

VISN 3 Suicide Risk Assessment and Prevention Initiative:

Suicide Template in CPRS

Bruce M. Levine, MD
Director of Education
VISN 3 MIRECC



Vista CPRS in use by: Porcelli,Robert Phd (vista.northport.med.va.gov)

File Edit View Action Options Tools Help

TEST.PATIENT ABC **TEST Oct 02,03 13:43** Primary Care Team Unassigned Flag Remote Data Postings WAD

000-00-0107 Nov 12,1920 (83) Provider: PORCELLI,ROBERT PHD

All Signed Notes Visit: 04/20/04 NEUROLOGY - GENERAL NOTE, TEST CLINIC, ANN D'ANNUNZIO (Apr 20,04@15:55)

Date	Title	Author	Location
Apr 20,04	NEUROLOGY - GENERAL NOTE	Dannunzio,Ann	TEST CLINIC
Apr 09,04	OPTOMETRY - GENERAL NOTE	Soden,Richard	OPTOMETRY FOLL...
Mar 03,04	Addendum to NURSING - LONG TERM CARE...	Marmorato,Susan M	** No Location **

Progress Note Properties

Progress Note Title: **PSYCHIATRY SUICIDE ASSESSMENT**

PATIENT RECORD FLAG CATEGORY II - RESEARCH STUDY
 PSYCHIATRY - SANVR/SMI PATIENT DISCHARGE INSTRUCTION
 NURSING - COLONOSCOPY/EGD PREP NOTE
 ***** <RESCINDED ***** DNR (MD ONLY)>

Date/Time of Note: May 17,2004@17:58 ...

Author: Porcelli,Robert Phd - CLINICAL COORDINAT(

three school cards were given to the patient today. instruction and return envelope provided. *FOBT ORDERED*

/es/ ANN D'ANNUNZIO
PROGRAM ANALYST CPRS
Signed: 04/20/2004 15:59

Cover Sheet Problems Meds Orders Notes Consults D/C Summ Labs Reports

Start Vista ... Inbox ... CPR ... Micro ... 5:58 PM

Vista CPRS in use by: Porcelli, Robert PhD (vista.northport.med.va.gov)

File Edit View **Template: PSYCHIATRY SUICIDE ASSESSMENT**

TEST.PATN
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BEFORE BEGINNING THIS ASSESSMENT, CHECK THE "ALL" BUTTON IN THE LOWER LEFT OF THIS DIALOG.

All Signed Notes

- New Note
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ASSESSMENT OVERVIEW: The assessment of suicide risk requires a careful ...

Current Suicidal Ideation/Intent/Plan:
(Patient may be at risk for suicide without voicing ideation, intent, or plan)

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for ...

SAMPLE IDEATION QUESTIONS: ...

Ideation: Yes No

If Ideation is "NO" UNCHECK"!!!
If "Yes":
Passive: * Yes No
Active: * Yes No
Intent: * Yes No
Plan: * Yes No
Describes:

*

OVERVIEW OF CHRONIC RISKS: These risk factors are essentially ...

Longstanding, Chronic Risk Factors: These factors place the person at an increased risk for suicidal behavior. They are relatively immutable trait type characteristics, exceptions being illnesses that enters remission.

* Indicates a Required Field

New Note

Cover Sheet Problems Meds Orders Notes Consults D/C Summ Labs Reports

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Start | Vista ... | Inbox ... | CPR ... | Micro ... | 5:59 PM

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BEFORE BEGINNING THIS ASSESSMENT, CHECK THE "ALL" BUTTON IN THE LOWER LEFT OF THIS DIALOG.

ASSESSMENT OVERVIEW: The assessment of suicide risk requires a careful ...

Current Suicidal Ideation/Intent/Plan:
(Patient may be at risk for suicide without voicing ideation, intent, or plan)

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for ...

SAMPLE IDEATION QUESTIONS: ...

