you’re safe and coping as well as you can while you address the sources of your current stress. It’s up to you whether or not you enter the hospital in this situation, but it’s generally wise to seriously consider the recommendation.

3) In some situations, the intake worker may insist that you be admitted to the hospital, whether or not you want to. This is called an involuntary hospitalization, or an involuntary hold. This is sometimes done in situations when the intake worker believes that you may be at high risk of harming or killing yourself or someone else, or if you appear unable to care for yourself.

Of course it is upsetting to be made to stay somewhere, especially if you do not want to. However, the hospital intake worker does have the legal right to mandate that you stay if, in their professional opinion, you present an imminent risk to yourself or someone else, or if you are unable to care for yourself.

For students who may otherwise be placed put on an involuntary hold, you may consider asking to enter the hospital on a voluntarily basis, as this is often a less restrictive process. If the hospital staff is open to this option, you will likely still be
placed on an involuntary hold if you attempt to leave before they deem your situation to be stabilized.

If you are placed on an involuntary hold, you can be required to stay at the hospital up to 72 hours from the time of admission. In some situations, particularly if you are dealing with a significant concern that is unlikely to resolve in less than 72 hours - for instance, if you were dealing with a psychotic disorder, bipolar disorder, or other illness that significantly compromises your safety or your ability to care for yourself - then a psychiatrist may require you to stay in the hospital for longer than 72 hours.
Financial Considerations

If you are admitted to the hospital, the hospital business office will work with your health insurance provider to determine what they will cover, and what you will be financially responsible for. This will depend on which health insurance policy you have. For most insurance companies, you can go to their website or call the telephone number on your insurance card to learn about your specific coverage.

If you are on your parents’ health insurance plan, then they will most likely become aware that you were admitted to the hospital. It is useful to think in advance about how you want to communicate with them about this. If you are reluctant to let your family know that you were in the hospital, talk with your therapist or psychiatrist about some ways that other students have managed these kinds of conversations.
Hospitalization Goals

It’s natural to be concerned with your academic work, and to wonder how quickly you can get back to your classes. It’s also important to remember that if you’ve been admitted to the hospital, then the status quo wasn’t working well enough for some reason and some change might be necessary. Just returning back to campus without addressing these reasons would not provide any protection against the same situation happening again. It’s important, then, to think about what kinds of changes you’d like to make once you return to campus.

To help with planning your return, it will be very useful and important to meet with the Dean after you’re discharged from the hospital to talk about how you can best return to your previous routine. We strongly encourage letting the Dean know that you’re in the hospital, and to meet with him or her upon your discharge. Meeting with the Dean for this reason is not a disciplinary issue; rather, it’s a way to think through ways of easing the transition back into your academic responsibilities.

The Deans’ contact information is:

**Undergraduate Deans’ Office**

Room 210, Center for Student Services

414 South Holliston Avenue, Pasadena, CA 91125

(626) 395-6351

deans.caltech.edu

**Graduate Deans’ Office**

Room 230, Center for Student Services

414 South Holliston Avenue, Pasadena, CA 91125

(626) 395-6346

gradoffice.caltech.edu
You can use the space below to write down what you want to get out of your time in the hospital:

*What I want to be different when I am discharged:*

*Changes to my academic responsibilities that I want to consider:*

*Medical or psychiatric support that I want:*

*Friends or family whom I want to involve in my care:*

*My goals for counseling or therapy:*
What Is a Typical Day Like at the Hospital?

This depends on your reasons for going to the hospital, and which unit of the hospital you are in. Generally, though, you will attend one or more therapy groups during the day, which will give you a chance to talk about your concerns, and to learn skills for managing stress and other problems more effectively.

You will be assigned a psychiatrist who will generally visit you once each day. They will talk with you about how you are doing, how your stay in the hospital is going, and what your goals are for being in the hospital. They may also recommend that you begin taking one or more medications, or if you are already taking medication, they may make a recommendation about a change to your regimen. You can talk with your psychiatrist about this and how you feel about it.

You will have breakfast, lunch, and dinner and will also have some free time to rest, watch television, read, or have visitors. You should know that certain items are not allowed in the hospital, including phones with cameras (to protect the privacy of other patients), and laptops. Books are usually fine.
Sharing Information

One of the most important questions to consider is whom you want to tell that you are in the hospital. It’s a good idea to consider letting certain people know where you are, or at least that you are safe.

