



# Quick Tips for Providers: *Assessing and Responding to Youth Suicidal Ideation*

*Suicide is the 2nd leading cause of death for adolescents. When youth express suicidal ideation family members often feel panicked and afraid. Providers and families should be aware that asking youth about suicide will not increase suicidal ideation. Additionally, pediatric PCPs can prevent suicide through timely assessment, response, and referral to mental health treatment.*

## **Screening for Suicidal Ideation**

Providers are encouraged to use the PHQ-9 to regularly screen for depression, if the suicide item is positive providers can use the Ask Suicide Screening Questions (ASQ) tool to gather more information. The ASQ is a 5-item self-report questionnaire designed to assess suicide risk. Suicidal ideation is best assessed by first meeting with the patient alone as they are more likely to respond openly. When a child or adolescent responds with “yes” to any of the 5 ASQ items, he or she requires further assessment to determine the appropriate response. PCPs should inquire about past and present suicidal thoughts/gestures, whether the youth has a detailed plan, and also whether they have access to lethal means.

## **Responding to Youth Suicidal Ideation**

Emphasize that your goal is to keep the patient safe and review the limits of confidentiality.

- “Thank you for telling me how you are feeling. I can imagine this was very difficult to tell me. My priority is to make sure that you are safe.”
- “In order to keep you safe I will have to share this information with people that need to know, this includes your family and other health care providers so we can make a plan together.”
- “If you feel unable to keep yourself safe, then we will make a plan to bring you somewhere with others who can keep you safe.”

## **Safety Planning**

Safety planning can be done briefly in-office with pediatric patients who are not at imminent risk for suicide. The provider, patient, and family can work together to identify warning signs that occur before suicidal thoughts, effective coping strategies, people the youth can contact for support and professionals that can support the youth or family during a crisis. Additionally, the family should remove lethal means (guns, sharp objects, pills, etc.) from the home to ensure safety.

## **Referral to Mental Health Treatment**

Additional evaluation and mental health treatment should be recommended to adolescents expressing suicidal thoughts. Adolescents with a specific plan, high levels of intent and lacking support should be referred for inpatient hospitalization.

*To access the ASQ and a safety plan template, please visit our website at <https://mdbhipp.org/screening-resources.html>.*

For case specific questions, contact the BHIPP consultation warmline at **855-MD-BHIPP**.

For more information please visit, [www.aap.org](http://www.aap.org).

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