THREE THINGS TO KNOW ABOUT: SUICIDE

1. An impression shared by many psychiatrists is that to avoid liability related to patients with suicidal behaviors, they must be able to predict whether a particular patient will attempt suicide and prevent all suicide attempts however unforeseeable. Fortunately, courts recognize that psychiatrists are only human and do not expect impossible powers of prediction.

2. If a patient reports a history of suicide attempts or ideation, make certain that you obtain past treatment records if possible. If you are unable to obtain records, document your efforts to do so. Plaintiff attorneys often cite a psychiatrist’s failure to obtain past treatment records in post-suicide lawsuits.

3. Consider using a formal suicide risk assessment tool for consistency and thoroughness. Two excellent tools are the Columbia Suicide Severity Rating Scale and SAFE-T (Suicide Assessment Five Step Evaluation and Triage).

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Manager of The Psychiatrists’ Program
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