



- 01 \_\_\_\_\_ SASII SEQUENCE NUMBER (Count most recent SASII as "1") (If no SASII, code 0 and stop interview)
- 02 \_\_\_\_\_ BASIS FOR SEQUENCE NUMBER (1 = All episodes, 2 = All medically treated episodes, 3 = Most serious episode, 4 = First episode, 5 = Most recent episode, 6 = most serious last year 7 = Other \_\_\_\_\_).
- 03 \_\_\_\_\_ Think back to the most recent time (time before that) when you harmed yourself. Was this a single event or a series or cluster of events?

INTERVIEWER: RATE EPISODE AS A SINGLE EVENT OR CLUSTER OF EVENTS.

0 = Single event. An act clearly remembered and/or distinguishable from another act by any detail.

1 = Cluster of events. A repetitive or habitual series of low lethality acts in which all circumstances were identical, or a series of acts so poorly recalled by subject such that acts cannot be differentiated from each other in any way other than count.

DESCRIBE BASIS FOR LABELING AS A CLUSTER:

1a \_\_\_\_\_  
\_\_\_\_\_

- 04 \_\_\_\_\_ Was the initiation of your action to (method) (self-injury/suicide attempt/overdose) deliberate, accidental, or somewhere in between? (1 = Accidental, 2 = Semi-deliberate, 3 = Deliberate) (INTERVIEWER: IF INITIATION OF ACT ITSELF WAS AN ACCIDENT, I.E. CODE=1, BEHAVIOR IS NOT A SASII.)

- 05 \_\_\_\_\_ Exact/estimated number of suicide attempts or self-harm events in this cluster (IF SINGLE EVENT, ENTER "1")

5a \_\_\_\_/\_\_\_\_/\_\_\_\_ First date of cluster (IF SINGLE EVENT ENTER DATE OF EVENT)

5b \_\_\_\_/\_\_\_\_/\_\_\_\_ Last date of cluster (IF SINGLE EVENT ENTER DATE OF EVENT.)

- 06 \_\_\_\_\_ How accurate is this date (1=Exact, 2=Within two weeks, 3=Within one month, 4=Anytime in last year)

METHOD AND LETHALITY OF METHOD

- 07 \_\_\_\_\_ Before we try to understand what led up to and followed your self-injury/attempted suicide/overdose, I want to first understand exactly what you did. Tell me again/describe exactly what method(s) you used to injure yourself?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INTERVIEWER: CODE PRIMARY METHOD FOR #07

FOR EACH OF THE FOLLOWING METHODS, CODE 0 = Not used, 1 = Used.

- 7.1 \_\_\_\_\_ = Alcohol (used with direct intent to self-harm):

71a \_\_\_\_\_ What were you drinking?

(1 = BEER, 2 = WINE, 3 = LIQUOR,  
4 = COMBINATION OF 1 & 2,  
5 = COMBINATION OF 1 & 3,  
6 = COMBINATION OF 2 & 3,  
7 = COMBINATION OF 1, 2, & 3,  
6 = OTHER, 71ao \_\_\_\_\_)

71b \_\_\_\_\_ How much did you drink? (CODE SEC's) \_\_\_\_\_

7.2 \_\_\_\_\_ = Drugs/Medications (used with direct intent to self-harm): \_\_\_\_\_

72a \_\_\_\_\_ How many different drugs or medications did you take?

72b What drugs or medication did you take? \_\_\_\_\_

72c DRUG CODE \_\_\_\_\_

72d How much did you take? 72d1 # tablets: \_\_\_\_\_ 72d2 # mg: \_\_\_\_\_

72g What other drugs or medication did you take? \_\_\_\_\_

72h DRUG CODE \_\_\_\_\_

72i How much did you take? 72i1 # tablets: \_\_\_\_\_ 72i2 # mg: \_\_\_\_\_

72l What other drugs or medication did you take? \_\_\_\_\_

72m DRUG CODE \_\_\_\_\_

72n How much did you take? 72n1 # tablets: \_\_\_\_\_ 72n2 # mg: \_\_\_\_\_

72q List any other drugs that you took \_\_\_\_\_

7.3 \_\_\_\_\_ = Poison/caustic substance:

73a What substance did you take? \_\_\_\_\_

(1=LYSOL, 2=RAT POISON, 3=AMMONIA, 4=POLISH REMOVER,  
5=OTHER 73ao \_\_\_\_\_)

73b How much did you take? \_\_\_\_\_.