Some people you may think about talking with include:

- Roommates
- Friends
- Romantic partner
- Family
- RA / RLC
- UCCs
- Health Advocates
- Therapist
- Psychiatrist
- Physician
- Academic advisor
- Coworkers

If you live in campus housing, you may have roommates or friends who will notice that you are not there, and they may be concerned. Your Residence Life Coordinator (RLC) is therefore often a good person to talk with because they can deliver whatever information you wish back to your friends, roommate, or others. If you are not sure who your Residence Life Coordinator is, you can call the Dean’s Office or Counseling Center and they can tell you. Their phone numbers are at the end of this booklet.

Your psychiatrist or other hospital staff will ask you if you want to let the Deans and your family know where you are. It can help to think in advance about what you want to tell others about the circumstances that led you to come to the hospital. You can use the space below to write down who you might want to talk with, and what you want them to know.
Staying in Contact With Friends and Family

If you are admitted to the hospital, the facility will use some kind of access control system to protect your personal information. Las Encinas Hospital, for example, uses a 4-digit access code to help protect your privacy. If someone were to call the hospital and ask to speak with you, the hospital would not be able to confirm or deny that you were there unless the caller has your unique access code. Other facilities may employ a different type of access control method, but the principle is the same.

My access code:

___   ___   ___   ___

You have control of who has your access code. It’s your choice if you want to give certain friends, your family, your RA, or other people your access code. Just know that without the code, others will not be able to call you, visit you, or get in touch with you.

It’s important to let your therapist know what your access code is so that they can call you, and help coordinate your care without any difficulty. It may also be helpful to let the Dean of Students or other Caltech staff member know your code.

Cell phones are not allowed in the hospital, but each unit has a community telephone that you can use. You can use it to call your friends or family, or receive calls from them.

If you want your therapist, other mental health professional, or family member to be able to talk directly with hospital staff, you will need to fill out a release of information form. This lets you state what information you would want to be shared, and with whom it can be shared.
Psychiatric Medication

For many people, medication can be a helpful part of a stabilization plan. In the hospital, medications are prescribed by a psychiatrist, who is a medical doctor specializing in mental and emotional health. A psychiatrist will meet with you each day that you are in the hospital, and may talk with you about how certain medications may be helpful. It is up to you if you wish to take any medications that are prescribed. To make an informed decision, you should talk with your psychiatrist about questions like:

• What is the name of the medication that you’re recommending?
• Why are you recommending this medication?
• What is my diagnosis?
• How long will I need to take this medication?
• Are there any common side effects?
• When might I begin to see a difference in symptoms?

You can use this space to write down the names and dosages of any medications you are prescribed:
What About my Academic Work?

For many Caltech students who enter the hospital, their most important priority is getting back to their academic work. This is where the Deans of Students can be extremely helpful. It can be very useful to involve one of the Deans soon after coming to the hospital so that they can help you with your academic responsibilities. The Dean or Associate Dean can inform your professors or faculty advisor that you will temporarily be absent - but they won’t tell faculty that you’re in the hospital unless you request it. They can also help you request extensions for work that you may miss while you are in the hospital.

After you leave the hospital, you will meet with a clinician at Counseling Services for a post-hospitalization visit. This meeting is designed to help you identify what led to the hospitalization, and to discuss a treatment plan. Next, you’ll meet with the Dean or Associate Dean, a member of the Counseling Services team, and any other primary members of your support system. Your family may be an important part of your recovery, and it is often helpful to include them in the post-hospitalization meeting. Students are encouraged to think about who will be part of their support system and how this support will help them stay accountable and engaged in aftercare.

Some students want to continue their normal routine and return to their work as soon as possible. Sometimes this is possible with continued support through being in counseling, seeing a psychiatrist, increasing the frequency of counseling sessions, or following other hospital recommendations. Sometimes it makes sense to reduce your course load or workload so that you can move forward with less stress. There are several options that you may have - and they are all based on the idea that something will need to be different as you move forward. The Dean can talk with you about which options make sense for you.
Medical Leaves

Some students would find it difficult to return to their normal routine and want to take time off from Caltech. In these situations it may make sense to take a medical leave. A medical leave lets you temporarily withdraw from Caltech so that you can focus on pursuing treatment without the additional pressure of classes or other academic responsibilities. If you choose to take a medical leave, you will be asked to provide information about your condition and your treating provider’s recommendations about your readiness to return. This usually involves giving your therapist or healthcare provider permission to talk with the Director of Health and Counseling Services about how you’re doing, who will then make a recommendation to the Dean.

What about my grades?

In general, a medical leave results in no recorded grades for the term if the term has already started. If you are towards the beginning or middle of the term when you take a medical leave, you will likely receive grades of W (Withdrawn) for your classes, which do not figure into your GPA. If you take a medical leave and are very close to the end of the term, in some circumstances you can request grades of I (Incomplete) and make up the work during your leave.