Ideation: Yes No

If Ideation is "NO" UNCHECK"!!!
If "Yes":
Passive: * Yes No
Active: * Yes No
Intent: * Yes No
Plan: * Yes No
Describe:
*

OVERVIEW OF CHRONIC RISKS: These risk factors are essentially ...
Longstanding, Chronic Risk Factors: These factors place the person at an increased risk for suicidal behavior. They are relatively immutable trait type characteristics, exceptions being illnesses that enters remission.

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Rest your mouse!

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Template: PSYCHIATRY SUICIDE ASSESSMENT

BEFORE BEGINNING THIS ASSESSMENT, CHECK THE "ALL" BUTTON IN THE LOWER LEFT OF THIS DIALOG.

ASSESSMENT

Current Status (Patient status, or plan)

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for ...

SAMPLE IDEATION QUESTIONS:

Ideation: Yes No
 If Ideation is "Yes":
Passive:
Active:
Intent:
Plan:
Describe:

OVERVIEW OF CHRONIC RISKS: These risk factors are essentially ...

Informational Text

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for thinking about suicide risk, and correlates with acute, short term (within 1 year) and longer term(2-10 year) risk (1,2,5). However lack of suicidal ideation is quite frequent in suicide attempters, and on psychological autopsies of completed suicides, no suicidal ideation, or only indirect expression of SI is a frequent finding(1,2,4,5). Intent and plan will generally increase our suspicion of the imminent risk of suicide in a given individual but generally does not correlate as well with overall suicide risk (1-5). Measures of intent and plan include the preparations and leave-takings sometimes seen as individuals put their affairs in order in anticipation of suicide, even without overt expression of intent.

All None * Indicates a Required Field Preview OK Cancel

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File Edit View **Template: PSYCHIATRY SUICIDE ASSESSMENT**

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BEFORE BEGINNING THIS ASSESSMENT, CHECK THE "ALL" BUTTON IN THE LOWER LEFT OF THIS DIALOG.

ASSESSMENT OVERVIEW: The assessment

Current Suicidal Ideation/Intent/Plan (Patient may be at risk for suicidal plan)

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for ...

SAMPLE IDEATION QUESTIONS: ...

Ideation: SAMPLE IDEATION QUESTIONS:

If Ideatic
If "Yes"
Pass
Acti
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Desc

- Have you ever felt that if things don't change life is not worth living?
- That life has no meaning?
- That life has no purpose?
- Have you ever wished you were dead?
- Have you imagined dying by accident?
- Have you imagined getting a terminal illness?
- Have you ever thought you wouldn't be missed?
- That those around you would be better off if you were gone?
- Have you reached a point where you want to kill yourself?
- Have you reached a point where you have devised a plan to end your life?
- Have you been giving things away?
- Have you arranged to see someone, almost as a farewell?
- Have you prepared a suicide note?
- A will?
- How would you do it?
- Do you have the necessary items for completion of the plan available?
- Have you gone about assembling the items in your plan?

OVERVIEW C
Longstandi
increased
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All None * Indicates a Required Field Preview OK Cancel

New Note

Cover Sheet Problems Meds Orders Notes Consults D/C Summ Labs Reports

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Start Vista ... Inbox ... CPR ... Micro ... 6:03 PM

Sample Questions

SAMPLE IDEATION QUESTIONS:

- Have you ever felt that if things don't change life is not worth living?
- That life has no meaning?
- That life has no purpose?
- Have you ever wished you were dead?
- Have you imagined dying by accident?
- Have you imagined getting a terminal illness?
- Have you ever thought you wouldn't be missed?
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ASSESSMENT OVERVIEW: The assessment of suicide risk requires a careful ...

Current Suicidal Ideation/Intent/Plan:
(Patient may be at risk for suicide without voicing ideation, intent, or plan)

IDEATION OVERVIEW: Suicidal ideation is the usual starting point for ...

SAMPLE IDEATION QUESTIONS: ...

Ideation: Yes No

If Ideation is "NO" UNCHECK"!!!

If "Yes":

Passive: * Yes No

Active: * Yes No

Intent: * Yes No

Plan: * Yes No

Describe:

*

OVERVIEW OF CHRONIC RISKS: These risk factors are essentially ...