7.4 \_\_\_\_\_ = Burning:

74a What did you use? \_\_\_\_\_

(1=CIGARETTE, 2=LIGHTER/MATCH, 3=OVEN/STOVE,  
4=CURLING IRON/FLAT IRON, 5=CLOTHES IRON, 6=HOT METAL, 7=HEATED KNIFE,  
8=CANDLE, 9=CHARCOAL, 10=GREASE,  
11=BOILING WATER, 12=LIGHT BULB, 13=INCENSE STICK,  
14=OTHER 74ao \_\_\_\_\_)

74b Where did you burn yourself? \_\_\_\_\_

(1=WRISTS/ARMS, 2= TORSO, 3=LEGS,  
4=OTHER/MIXED 74bo \_\_\_\_\_, 5=RECTUM, 6=VAGINA)

74c VERIFICATION BY SCARS? \_\_\_\_\_ (0 = No, 1 = Yes)

7.5 \_\_\_\_\_ = Scratch/cut

75a What did you use? \_\_\_\_\_

(1=RAZOR, 2=KITCHEN KNIFE,  
3=EXACTO KNIFE/BOX CUTTER/CARPET KNIFE/UTILITY KNIFE, 4=POCKET  
KNIFE/SWISS ARMY KNIFE, 5=SCISSORS/WIRE CUTTER, 6=FINGERNAILS,  
7=GLASS/LIGHT BULB/POTTERY, 8=CAN LID/POP CAN, 9=EATING UTENSILS,  
10=TWEEZERS, 11=PLASTIC, 12=NAILS,  
13=SAFETY PIN/PUSH PIN/TACK, 14=OTHER 75ao \_\_\_\_\_)

75b Where did you scratch/cut? \_\_\_\_\_

(1=WRISTS/ARMS, 2=THROAT, 3= TORSO, 4=LEGS,  
5=OTHER/MIXED 75bo \_\_\_\_\_)

75c How many stitches did you have? (if none, code 0 \_\_\_\_\_)

75d SEVERITY? \_\_\_\_\_

(1=SCRATCH, 2=CUTS, NO TENDON, ARTERY, NERVE DAMAGE, 3=TENDON, ARTERY,  
NERVE DAMAGE)

75e VERIFICATION BY SCARS? (0 = No, 1 = Yes)

7.6 \_\_\_\_\_ = Stabbing, puncture:

76a What did you use? \_\_\_\_\_

(1=NEEDLE, 2=KITCHEN KNIFE, 3=POCKET KNIFE, 4=UTILITY KNIFE, 5=PEN/PENCIL,  
5=NAILS, 7=SCISSORS, 8=GLASS, 9=KEYS, 10=PINS, 11=OTHER 76ao \_\_\_\_\_)

76b Where did you stab/puncture? \_\_\_\_\_

(1=WRISTS/ARMS, 2= TORSO, 3=LEGS, 4=OTHER/MIXED 76bo \_\_\_\_\_)

76c How many stitches did you have? \_\_\_\_\_

76d VERIFICATION BY SCARS? (0 = No, 1 = Yes)

7.7 \_\_\_\_\_ = Gun:

77a What kind of gun did you use? \_\_\_\_\_  
(1=BB GUN, 2=HAND GUN, 3=RIFFLE, 4=AUTOMATIC, 5=DART GUN, 6=OTHER  
77ao \_\_\_\_\_)

77b Where did you shoot? \_\_\_\_\_  
(1=HEAD, 2= CHEST, 3=LOWER TORSO, 4=LIMBS, 5=OTHER/MIXED 77bo \_\_\_\_\_)

77c VERIFICATION BY SCARS? (0 = No, 1 = Yes)

7.8 \_\_\_\_\_ = Hanging:

78a What did you use? \_\_\_\_\_  
(1= STRING, 2=ROPE, 3=SHEET, 4=OTHER 78ao \_\_\_\_\_, 5=BELT/STRAP, 6=TOWEL)

7.9 \_\_\_\_\_ = Strangling:

