

# SUICIDE ASSESSMENT RECORD



Circle the appropriate indicator in each area

A. HISTORY OF SUICIDE		
<b>Previous Threats</b> 1. None 2. Yes	<b>Previous Attempts</b> 1. None 2. One or Two 3. Three of more	<b>Family History of Attempts</b> 1. None 2. Yes 3. Successful completion by other family member
B. CURRENT PLAN 1 – No (go to C) 2 – Yes		
<b>Reversibility of Plan</b> 1. Completely or likely 2. Questionable 3. Improbable	<b>Method</b> 1. Non toxic meds or superficial cuts 2. Narcotics, toxic meds, deep cuts, 3. Attempted drowning, gunshot wound, hanging, jumping from high place	<b>Probability of Rescue</b> 1. Probable or certain 2. Dropped some clues 3. Improbable, accidental or remote
<b>Degree of Planning</b> 1. Infrequent thoughts, no preparation, spur of the moment 2. Frequent thoughts 3. Preoccupation with suicide, specific or extensive plans	<b>Final Arrangements</b> 1. None 2. Some thoughts or plans 3. Definite plans, note, possessions given away	<b>Substance use during attempt</b> 1. None 2. Any amount taken to gain courage or supplement method
C. SYMPTOMS		
<b>Attitude towards attempt</b> 1. Sorry, did not want to die 2. Ambivalent 3. Angry that attempt not successful	<b>Attitude towards help offered</b> 1. Wants help 2. Ambivalent 3. Does not want help	<b>Depression/Hopelessness</b> 1. Mild 2. Moderate 3. Deep and chronic
<b>Anxiety/Stress Level</b> 1. Mild 2. Moderate 3. High	<b>Coping Style</b> 1. Usually constructive 2. Sometimes effective 3. Destructive, self defeating	<b>Anger Level</b> 1. Irritable, mild 2. Moderate, hostile 3. Constant anger
<b>Alcohol/Drug Use</b> 1. Infrequent 2. Frequent 3. Excessive or chronic	<b>Health</b> 1. Few health problems or hypochondriac 2. Psychosomatic illness 3. Chronic pain, terminal illness	<b>Psychiatric History</b> 1. None 2. Some 3. History of depression, psychosis, hospitalization
D. STRESSORS		
<b>Relationships</b> 1. Stable 2. Moderately unstable 3. Very unstable	<b>Employment</b> 1. Stable 2. Moderately unstable 3. Very unstable	<b>Response of Significant Others</b> 1. Sympathetic towards client 2. Anger, feeling of rejection 3. Punishing attitude, denial of need for help

**E. RESOURCES****Marital Status**

1. Happily married/ living with partner
2. Single, troubled relationship,
3. Separated, recently divorced or widowed

**Occupational Status**

1. Satisfactorily employed
2. Change in occupation, raise or demotion
3. Recent job loss, downward mobility, unemployed

**Specific Occupation**

1. Blue collar worker
2. Middle management, self-employed
3. Physician, dentist, attorney, police officer, business executive

**Social Support**

1. Several helpful significant others
2. Only one or two available
3. None, unreliable supports, recent loss of significant support or communication breakdown

**Spiritual Support**

1. Comfort from beliefs
2. Uncomfortable with beliefs
3. Separation from beliefs

**F. PRECIPITATING FACTORS****Sex**

2. Female
3. Male

**Age**

1. Younger than 15 years
2. 15 to 18 years or 35 to 50 years
3. 18 to 35 years or greater than 50 years

**Race**

1. All others
2. Caucasian
3. Aboriginal

**ADDITIONAL COMMENTS**

**RISK ASSESSMENT:**  No (foreseeable) risk  Low  Moderate  High

**Is this person's risk level changeable?** Highly changeable  Yes  No

**Are there factors that indicate a level of uncertainty in this risk assessment? Eg: poor engagement, gaps in/or conflicting information.** Low assessment confidence  Yes  No

**INTERVENTION PLAN** (consider indicators identified above)**DATE AND ID:**