Longstanding, Chronic Risk Factors: These factors place the person at an increased risk for suicidal behavior. They are relatively immutable trait type characteristics, exceptions being illnesses that enters remission.

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OVERVIEW OF PREVIOUS ATTEMPTS: This is the single most significant ...

Previous Suicide Attempts: (Describe circumstances, stressors and means of previous suicide attempts, in particular the details of the most recent attempt prior to the current one, including response to treatment interventions):

SAMPLE PREVIOUS ATTEMPTS QUESTIONS: ...

Describe Previous Attempts:

*

OVERVIEW OF IMPULSIVITY: Impulsivity can not be underestimated as a ...

SAMPLE IMPULSIVITY QUESTIONS: ...

Impulsivity:

VIOLENCE: * YES NO

Verbal Aggression: * YES NO

Impulsive Behaviors: * YES NO

Head Injury: * YES NO

Describe (For ANY "Yes"):

*

Smoking: Yes No

All

None

* Indicates a Required Field

Preview

OK

Cancel

New Note

Cover Sheet Problems Meds Orders Notes Consults D/C Summ Labs Reports

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type characteristics, exceptions being illnesses that enters remission.

OVERVIEW OF PREVIOUS ATTEMPTS: This is the single most significant ...

Previous Suicide Attempts: (Describe circumstances, stressors and means of previous suicide attempts, in particular the details of the most recent attempt prior to the current one, including response to treatment interventions):

SAMPLE PREVIOUS ATTEMPTS QUESTIONS: ...

Describe Previous Attempts:

OVERVIEW OF IMPULSIVITY: Impul

SAMPLE IMPULSIVITY QUESTIONS:

Impulsivity:

VIOLENCE: YES

Verbal Aggression: YES

Impulsive Behaviors: Yes

Head Injury: Yes

Describe (For ANY "Yes"):

SAMPLE PREVIOUS ATTEMPTS QUESTIONS:

- Have you ever tried to kill yourself before?
- Have you ever had an accident that was life threatening? (e.g. car accident, fall, accidental overdose, life threatening allergic reaction to a known allergen, etc.)
- How did you do it?
- What is your understanding of what led to the attempt?
- What was going on in your life at the time of your attempt?
- What enabled you to remain alive?
- How did you feel when you found out you survived?
- Who knew/knows about that attempt?
- Did you receive any treatment after that attempt?
- How did the treatment help?
- Did you make any changes in your life after your suicide attempt?
- Did the suicide attempt lead to any changes in your life?
- Were there any other suicide attempts?

Smoking: YES NO

OVERVIEW OF ILLNESS: Each of these diagnostic categories are ...

Illness:

Depression

Psychosis

Bipolar Disorder

Cluster B Personality

Substance Abuse

All

None

* Indicates a Required Field

Preview

OK

Cancel

type characteristics, exceptions being illnesses that enters remission.

OVERVIEW OF PREVIOUS ATTEMPTS: This is the single most significant ...

Previous Suicide Attempts: (Describe circumstances, stressors and means of previous suicide attempts, in particular the details of the most recent attempt prior to the current one, including response to treatment interventions):

SAMPLE PREVIOUS ATTEMPTS QUESTIONS: ...

Describe Previous Attempts:

OVERVIEW OF IMPULSIVITY: Impulsivity can not be underestimated as a ...

SAMPLE IMPULSIVITY QUESTIONS: ...

Impulsivity:

VIOLENCE: YES N

Verbal Aggression: YES N

Impulsive Behaviors: Yes N

Head Injury: Yes N

Describe (For ANY "Yes"):

Smoking: YES NO

OVERVIEW OF ILLNESS: Each of these

Illness:

