

Medical Control Guideline: COLUMBIA SUICIDE SEVERITY RISK SCALE Ref. No. 1306.1

**Instructions: Ask questions in quotations, mark “yes” or “no”.
Follow the instructions in the grey prompts.**

| | YES | NO |
|---|---------------|----|
| 1. “In the past month, have you wished you were dead or wished you could go to sleep and not wake up?” <i>(Passive SI)</i> | low risk | |
| 2. “In the past month, have you actually had any thoughts about killing yourself?” <i>(Active SI)</i> | low risk | |
| If YES to 2, ask questions 3, 4, 5, and 6 If NO to 2, ask question 6 | | |
| 3. “Have you thought about how you might do this?” <i>(Suicide Method)</i> | moderate risk | |
| 4. “Have you had any intention of action on these thoughts or killing yourself” (as opposed to you have the thoughts but you definitely would not act on them)? <i>(Suicide Intent)</i> | high risk | |
| 5. “Have you started to work out, or worked out, the details of how to kill yourself? Do you intend to carry out this plan?” <i>(Suicide Plan)</i> | high risk | |
| Always ask question 6 | | |
| 6a. “Have you ever done anything, started to do anything or prepared to do anything to end your life?” Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, went to the roof but didn’t jump, tried to hang yourself, etc. <i>(Suicide attempt)</i> | moderate risk | |
| 6b. “Was this in the past 3 months?” <i>(Suicide attempt, recent)</i> | high risk | |