79a What did you use? \_\_\_\_\_  
(1= STRING, 2=ROPE, 3=SHEET, 4=OTHER 79ao \_\_\_\_\_, 5=BELT/STRAP, 6=TOWEL,  
7=HANDS)

7.10 \_\_\_\_\_ = Asphyxiation:

710a What did you use? \_\_\_\_\_  
(1=CARBON MONOXIDE, 2=PLASTIC BAG, 3=OTHER 710ao \_\_\_\_\_, 4=PILLOW)

7.11 \_\_\_\_\_ = Jumping:

711a On what did you land? \_\_\_\_\_  
(1= SOLID GROUND, 2=WATER, 3=OTHER 711ao \_\_\_\_\_,  
4=DIDN'T FALL BUT WOULD HAVE BEEN LAND,  
5=DIDN'T FALL BUT WOULD have LANDED IN WATER

711b From how high did you jump? (IN FEET) \_\_\_\_\_.

7.12 \_\_\_\_\_ = Drowning:

712a How far from shore or safety did you swim?(IN FEET) \_\_\_\_\_.

712b Was the water warm or cold? (1=WARM, 2=COLD) \_\_\_\_\_

712c Can you swim? (0 = NO, 1 = YES) \_\_\_\_\_

7.13 \_\_\_\_\_ = Hitting body:

713a What object did you hit? \_\_\_\_\_  
(1=WALL, 2=FLOOR, 3=WALL AND FLOOR, 4=OTHER 713ao \_\_\_\_\_ 5=FISTS, 6=SINK,  
7=APPLIANCES, 8=HAMMER, 9=FURNITURE, 10=WHIP)

713b How many times did you hit yourself? \_\_\_\_\_.

713c What part of your body was hit? \_\_\_\_\_  
(1=HEAD AGAINST OBJECT, 2=FISTS AGAINST OBJECTS,  
3=FISTS AGAINST HEAD, 4=OTHER 713co \_\_\_\_\_).

713d VERIFICATION BY BRUISE/SWELLING? (0 = No, 1 = Yes)

7.14 \_\_\_\_\_ = Stopped required medical treatments or medications (with direct intent to self-harm):

714a What did you stop doing? \_\_\_\_\_  
(1= STOPPED NEEDED MEDICAL TREATMENTS,  
2= STOPPED MEDICATIONS, 3=OTHER 714ao \_\_\_\_\_).

714b For how long was the treatment/medication stopped (hours)? \_\_\_\_\_

714c What was the treatment for? \_\_\_\_\_

714d What were expected consequences of stopping treatment: \_\_\_\_\_  
\_\_\_\_\_

7.15 \_\_\_\_\_ = Transportation related injury (e.g., drove car off a cliff).

715a describe: \_\_\_\_\_

7.16 \_\_\_\_\_ = Stepped into traffic.

