

COLUMBIA-SUICIDE SEVERITY RATING SCALE

Screening

	Past month	
Ask questions that are in bold and underlined.	YES	NO
Ask Questions 1 and 2		
1) <u>Have you wished you were dead or wished you could go to sleep and not wake up?</u> Person endorses thoughts about a wish to be dead or not alive anymore, or wish to fall asleep and not wake up.		
2) <u>Have you had any actual thoughts of killing yourself?</u> General non-specific thoughts of wanting to end one's life/die by suicide without general thoughts of methods, intent, or plan.		
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6.		
3) <u>Have you been thinking about how you might do this?</u> Person endorses thoughts of suicide and has thought of at least one method. e.g. "I thought about taking an overdose but I never made a specific plan as to when where or how I would actually do it...and I would never go through with it."		
4) <u>Have you had these thoughts and had some intention of acting on them?</u> Active suicidal thoughts of killing oneself and reports having some intent to act on such thoughts. e.g. "I have the thoughts but I definitely will not do anything about them."		
5) <u>Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?</u> Thoughts of killing oneself with details of plan fully or partially worked out and person has some intent to carry it out.		
6a) <u>Have you done anything, started to do anything, or prepared to do anything to end your life?</u> Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc.		Lifetime
6b) If YES, ask: <u>Was this within the past 3 months?</u>		Past 3 Months

Response Procedure to C-SSRS Screening: **Low Risk** **Moderate Risk** **High Risk**

- 1) Seek behavioral health counseling services and/or contact crisis line.
- 2) Seek behavioral health counseling services and/or contact crisis line.
- 3) Seek behavioral health counseling services, psychiatric services/evaluation, and/or contact crisis line.
- 4) Seek psychiatric services/evaluation by behavioral health intake/emergency room/EMT.
- 5) Seek psychiatric services/evaluation by behavioral health intake/emergency room/EMT.
- 6a) Seek behavioral health counseling services, psychiatric services/evaluation, and/or contact crisis line.
- 6b) Within 3 months: Seek psychiatric services/evaluation by behavioral health intake/emergency room/EMT.

Any **YES** indicates that the person should seek behavioral health counseling and/or contact crisis lines at: National Suicide Prevention Lifeline **1-800-273-8255**, text "Home" to 741741, Behavioral Health Response (BHR) 1-800-811-4760, Provident Crisis Services (PCS) 314-647-4357, KUTO 1-888-644-5886, Trevor Project (LGBTQ) 1-866-488-7386. However, if the answer to 4, 5 or 6 is **YES**, seek immediate help: contact behavioral health intake, go to the emergency room, or call **911**.

Do Not Leave "At-Risk" Person Alone. Secure All Means. Remain Calm, Listen, Provide Love & Support.