The increasing prevalence of childhood mental health disorders in the US has highlighted the growing concern for clinical burden within pediatric emergency departments (PEDs).

Over the past 10 years, pediatric mental health-related visits within PEDs, length of stay (LOS), and admission rates have increased significantly.

5-10% of all PED visits are for mental health, behavioral, and substance abuse related concerns.

PEDs have become the first line of defense for pediatric mental health care.

**Objective**
The goal of this study was to describe the characteristics, frequency, and LOS of PED psychiatric evaluations in a rural hospital in Eastern North Carolina and identify factors associated with increased boarding times in the PED.

**METHODS**
Retrospective chart review of children presenting for a psychiatric evaluation at a Southeastern PED from January 2019-May 2018.

LOS, demographic data, diagnosis, and disposition decisions were gathered from the chart.

Spearman correlations were used to identify associations between LOS and IVC, DSS involvement, and historical psychiatric information.

**CONCLUSIONS**

- Children presenting to the PED for mental health disorders, particularly those meeting inpatient criteria, are boarding for significant periods of time.
- Boarding times for patients presenting for psychiatric evaluation in Eastern NC is significantly longer than National Averages.
- IVC process significantly impacts boarding time.
- Patients are continuing to return to the PED for psychiatric evaluation after inpatient admission.
- Systemic changes may be needed to ensure sufficient and adequate mental health care for children in Eastern North Carolina.

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