Assessment of Suicidal Ideation, Intent, and Risk

Assess the presence of suicidal ideation:

Ask patients if they have had thoughts that they would be better off dead, or that life was not worth living, or of hurting themselves, or ending their life.

It may be helpful to precede the initial question about suicidal ideation with a statement normalizing such thoughts in the setting of depression, e.g., “It is common for people who are feeling sad and depressed to feel that life is not worth living or to have thoughts of ending their life. Have you had thoughts that you would ...”

Assess content of suicidal thoughts:

Duration, frequency

Precipitants and exacerbating factors, factors that decrease suicidal ideation

Associated feelings of hopelessness, being a burden, feeling worthless

Ability to control suicidal thoughts and/or ask for help

Does the patient have a plan?

Assess the patient’s plan, if any:

What is the method, how lethal is the method?

For patients with significant suicidal ideation, determine access to common methods of suicide in addition to those required for the patient’s specific plans. Does the patient have access to:

Firearms?

Medicines?

High windows, bridges, cliffs?

A car or vehicle?

Has the patient obtained the methods, rehearsed physically or mentally?

Has the patient made any other preparations for death, e.g., wills, notes, given away possessions?

Has the patient almost acted on a plan and had to hold themselves back? Has the patient ever experienced command hallucinations?
Assess risk factors for suicide:

- A history of suicide attempt, or family history of suicide
- Comorbid alcohol and other substance abuse, anxiety or panic disorders, borderline personality, (schizophrenia is associated with suicide but precludes diagnosis of major depressive disorder)
- Impulsivity, antisocial behavior, domestic violence, acute family dysfunction
- Male gender associated with successful suicide, female with suicide attempts
- Single, white, male, age > 65
- A history of feeling hopeless