

EVALUATION OF SUICIDE RISK FOR CLINICIANS

SUICIDE SCREENING QUESTIONS

When you make a diagnosis of depression, suicide risk requires assessment. Ask the following progressive questions. If question 1 is negative and suspicion is low, you can skip the subsequent questions.

1. Have these symptoms/feelings we've been talking about led you to think you might be better off dead?
 Yes
 No
2. This past week, have you had any thoughts that life is not worth living or that you'd be better off dead?
 Yes
 No
3. What about thoughts about hurting or even killing yourself?
 Yes -----> go to Q4
 No
4. What have you thought about? Have you actually done anything to hurt yourself?
 Yes
 No
5. RISK FACTORS FOR SUICIDE:
 History of suicide attempt
 Social isolation
 Substance abuse
 Hopelessness
 Significant comorbid anxiety

ASSESSMENT OF SUICIDE RISK

<u>DESCRIPTION OF PATIENT SYMPTOMS</u>	<u>LEVEL OF RISK</u>	<u>ACTION</u>
No current thought; no major risk factors	<ul style="list-style-type: none">• Low Risk	Continue follow-up visits and monitoring.
Current thoughts, but no plans. With or without risk factors.	<ul style="list-style-type: none">• Intermediate Risk	Assess suicide risk carefully at each visit and contract with patient to call you if suicide thoughts become more prominent. Consult with mental health specialist as needed.
Current thoughts with plans.	<ul style="list-style-type: none">• High Risk	Emergent Referral: Active plan, no self-control or social support. Urgent Referral: Social support and self-control.

Adapted from the Three Component Model, 3CM™, with permission. 2005.

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