716a describe: \_\_\_\_\_

7.17 = Other: \_\_\_\_\_

08 \_\_\_\_\_ INTERVIEWER: RATE MEDICAL RISK OF DEATH BASED ON METHOD AND ON OTHER SUBSTANCES PRESENT AT TIME

- 1 = Very low. Less than/equal to 5 pills (unless medication potentially lethal in low doses); scratching; reopening partially healed wounds; head banging, swallowing small, non-sharp objects; going underdressed into cold for brief time, lying down at night in the middle of a non-busy road but getting up when a car doesn't come or swimming out to middle of lake and returning upon getting tired. Minor heroin overdose 1.5 times usual dependent dose.
- 2 = Low. Superficial cut on surface or limbs; 6-10 pills (or fewer if medication potentially lethal in low doses); cigarette burn(s), jumping feet first from very low place (less than 10 feet). Heroin overdose 1.5 times usual dependent dose combined with other drugs and/or alcohol.
- 3 = Moderate. Overdose on 11-50 pills or two or more types of pills or 6-10 pills potentially lethal in low doses and combined with alcohol; deep cuts anywhere but neck, swallowing  $\leq 12$  oz shampoo or astringent,  $\leq 2$  oz. lighter fluid, or  $\leq 4$  tbsp. cleaning compounds; igniting flammable substance on limb. Moderate heroin overdose 2 - < 3 times usual dependent dose.
- 4 = High. Overdose with over 50 pills or 11-30 pills potentially lethal in low doses or combined with large amount of alcohol, stabbing to body; pulling trigger of a loaded gun aimed at a limb (arm or leg), swallowing > 2 oz lighter fluid, > 12 oz shampoo or astringent or > 4 tbsp. cleaning compounds, igniting flammable substance on multiple limbs and torso, walking into heavy traffic.  
Heroin overdose 2 - < 3 times usual dependent dose combined with other drugs and/or alcohol.
- 5 = Very high. Overdose with over 30 pills lethal in small doses or combined with large amount of alcohol; poison (unless small amount not potentially lethal); attempted drowning; suffocation; deep cuts to the throat or limbs; jumping from low place (less than 20 feet), igniting flammable substance all over body, electrocution, throwing self in front of or from car going less than 30 miles/hr, strangulation. Serious heroin overdose 3 or more times usual dependent dose.
- 6 = Severe. Pulling trigger of loaded gun aimed at vital area (such as torso or head); Russian roulette, jumping from a high place (more than 20 feet); hanging (feet above the ground); asphyxiation (such as carbon monoxide suffocation); jumping in front of auto going faster than 30 miles/hr or off overpass in rush hour traffic, attempted drowning after ingesting alcohol or other drugs, swallowing nail polish remover, turpentine or similar substances. Serious heroin overdose 3 or more times usual dependent dose combined with other drugs and/or alcohol.

INTENT

09 \_\_\_\_\_ At the time of your self-injury/suicide attempt/overdose, what final outcome did you most intend and expect? (RECORD ANSWER VERBATIM.)

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INTERVIEWER: RATE SUBJECT'S CONSCIOUS INTENT TO CAUSE SELF-INJURY, I.E., DEGREE THAT BEHAVIOR WAS INITIATED AND PERFORMED IN ORDER TO CAUSE SELF-INJURY *OR* IN ORDER TO RISK SELF-INJURY.

- 0 = No bodily or physiological harm intended or expected (e.g., expected to fly from window ledge; habitual substance abuser expected to get high as usual; bulimic expected to purge as usual)
- 1 = Ambivalent intent to cause bodily injury or physiological harm to self and took a chance (e.g., Russian roulette, habitual substance abuser took more than normal amount)
- 2 = Clear expectations of some bodily injury, physiological harm to self (e.g., expected to sleep for a whole weekend, expected skin to be broken, bulimic expected to disrupt electrolyte balance), or death

10 \_\_\_\_\_ Just before or at the time of this self-injury/overdose, were you thinking about suicide or wishing you were dead?

- 0 = Not at all
- 1 = I was wishing I was dead, but the thought of suicide did not go thru my mind
- 2 = The thought of suicide passed thru my mind
- 3 = I briefly considered it, but not seriously
- 4 = I was thinking about it and was somewhat serious
- 5 = I was very serious about dying but was also somewhat ambivalent
- 6 = I was extremely serious, intended to die and was not ambivalent at all

11. Would you say that you injured yourself/attempted suicide/overdosed for any of the reasons on this list and, if so, which ones? (0 = Not mentioned, 1 = Mentioned) **Please Give Card A to client**

- \_\_\_\_1 To stop bad feelings
- \_\_\_\_2 To communicate to or let others know how desperate you were
- \_\_\_\_3 To get help
- \_\_\_\_4 To gain admission into a hospital or treatment program
- \_\_\_\_5 To die
- \_\_\_\_6 To feel something, even if it was pain
- \_\_\_\_7 To punish yourself
- \_\_\_\_8 To get a vacation from having to try so hard
- \_\_\_\_9 To get out of doing something
- \_\_\_\_10 To shock or impress others
- \_\_\_\_11 To prove to yourself that things really were bad
- \_\_\_\_12 To give you something, anything to do
- \_\_\_\_13 To get other people to act differently or change
- \_\_\_\_14 To get back at or hurt someone
- \_\_\_\_15 To make others better off
- \_\_\_\_16 To get away or escape
  - To get away or escape from what? (check all that apply)
  - \_\_\_\_16a. your thoughts and memories
  - \_\_\_\_16b. your feelings
  - \_\_\_\_16c. other people
  - \_\_\_\_16d. yourself
- \_\_\_\_17 To stop feeling numb or dead
- \_\_\_\_18 To prevent being hurt in a worse way
- \_\_\_\_19 To stop feeling angry or frustrated or enraged
- \_\_\_\_20 To demonstrate to others how wrong they are/were
- \_\_\_\_21 To relieve anxiety or terror
- \_\_\_\_22 To distract yourself from other problems
- \_\_\_\_23 To relieve feelings of aloneness, emptiness or isolation
- \_\_\_\_24 To stop feeling self-hatred, shame
- \_\_\_\_25 To express anger or frustration
- \_\_\_\_26 To obtain relief from a terrible state of mind
- \_\_\_\_27 To make others understand how desperate you are
- \_\_\_\_28 To stop feeling sad
- \_\_\_\_29 Other \_\_\_\_\_

