

## Suicide Screening (C-SSRS) plus Risk Assessment Overview Work Sheet – 2017 (Geis, 2017, Version 1.6)

Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_ Setting: \_\_\_\_\_

(Yellow = Potential Crisis Intervention Symptoms; Green = Background Risk Factors for In-Depth Intervention; 8 + 11 + 12 + 13 = Brief; Blue = Intermediate

**1. Developing a Relationship is a Critical First Step.**

Why are you here today? \*

- Distress?
- Pain
- Crisis?
- Recent Emerg. Dept Visit?
- Recent Psych Hospital?

**2. CRISIS TRIGGERS:** What is causing your distress today? \*

**TRIGGERS (Driving the Crisis?)**

- Relationship Conflict/Stress
- Relationship Loss/Break-Up
- Financial/ Work
- School/Career
- Housing/Homeless
- Chronic Pain/Health
- Other \_\_\_\_\_
- Other \_\_\_\_\_
- Worsening of Psychiatric Symptoms?

**PERCEIVED THREAT-SELF/OTHERS?**

- Sense of Threat/Paranoia
- Threat to Others?

**3. INTERNAL/EXTERNAL:** Are you getting into it with other people or mostly staying away from other people?

- Isolation/Withdrawal
- Disgust; Wanting Revenge/Anger

**4. EMOTIONAL UPSET:** What is happening to you emotionally?\*

- Anger/Revenge
- Coming-out-of Skin Irritability
- Anxiety/Intensity
  - Panic Attacks  Social Anx.
- Depression
  - Sadness  Crying  Guilt
- Unbearable Pain/Despair
- Painful Self-Expectations/-Criticism
- Rigid Perfectionism
- Dramatic Mood Change
- Manic Acceleration
- Low Energy/
  - Low Motivation
  - Anhedonia  Irritability

**5. Executive Functioning/Neurological**

- Executive Functioning Problem  Y  N
- Developmental Disorder  Y  N **TBI**  Y  N
- Low IQ**  Y  N **ADHD**  Y  N
- Other Developmental/Neurological: \_\_\_\_\_

**6. NEGATIVE THOUGHTS:**

Are you feeling harshly negative thoughts about your life or yourself?

- Thoughts 0 to 10
- Hopeless \_\_\_\_\_
  - Feeling - Burden on Others \_\_\_\_\_
  - Sense of Failure \_\_\_\_\_
  - Self-Hatred \_\_\_\_\_
  - Not Belonging/Rejected \_\_\_\_\_
  - Demoralized Distress \_\_\_\_\_
  - Unbearable Pain \_\_\_\_\_
  - Suicide Ambivalence \_\_\_\_\_

**7. DESTRUCTIVE BEHAVIOR:**

Have you been using drugs or alcohol or doing other things that can end up hurting you?

- Substance Abuse Problem
- Alcohol  - Pot
- Other Illegal Drugs
- Prescription Abuse

- Self-Harm/Cutting
- Sexual Acting Out
- Eating  Gambling
- Other: \_\_\_\_\_

**8. CLINICAL:** Are you experiencing any of these clinical symptoms?

OVERAROUSAL

- Insomnia
  - Sleep Onset
  - Middle-of-the-Night
  - Early Awakening
  - Day/Night Reversal
  - Sleeping 10+ hours
- Tortured Thinking/Agitation
  - Ruminative Worry
  - Bipolar Acceleration/ Mind Going Fast
  - Agitation/Irritability/Rage
  - Unbearable Physical Pain
  - Coming-out-of Skin Anxiety
- Posttraumatic Stress Symp.
  - Intrusions  Startle?
  - Numbing/All or None
  - Nightmares
- Command Hallucinations
- Visual Hallucinations

**9. GENETIC** Does any of your biological family have mental health problems?

- Family History – Depression
- Family History – Drugs/Alcohol
- Family History – Bipolar
- Family History – Anxiety
- Family History – Schizophrenia
- Family History - Suicide

**10. TRAUMA EXPERIENCE (ACE)?** Have there been any bad or traumatic things that have happened to you and are hard to get over (Before age 18)?