Depression

Psychosis

Bipolar Disorder

Cluster B Personality

Substance Abuse

OVERVIEW OF IMPULSIVITY: Impulsivity can not be underestimated as a contributor to suicide risk (1-5). The impulsive/aggressive factor correlates with both acute and longer term risk (1). The above list is symptoms that correlate with impulsivity. Violence and verbal aggression (1-5), are the most significant on this list. Head injury is an actuarial factor associated with increased suicide risk, probably through its impact on impulsivity (1) and smoking is also a correlate (1), although it is possible that both of these affect impulsivity through alterations in serotonergic function. "Impulsive behaviors" is a broad category, which allows clinicians to assess impulsivity in variety of ways. The first is by diagnosis and behaviors. Cluster B personality disorder as well as substance abuse diagnoses correlate with impulsivity. Substance use is a sign of impulsivity, even if subthreshold for an abuse or dependence disorder. Gambling, bulimia, kleptomania are all impulse control disorders. Some sexual disorders, and paraphilias are another group of impulsive behaviors, which in and of themselves do not have a high correlation with suicidal behavior, but may be significant with the presence of other factors. Absence of all these factors does not prove absence of impulsivity, but is a fairly good approximation. The other method for looking at impulsivity is to use questions from an impulsivity scale, the most well accepted being Barrett's. These scales generally ask questions about the immediate need to act, restlessness, blurting out, impatience, instant gratification versus the ability to think and assess consequences before acting, and ability to delay gratification.

All

None

* Indicates a F

OK

Cancel

type characteristics, exceptions being illnesses that enters remission.

OVERVIEW OF PREVIOUS ATTEMPTS: This is the single most significant.

Previous Suicide Attempts: (Describe previous suicide attempts, in attempt prior to the current or interventions):

SAMPLE PREVIOUS ATTEMPTS QUESTIONS

Describe Previous Attempts:

OVERVIEW OF IMPULSIVITY: Impulsivity

SAMPLE IMPULSIVITY QUESTIONS:

Impulsivity:

VIOLENCE: YES

Verbal Aggression: YES

Impulsive Behaviors: Yes

Head Injury: Yes

Describe (For ANY "Yes"):

Smoking: YES NO

OVERVIEW OF ILLNESS: Each of the following

Illness:

Depression

Psychosis

Bipolar Disorder

Cluster B Personality

Substance Abuse

SAMPLE IMPULSIVITY QUESTIONS:

- Have you ever been angry with other people?
 - Do you get angry more frequently than other people you know?
 - When you get angry to express it verbally?
 - Do you shout at other people? Curse?
 - Do other people get afraid of you?
 - Do you hit things, like punching a wall? Throw things? Break things?
 - Have you ever thrown things at other people?
 - Hit other people?
 - Hurt someone when you hit them?
 - Severely injured someone?
 - Killed them?
 - Been arrested for any of these acts?
- In regards to evaluating for impulsivity
- Do you tend to be restless?
 - Do you tend to be impatient?
 - Do you tend to blurt out things that you're thinking?
 - Do you tend to act before thinking things through?
 - When you want something, do you need to get it right now?
 - Do you think about the consequences of your actions before you do them?
 - Whether they get you what you want?
 - Their impact on others people?
 - Are you good at making plans to achieve your goals?
 - Can you do something difficult, if you know it will feel better later?
 - How much later?

And Specific impulsive behaviors?

- Do you smoke cigarettes?
- Do you drink alcohol?
- Do you use drugs?
- Do you binge on alcohol and drugs? (etc.)
- Do you overeat?
 - Binge eat?
 - Purge? (vomiting, laxatives, diuretics)
- Do you gamble?
 - Ever lose more than you want to?
 - More than you can afford?
- Do you think you have a greater need for sex than other people?
- Does this ever interfere with other areas of your life?
- Create problems with other people?
- Create problems for you?

All

None

* Indicate

OK

Cancel



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- Fall Risk Pa
- Flu Vaccina
- Hem/Onc C
- Hematology
- Home Dxyg
- Library Serv
- Med Inpt Fc
- Med Inpt N
- Medicine - I
- Neurology -

OVERVIEW OF ILLNESS: Each of these diagnostic categories are ...

Illness: *

- Depression
- Psychosis
- Bipolar Disorder
- Cluster B Personality
- Substance Abuse
- Alcohol Abuse
- Serious Medical Illness
- Pain

Describe (Optional, Except for ANY Serious Medical Illnesses):

*

OVERVIEW ACUTE RISKS: In clinical situations we again tend to increase ...

