

I Got My Patient Arrested: A Novel Forensic Encounter in Consultation-Liaison Psychiatry

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Received: 12/3/2024

Accepted: 12/18/2024

Published: 10/15/2025

Psychiatric patients with criminal forensic issues pose a unique challenge to the general psychiatrist due to the complexity of the overlapping legal & medical systems of practice. Medical ethics defines tenets to which healthcare professionals shall abide to preserve the rights of—and ensure the overall well-being of—their patients. Outside of specific legal obligations, coordinating with law enforcement to facilitate the arrest of a patient generally violates the ethical principles of autonomy, beneficence, and nonmaleficence. This report describes a 39-year-old Black male with a psychiatric history of schizoaffective disorder, bipolar type and alcohol use disorder who was admitted to the trauma service following a motor vehicle accident in which the patient was a pedestrian, allegedly run over by a sibling after an altercation. The patient has a history of forensic psychiatric treatment and was charged with additional crimes for events which occurred just prior to this admission. Throughout his admission, the patient consistently reported heightened anxiety related to the threat of his arrest, which manifested clinically as physical agitation and paranoia. This was compounded by the patient's premature discharge to police custody only to be returned to the hospital shortly thereafter. On his last hospital day, the patient reported his desire to be arrested in order to treat his anxiety. He consented for the psychiatry consultation-liaison service to contact local law enforcement on his behalf which resulted in the patient's arrest. This case highlights an important example in which being taken into police custody not only aligned with the patient's psychiatric goals of care but also served as an intervention that upheld the ethical principles of autonomy, beneficence, and nonmaleficence.

Keywords: Ethics,Forensic,Arrest,Beneficence,Consultation-Liaison