- Parent/adult swear/humiliate/threaten to hurt you?
  - Parent/adult push, grab, slap, hit you?
  - Person 5 years older – touch, fondle, have SEX with you?
  - Feel no one in your family loved you/family not close?
  - Not enuf to eat/clean clothes/protect you/parents AOD?
  - Were parents ever separated or divorced?
  - Violence to mother/stepmother in front of you?
  - Grow up with person with drug/alcohol problem?
  - Household person: depressed/MI/suicide attempt?
  - Household member go to prison?
- Total = \_\_\_\_\_ (6 or greater? Y  N  )

Acute Trauma Yes  No  \_\_\_\_\_  
 Developmental Trauma Yes  No

**11. Capability for Suicide (Fearlessness)?** Does the pain involved in dying frighten you?

None Low Mod High  
 0 1 2 4

Fear of Dying \_\_\_\_\_ No Fear of Dying \_\_\_\_\_  
 Low Pain Tol. \_\_\_\_\_ High Pain Toler. \_\_\_\_\_

**12. Acute Suicidal Affective Disorder**

- a. Rapid increase in INTENT to HARM self over hours or last few days?
- b. One or both (social and/or self-alienation):
  1.  Social Disturbance (withdrawal from others, disgust with others) [SEE SECTION 4]
  2.  Self-Disturbance (sense of burden on others, self-hatred/self-disgust) [SEE SECTION 5]
- c.  Hopeless attitude (Nothing can get better, nothing can work) [SEE SECTION 5]
- d.  Two or more types of Over-arousal (Tortured Mentation): [SEE SECTION 7]
  1. Insomnia 2. Nightmares
  3. Agitation 4. Irritability/Anger

**13. Columbia Suicide Severity Rating Scale**

**WISH TO DIE:** Over the past month, have you wished you could go to sleep and not wake up?

**IDEATION (THOUGHTS):** Over the past month, have you had any thoughts of killing yourself

Y

N

**PLAN?** Have you been thinking about HOW you might kill yourself?

Y  N

Details:

**METHODS/MEANS:**

**RECENT INTENT?** Have you had any INTENTION of acting on these thoughts yourself, as opposed to you have the thoughts but you definitely would not act on them?

Y  N

Is there a RAPID Increase in INTENT? Y  N

**INTENT WITH A SPECIFIC PLAN?**

Have you worked out or started to work out the details of how to kill yourself

Y  N

**ACTUAL OR INTERRUPTED (Self or Other) ATTEMPT?**

Have you DONE ANYTHING, STARTED TO DO ANYTHING or PREPARED TO DO ANYTHING to end your life? Have you started to work or worked out the DETAILS of how to kill yourself? Y  N

**14. SUICIDE HISTORY**

- Lifetime Attempts \_\_\_\_\_
- Age - First Ideation \_\_\_\_\_
- # Hospitalizations for Suicide? \_\_\_\_\_
- Recent Hospitalization (Any) \_\_\_\_\_
- Attempts –Didn't mean to die? \_\_\_\_\_
- Attempt s– And meant to die? \_\_\_\_\_

Worst Attempt- When? \_\_\_\_\_ or n/a

Current Medicine:

**15. ASSETS/PROTECTIVE FACTORS**

- People who support? \_\_\_\_\_
- Reasons for Living? \_\_\_\_\_ Reasons for Dying? \_\_\_\_\_
- Moral/Religious Values re Self-Harm?
- Future possibilities/optimism?  Resilience?

Poor Excellent  
**16. Alliance:** 1 2 3 4 5 6 7 8 9 10

**Acute Risk Profiles:**

- PATTERN 1: Self-Hatred, Sense Of Failure, Unbearable Pain
- PATTERN 2: Hopelessness, Demoralized Distress, Self-Hatred, Sense of Failure, Unbearable Pain, Burdensomeness Activated by TORTURED MENTATION
- PATTERN 3: Hopelessness & Sense of Failure Activated by Command Hallucinations
- PATTERN 4: Burdensomeness, Thwarted Belonging (Self-Hatred + Suicide Ambivalence Activated by Capacity for Suicide

**Judged Acute Suicide Risk:**  Y  ?  N