

Suicide Risk Assessment Overprint – Craig Bryan Handout, 6-16-11

S: A comprehensive suicide risk assessment was conducted due to: (check one)

- Referral source identified suicidal symptoms or risk factors
- Patient reported suicidal thoughts/feelings on intake paperwork/assessment tools
- Patient reported suicidal thoughts/feelings during the appointment
- Recent suicide-related event already occurred
- Other: _____

Y N Suicide Ideation

- Frequency: Never Rarely Sometimes Frequently Always
- Intensity: Brief/fleeting Focused deliberation Intense rumination Other:
- Duration: Seconds Minutes Hours
- Content: _____

Y N Current Intent

- Subjective reports: _____
- Objective signs: _____

Y N Suicide plan

- When: _____
- Where: _____
- How: _____

Y N Access to means: _____

Y N Suicide Preparation: _____

Y N Suicide Rehearsal: _____

Y N History of Suicidality

- Ideation: _____
- Single Attempt: _____
- Multiple Attempts: _____

Y N Impulsivity

- Subjective reports: _____
- Objective signs: _____

Y N Substance abuse Describe: _____

Y N Significant loss Describe: _____

Y N Interpersonal isolation Describe: _____

Y N Relationship problems Describe: _____

Y N Health problems Describe: _____

Y N Legal problems Describe: _____

Y N Other problems Describe: _____

Y N Homicidal ideation Describe: _____

Protective factors :

- Y N Hope for future
- Y N Beliefs against suicide
- Y N Other protective factors: _____
- Y N Commitment to treatment
- Y N Social support: _____

O: Mental Status Exam:

Alertness:	Alert	Drowsy	Lethargic	Stuporous	Other:		
Orientation:	X4	Person	Place	Time	Reason for evaluation		
Mood:	Calm	Elevated	Dysphoric	Agitated	Angry	Tearful	Other:
Affect:	Congruent	Appropriate	Flat	Blunted	Constricted	Labile	
Thinking:	Clear & Coherent		Loose	Tangential	Circumstantial		
Thought content:	WNL	Obsessions	Delusions	Death	Ideas of reference		
Speech:	WNL	Rapid	Pressured	Slow	Slurred	Incoherent	
Memory:	Grossly intact		Other:				
Reality testing:	WNL	Hallucinations		Other:			
Judgment:	WNL	Impaired					

A: DSM-IV-R Diagnosis:

Axis I:

Axis II:

Axis III:

Axis IV:

Axis V:

Suicide risk assessment (based on risk and protective factors above):

Category:	Baseline	Acute	Chronic high risk	Chronic high risk w/ acute overlay
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Current risk level:	Not Elevated	Mild	Moderate	Severe	Extreme
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P: At the current time, outpatient care **can / cannot** provide sufficient safety and stability.

Hospitalization **is / is not** necessary based on factors above.

Patient agrees to written crisis response plan: Y N

Patient agrees to treatment plan: Y N

Persons notified of increased risk: Spouse / Commander / First Sergeant / PCM / Friend / Other / No one

Plan for securing access to means: _____

Additional Notes: