

Suicide Checklist

YES	NO	Question
		<i>Suicidal Ideation</i>
		Does patient have Suicidal Ideation?
		How often?
		When was the last thought?
		<i>Plan</i>
		Does patient have a plan / method? (Describe)
		Dates / times
		Where?
		When?
		How?
		What means?
		<i>Intent</i>
		Did patient tell others of plan to take steps to implement the plan?
		*These items indicate very high risk for suicide.
		*Has the patient written a good-bye letter or a note?
		*Given away possessions lately?
		*Bought a lethal weapon?
		*Taken out a recent life insurance policy?
		<i>History</i>
		Has there been previous suicidal ideation? (Describe)
		Has there been a previous attempt at suicide? (Describe / Date)
		Assess lethality of attempts?
		<i>Risk Factors</i>
		Does the patient use alcohol or drugs?
		Has the patient used today?
		Is there a family history of suicide?
		What was the patient's biological and emotional relationship with the deceased?
		Has the patient had a recent loss / separation of significant other?
		<i>Hopelessness</i>
		Do you think life is worth living?
		Where do you think you'll be a year from now?
		Do you see anything in your future for yourself?
		<i>Protective Factors</i>
		What would prevent you from harming yourself?
		Can you think of any reasons for living?
		Can you see a way out of your problems?
		One of the bulleted items is sufficient for crisis action: <ul style="list-style-type: none"> • Current (last 48 hours) suicidal thoughts, plan, intent • Recent history (one month) of suicide • Extremely high risk behaviors (see items *) • Appears to be borderline intelligence with poor impulse control.

The following criteria should alert you to the possible need for admission to a psychiatric setting:

1. Patient is self-destructive and impulsive
2. Patients risk seems high and he / she is not well known to you
3. A serious suicide has been attempted by the patient in the past
4. The patient has few support systems to supervise him.
5. The patient refuses to sign a No Suicide contract
6. Suicidal state is associated with mood or thought disorder (schizophrenia, paranoid state, affective disorder)
7. Patient is suicidal and unable to meet basic needs
8. No other alternative is available (close supervision, respite) or person refuses to accept the options given
9. The person is homicidal.