Acute Factors: these are factors that place a person in a more acute risk of suicide. They are not as longstanding, tend to be more mutable, and are targets for treatment. When identified in a person at risk, the treatment plan should describe how these factors will be addressed.

Buttons: All, None, * Indicates a Required Field, Preview, OK, Cancel

Reminders

Encounter <No encounter information entered>

New Note

TEST.PATIENT AB

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Template: PSYCHIATRY SUICIDE ASSESSMENT

OVERVIEW OF SYMPTOMS: These are the symptoms that are most ...

Symptoms: If you do not ask about a symptom, "Uncheck" the box next to that symptom.

Psychic Anxiety: Yes No
Sample Psychic Anxiety Questions: ...

Panic: Yes No
Sample Panic Questions: ...

Hopelessness/Demoralization: Yes No
Sample Questions on Hopelessness/Demoralization: ...

Insomnia: Yes No
Sample Insomnia Questions: ...

Obsessionality: Yes No
Sample Obsessionality Questions: ...

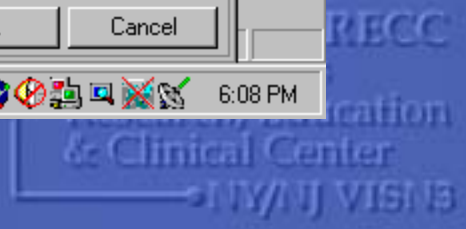
Alcohol Use: Yes No
Sample Alcohol Use Questions: ...

Hallucinations: Yes No
Sample Hallucination Questions: ...

Pain: Yes No
Sample Pain Questions: ...

Describe ALL "Yes" responses:
*

All None * Indicates a Required Field Preview OK Cancel



OVERVIEW OF SYMPTOMS: These are the symptoms that are most ...

Symptoms: If you do not ask about a symptom, "Uncheck" the box next to that symptom.

Psychic Anxiety: Yes No

Sample Psychic Anxiety Questions: ...

Panic: Yes No

Sample Panic Questions: ...

Hopelessness/Demoralization: Yes No

Sample Questions on Hopelessness:

Insomnia: Yes No

Sample Insomnia Questions: ...

Obsessionality: Yes No

Sample Obsessionality Questions: ...

Alcohol Use: Yes No

Sample Alcohol Use Questions: ...

Hallucinations: Yes No

Sample Hallucination Questions: ...

Pain: Yes No

Sample Pain Questions: ...

Describe ALL "Yes" responses:

OVERVIEW OF SOCIAL RISKS: An acute risk factor for suicide is the ...

Sample Social Questions: ...

Social (Check ALL that Apply):

Sample Psychic Anxiety Questions:
- Have you felt particularly anxious or nervous?
- Do you frequently worry that bad things will happen?
- Do you have a hard time stopping this worry?
- Do you feel keyed up or on edge?
- Do you often feel restless?
- Physically tired?

OVERVIEW OF SYMPTOMS: These are the symptoms that are most ...

Symptoms: If you do not ask about a symptom, "Uncheck" the box next to that symptom.

Psychic Anxiety: Yes No

Sample Psychic Anxiety Questions: ...

Panic: Yes No

Sample Panic Questions: ...

Hopelessness/Demoralization: Yes No

Sample Questions on Hopelessness/Demoralization: ...

Insomnia: Yes No

Sample Insomnia Questions: ...

Obsessionality: Yes No

Sample Obsessionality Questions: ...

Alcohol Use: Yes No

Sample Alcohol Use Questions: ...

Hallucinations: Yes No

Sample Hallucination Questions: ...

Pain: Yes No

Sample Pain Questions: ...

Describe ALL "Yes" responses:

Sample Questions on Hopelessness/Demoralization:
- Do you feel discouraged about the future?
- Do you feel that you have nothing to look forward to?
- Do you feel like you've tried everything?
- And nothing has worked?
- And there is nothing left to try?
- Do you feel that the future is hopeless and can't improve?
- Do you feel like you just want to give up?

