

Suicide Ideation Intensity (from C-SSRS*)

1. How many times have you had thoughts of wanting to kill yourself or wanting to die?

- Less than once a week
- Once a week
- 2-5 times in week
- Daily or almost daily
- Many times a day

2. When you have these thoughts, how long do they last?

- Fleeting - few seconds or minutes
- Less than 1 hour/some of the time
- 1-4 hours/a lot of time
- 4-8 hours/most of day
- More than 8 hours/persistent or continuous

3. Could/can you stop thinking about killing yourself or wanting to die if you want to?

- Easily able to control thoughts
- an control thoughts with little difficulty
- Can control thoughts with some difficulty
- Can control thoughts with a lot of difficulty
- Unable to control thoughts
- Do not attempt to control thoughts

4. Are there things - anyone or anything (e.g., family, religion, pain of death) - that stopped you from wanting to die or acting on thoughts of committing suicide?

- Deterrents definitely stopped you from attempting suicide
- Deterrents probably stopped you
- Uncertain that deterrents stopped you
- Deterrents most likely did not stop you
- Deterrents definitely did not stop you
- Does not apply

5. What sort of reasons did you have for thinking about wanting to die or killing yourself? Was it to end the pain or stop the way you were feeling (in other words you couldn't go on living with this pain or how you were feeling) or was it to get attention, revenge or a reaction from others? Or both?

- Completely to get attention, revenge or a reaction from others
- Mostly to get attention, revenge or a reaction from others
- Equally to get attention, revenge or a reaction from others and to end/stop the pain
- Mostly to end or stop the pain (you couldn't go on living with the pain or how you were feeling)
- Completely to end or stop the pain (you couldn't go on living with the pain or how you were feeling)
- Does not apply

*Columbia Suicide Severity Rating Scale (<http://cssrs.columbia.edu/>)

Suicide Protective Factors

The following protective factors from suicide/self harm exist for this patient:

- Actively making future plans
- Verbalizes hope for the future
- Displays self-efficacy in problem area
- Shows attachment to life
- Has responsibilities to kids, family, others
- Embedded in protective social network/family
- Attached to therapy and at least one therapist
- Belief that suicide is immoral or will be punished (is religious, particularly Catholic)
- Hopeful that current treatment direction will be effective
- Taking steps to engage in treatment

Addressing Imminent Risk

- Remove lethal means
- Patient has someone living with them
- Patient has someone checking in with them regularly

Addressing Diagnoses

- Patient is receiving treatment for depression
- Patient is receiving treatment for borderline personality
- Refer patient to treatment for borderline personality
- Reduced/Removed aggravating factors for alcohol/drug abuse
- Patient has received medication prescription for alcohol/drug abuse
- Patient has received behavior/cognitive/coping prescriptions for alcohol/drug abuse
- Refer patient to treatment for alcohol/drug abuse

Addressing Symptoms

- Reduced/Removed aggravating factors for insomnia
- Patient has received medication prescription for insomnia

- Patient has received behavior/cognitive/coping prescriptions for insomnia
- Reduced/Removed aggravating factors for anxiety/agitation/panic
- Patient has received medication prescription for anxiety/agitation/panic
- Patient has received behavior/cognitive/coping prescriptions for anxiety/agitation/panic
- Reduced/Removed aggravating factors for impulsivity
- Patient has received medication prescription for impulsivity
- Patient has received behavior/cognitive/coping prescriptions for impulsivity
- Reduced/Removed aggravating factors for psychosis
- Patient has received medication prescription for psychosis
- Patient has received behavior/cognitive/coping prescriptions for psychosis
- Reduced/Removed aggravating factors for concentration
- Patient has received medication prescription for concentration
- Patient has received behavior/cognitive/coping prescriptions for concentration
- Reduced/Removed aggravating factors for hopelessness

Addressing Social Factors

- Patient has received behavior/cognitive/coping prescriptions for loss
- Provided problem solving strategies for social isolation
- Provided problem solving strategies for financial strain
- Provided problem solving strategies for unemployment