

PCP, BHC, & PA Role in Suicide Prevention

Every patient, every visit:
Two Question Screen: PHQ-2

POSITIVE response to either question, or Clinical Concern, administer PHQ-9*

Consider referral to Behavioral Health and/or PCP, review and address PHQ-9 with patient

If score is above 0 on Item #9 of PHQ-9, conduct risk assessment

Assess Level of Risk** using the Columbia Suicide Severity Rating Scale

LOW RISK

- Some thoughts of death; no plan or attempt behavior
- Some support systems in place
- Willingness to seek treatment
- Minimal use of substances if at all

IMPLEMENT NEXT STEPS

- Involve BHC if available
- Give Crisis Hotline numbers (1.800.273.8255)
- Discuss securing firearms or lethal medications
- Identify family member or support person to monitor
- Follow up appointment with PCP (within 2-4 weeks)

MODERATE RISK

- Suicidal ideation, vague plan, with or without access to means
- May have had a previous attempt

IMPLEMENT NEXT STEPS

- Involve BHC if available
- Complete safety plan
- Give Crisis Hotline numbers (1.800.273.8255)
- Create a collaborative plan to secure firearms and other lethal means (provide firearms safety brochure as applicable)
- Identify family member or support person to monitor
- Follow up appointment with PCP/BHC within 1 - 2 weeks
- Referral to behavioral health
- Contact patient next day to ensure safety plan in place

HIGH RISK

- Persistent ideation
- Suicide plan with strong intent and/ or possible rehearsal behavior
- Access to means
- Severe psychiatric symptoms and/or acute precipitating event
- May have had a previous attempt

IMPLEMENT NEXT STEPS

- Ensure someone is with the person at all times
- Coordinate care with Crisis team
- Create a collaborative plan to secure firearms and other lethal means
- Arrange transport to ER and follow up to confirm arrival

*Consider Risk Factors, Protective Factors and Warning Signs throughout (refer to list on the backside of this diagram).

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**Risk levels are fluid. A patient can move from one to the other.

Note: Some patients can be suicidal and not depressed - please refer to warning signs on the reverse