OVERVIEW OF SOCIAL RISKS: An acute risk factor for suicide is the ...

Sample Social Questions: ...

Social (Check ALL that Apply):

All None * Indicates a Required Field Preview OK Cancel

TEST PATIENT AB

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Template: PSYCHIATRY SUICIDE ASSESSMENT

OVERVIEW OF SOCIAL RISKS: An acute risk factor for suicide is the ...

Sample Social Questions: ...

Social (Check ALL that Apply):

- *
 - Poor Social Support
 - Isolation
 - Environmental Change
 - Recent Discharge
 - Recent Loss
 - Acute Life Stressors
 - Family History of Suicide
 - Other

Describe Positive Responses:

*

[Empty text box for describing positive responses]

OVERVIEW OF MEDICATIONS: Patients nonadherent with medication are at ...

Medication History:

- *
 - Poor Adherence
 - Recent Lithium Withdrawal
 - Recent Medication Change
 - Pain Management

Describe (Required):

*

[Empty text box for describing medication history]

[All] [None] * Indicates a Required Field [Preview] [OK] [Cancel]

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Template: PSYCHIATRY SUICIDE ASSESSMENT

OVERVIEW OF PERSONAL RISKS: In examining suicidal individuals, ...

Personal Risk Factors: Particular factors that have triggered previous suicidal behavior, or are leading to current suicide risk: May include idiosyncratic circumstances predictive only in this patient. This involves an individualized constellation of factors, usually both chronic factors and a combination of acute factors that have led to current or previous suicidal impulses and/or the attempts described above, if applicable.

Personal Risk Factors:
Describe (Required):

*

Firearms are the most common means for completing suicide in the United States for both men and women, and the environmental factor that most increases the risk of completing suicide.

Sample Firearms Questions: ...

Firearms:
Currently Available: Yes No
If "Yes", is access restricted/removed: Yes No
Describe:

*

Other methods while not as dangerous as firearms, when available increase the risk. This is particularly true when patients have a plan with available means, or have their preferred means available and are highly impulsive.

* Indicates a Required Field

Sample Firearms Questions

- Do you own a gun?
 - Where is it?
- Can you have a family member/friend turn it into a police station?
- Can you give it to a family member/friend/ for safekeeping?
- Can you remove it from the house?
- Will you remove the ammunition from the house?
- Can we call that person now to do this?
- How will we go about doing this?



TEST PATIENT AB

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 - [+] Med Inpt N
 - [+] Medicine - I
 - [+] Neurology -

Template

Reminde

Encounter

New Note

Cover Sheet Problem

Expanding Boilerplate T

Template: PSYCHIATRY SUICIDE ASSESSMENT

Access to Other Means:
 Currently Available: Yes No
 If "Yes", is access restricted/removed: Yes No
 Describe:
 *

OVERVIEW OF MITIGATING CIRCUMSTANCES: These are all the factors that ...
 Sample Mitgating Circumstances Questions: ...

Mitigating Circumstances:
 *

OVERVIEW OF OVERALL RISK: There is no fixed formula for determining ...
 OVERVIEW OF OVERALL RISK ASSESSMENT: The assessment has two tasks. ...

Category of Risk (The first check off is if there are acute factors, identified above, currently active that need to be addressed):

OVERVIEW OF OVERALL ACUTE RISKS: This concretely identifies those ...

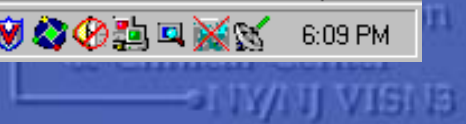
Acute Factors Current: * YES NO

The next two categories refer predominantly to the long-term or life-long type risk, rather than aspects of more acute suicide risk.

OVERVIEW OF BASELINE/LIMITED RISKS: Baseline Increased Risk is related ...

