What are some signs that your patient may be thinking of suicide?

- Talking about suicide or acting if saying goodbye.
- Feeling depressed, anguish, anxiety, guilt, hopelessness or a sense of abandonment or isolation.
- Changes in mood and/or behavior, such as anger and recklessness.
- Deteriorating functioning at work, school or socially -- becoming withdrawn.
- Increasing use of alcohol and other self-destructive behaviors.
- Insomnia or sleeping too much.

What are some other risk factors?

- Recent depressing and/or stressful event; loss of a loved one, job, home or relationship.
- Severe physical illnesses.
- Events leading to humiliation, shame or despair.
- Past suicide attempts or a family history of suicide.
- Accessibility to firearms magnifies the risk.
- Alcohol addiction and/or substance abuse.
- History of trauma or abuse.

Patients may not spontaneously report suicidal ideation. Ask patients directly if you see signs or suspect acute risk. Remember: How you ask the questions affects the likelihood of a truthful response. Use a non-judgemental, non-condescending, matter-of-fact approach and ask:

Are you currently, or have you within the last two weeks...

- Thought about death or dying?
- Thought that life is not worth living?
- Thought about ending your life?

*These questions represent an effective approach to discussing suicidal ideation; they are not a formal screening protocol.*

If your patient answers yes to any of these questions, complete a suicide risk assessment and/or call the 24-Hour Suicide Prevention/Mental Health Crisis/Information/Referral Line: 216-623-6888

*The Cuyahoga County Suicide Prevention Hotline and Crisis Chat, an on-line emotional support for anyone who is depressed, despaired or thinking about suicide, is operated by Mental Health Services, Inc.*