Will the medical leave go on my transcript?

• For undergraduate students: Your transcript will show your status as “Separated,” with the date of separation appearing on the transcript after the term enrollment. It is not specified on your transcript as a medical withdrawal.
• For graduate students: A medical leave will be reflected on your transcript as “Sabbatical,” with no mention of its medical nature.

What are the financial implications of taking a medical leave?

Please consult with the Deans’ office and Financial Aid office for the most up-to-date information.

I get my health insurance through Caltech. Can I keep my health insurance if I am on leave?

If you have the Caltech-sponsored student health insurance, you are eligible to continue coverage for up to one year. You are responsible for payment of the premium, and should contact Human Resources to discuss the process to avoid any lapse in coverage.
Follow-Up Plans

Academics

After you’ve been discharged from the hospital, you will be asked to meet with the Dean of students. This isn’t a disciplinary meeting – it’s to discuss how you want to handle any absences from your classes or research. The dean can communicate with your professors or advisor to let them know that you were out for a justified medical reason, without going into further detail. If for some reason the Deans’ office is unaware that you were hospitalized, please contact them after you are discharged and set up a meeting with one of the Deans.

Counseling

Remember that being in the hospital usually means that the status quo was not working well enough in some way, and that something will need to be different as you move forward. One of the most common ways of addressing this is through ongoing counseling or therapy. If you were already in counseling, it will be important to talk with your therapist about making any necessary changes in your work together. Sometimes this means meeting more frequently, changing the focus of your work together, or sometimes even changing therapists to someone who has a specialty in the concerns you’ve been dealing with. If it seems that longer-term therapy or more intensive therapy may be useful, you and your therapist can talk about these options as well.

You will be asked to attend a post-hospitalization needs assessment meeting at the counseling center. This is a meeting with a counselor and the crisis coordinator to discuss what you need as you return to campus. It’s an important opportunity to make specific plans about counseling, psychiatric visits, and your academics.

Psychiatric visits

If you are currently taking any psychiatric medication, or if you began taking any psychiatric medication while in the hospital, it is very important to follow up with your psychiatrist to talk about how well any medications are working for you.
You can use this space to write down when your next follow-up appointments with your therapist and / or psychiatrist will be.

Post-hospitalization needs assessment at Counseling Services:

Meeting with the Dean:

Meeting with my therapist:

Meeting with my psychiatrist:
Your Rights

The California Department of Healthcare Services offers a detailed explanation of your rights if you are in a psychiatric hospital. You may obtain a copy of this document in PDF format at:

Helpful Addresses and Phone Numbers

**Las Encinas Hospital**
2900 E. Del Mar Boulevard
Pasadena, CA  91107
(626) 795-9901
LasEncinasHospital.com

**Huntington Memorial Hospital**
(Used when medical care is needed)
100 W. California Boulevard
Pasadena, CA  91105
(626) 421-7733
HuntingtonHospital.org

**Alhambra BHC Hospital**
4619 Rosemead Boulevard
Rosemead, CA  91770
(626) 286-1191
BHCAlhambra.com

**Caltech Counseling Services**
1239 Arden Road
Pasadena, CA  91125
(626) 395-8331
counseling.caltech.edu

**Undergraduate Deans’ Office**
Room 210, Center for Student Services
414 South Holliston Avenue, Pasadena, CA  91125
(626) 395-6351
deans.caltech.edu

**Graduate Deans’ Office**
Room 230, Center for Student Services
414 South Holliston Avenue, Pasadena, CA  91125
(626) 395-6346
gradoffice.caltech.edu
Caltech Office of the Registrar
125 Center for Student Services
414 South Holliston Avenue, Pasadena, CA 91125
(626) 395-6354
registrar.caltech.edu

Caltech Office Of Financial Aid
383 S. Hill Avenue (Behind the Holliston parking structure)
Pasadena, CA 91106
(626) 395-6280
finaid.caltech.edu

Caltech Bursar’s Office
120 Center for Student Services
414 South Holliston Avenue, Pasadena, CA 91125
(626) 395-2988
bursar.caltech.edu

Caltech Human Resources
399 S. Holliston Avenue
Pasadena, CA 91125
(626) 395-3300
hr.caltech.edu

Caltech Campus Security
515 S. Wilson Avenue, rear of building (Administrative offices)
Pasadena, CA 91106

370 S. Holliston Avenue (24-hour security staff located on the ground floor of Holliston parking structure)
Pasadena, CA 91106

(626) 395-5000 (emergencies)
(626) 395-4701 (non-emergencies)
security.caltech.edu

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