* Baseline Increased Risk Limited Risk

All None * Indicates a Required Field Preview OK Cancel



Template: PLAN

Interventions and Plan:

Containment:

- Family agrees to observe patient
- Other social support (e.g. residence staff) agrees to observe patient
- Removal of means:
- Initiate emergency hold
- Admit to inpatient care
- Place patient on 1:1 observation

Arrange Continuing Care:

- Arrange Outpatient Followup
- Patient to be seen within 24 hours
- New Referrals Sent

Describe all Details:

OVERVIEW OF RISK FACTORS ADDRESSED: In identifying the risk factors ...

Treatment of Risk Factors:

Acute Factors Addressed:

- Symptoms
- Environmental Factors
- Medication Factors

Treatment of Underlying Psychiatric Disorders:

- Medication Change or Adjustment
- Psychotherapeutic Changes or Adjustment

Describe if contact made with family/social support:

Veteran response to changes:

- Positive
- Negative
- Neutral

All

None

* Indicates a Required Field

Preview

OK

Cancel

All Signed Notes

- New Note in
- May
- All signed no
- 21 Day
- Advanc
- Asu Cor
- Cirp Ad
- Dermat
- Empley
- Esrd Sh
- Fall Risk
- Flu Vac
- Hem/Dr
- Hemato
- Home O
- Library S
- Med Inp
- Med Inp
- Medicin
- Neurolo

Template: PSYCHIATRY SUICIDE ASSESSMENT

Arrange Continuing Care:

- Arrange Outpatient Followup
- Patient to be seen within 24 hours
- New Referrals Sent

Describe all Details:

*
[Empty text box]

OVERVIEW OF RISK FACTORS ADDRESSED: In identifying the risk factors ...

Treatment of Risk Factors:

*
[Empty text box]

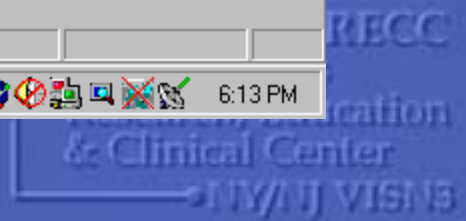
Acute Factors Addressed:

- Symptoms
- Environmental Factors
- Medication Factors

Treatment of Underlying Psychiatric Disorders:

- Medication Change or Adjustment
- Psychotherapeutic Changes or Adjustment

All None * Indicates a Required Field Preview OK Cancel



TEST.PATIENT ABC
000-00-0107 Nov 12,1920 (83)

TEST Oct 02,03 13:43
Provider: PORCELLI,ROBER

The Note Itself

Postings
WAD

- All Signed Notes
- New Note in Progress
 - May 17,04 PSYCH
- All signed notes
 - 21 Day Certification
 - Advance Directive
 - Asu Consent Form
 - Cirp Admission Assess
 - Dermatology - General
 - Employee Health
 - Esrd Short Term Care F
 - Fall Risk Patient
 - Flu Vaccination/Screen
 - Hem/Onc Clinic-Gener
 - Hematology/Oncology
 - Home Oxygen Medical
 - Library Service Patient
 - Med Inpt Follow Up
 - Med Inpt New
 - Medicine - General Not
 - Neurology - General No
- Templates
- Reminders
- Encounter
- New Note

PSYCHIATRY SUICIDE ASSESSMENT May 17,2004@17:58 Porcelli,Robert Phd - CLINICAL Change...

Vst: 10/02/03 TEST CLINIC

Current Suicidal Ideation/Intent/Plan:
(Patient may be at risk for suicide without voicing ideation, intent, or plan)

Ideation: Yes
If Ideation is "NO" UNCHECK!!!
If "Yes":
 Passive: Yes
 Active: No
 Intent: Yes
 Plan: Yes
 Describe:
Blah, Blah

Describe Previous Attempts:
Blah, Blah

Impulsivity:
 VIOLENCE: YES
 Verbal Aggression: NO
 Impulsive Behaviors: YES
 Head Injury: NO
 Describe (For ANY "Yes"):
Blah, Blah

Smoking: Yes

Illness: Depression, Psychosis, Bipolar Disorder, Cluster B Personality,