12 \_\_\_\_\_ At the time it occurred, did you consider the episode a suicide attempt, even if you did not really intend to die? (0 = No, 1 = Yes).

13 \_\_\_\_\_ Do you now consider that episode a suicide attempt? (0 = No, 1 = Yes).

If Q. 12 & 13 ARE CODED DIFFERENTLY, ASK THE FOLLOWING AND RECORD ANSWER VERBATIM.

What accounts for this change?

13a \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14 \_\_\_\_\_ INTERVIEWER: RATE SUBJECT'S CONSCIOUS EXPECTATION OF FATAL OUTCOME.

0 = No expectation

1 = Uncertain of outcome

2 = Clear expectations of fatal outcome

COMMUNICATION OF SUICIDE INTENT

15 \_\_\_\_\_ At the time or near the time of this episode, did you tell anyone, directly or indirectly, that you were thinking of suicide or that you wished you were dead? (ASSESS IF SUBJECT COMMUNICATED SUICIDE IDEATION: 0=No, 1=Indirect communication, 2=Direct communication.)

15a DESCRIBE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16 \_\_\_\_\_ At the time or near the time of this episode, did you threaten suicide to anyone or do anything that could be or was interpreted by someone else as a threat to harm or kill yourself? (ASSESS IF SUBJECT THREATENED: 0=No, 1=Indirect threat, 2=Direct threat.)

16a DESCRIBE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IMPULSIVITY AND PROBABILITY OF INTERVENTION

17 \_\_\_\_\_ Did you plan your self-injury/suicide attempt/overdose, or was it an impulsive act? (RECORD ANSWER VERBATIM)

17a \_\_\_\_\_  
\_\_\_\_\_

INTERVIEWER: RATE IMPULSIVITY OF ACT.

- 1 = Commitment to act, followed by very careful or elaborate plan carried out over a period of time.
- 2 = Actively planned and/or got implements. Had impulse, resisted for \_\_\_\_\_ days, then acted.
- 3 = Actively planned and/or got implements. Had impulse, resisted for less than 24 hours.
- 4 = No active planning. Had impulse, resisted for \_\_\_\_\_ days, then acted.
- 5 = No active planning. Had impulse, resisted for less than 24 hours, then acted.
- 6 = No active planning. Occurred impulsively, with no forethought and without very strong emotion.
- 7 = No active planning. Occurred impulsively, with no forethought and with very strong emotion.

18 \_\_\_\_\_ At the time or near the time of this episode, did you write a suicide note? (0 = No, 1 = Yes)

19 \_\_\_\_\_ Did you arrange your self-injury/suicide attempt/overdose in such a way that it would be difficult for anyone to find, stop, or save you? (0 = No, 1 = Somewhat, 2 = Yes) Describe the circumstances: (RECORD ANSWER VERBATIM.)

\_\_\_\_\_

20 \_\_\_\_\_ INTERVIEWER: RATE PROBABILITY OF INTERVENTION BASED ON ALL INFORMATION

- 1 = Chance of intervention remote. Act committed by person in a solitary or isolated place without access to telephone (i.e., a wooded area, cemetery, etc.).
- 2 = Improbable intervention. Act committed by person alone, with intervention by a passerby possible although not expected (i.e., in a motel room, an office late at night, at home alone with no one expected).
- 3 = Ambiguous chance of intervention. Act committed by person alone, with no certainty of immediate assistance. However, a reasonable chance for intervention existed (i.e., the victim is aware of the impending arrival of others).
- 4 = Probable intervention. Act committed with another person in the immediate vicinity but not visibly present (such as in the same dwelling/building). Or made phone call but did not directly communicate intention.
- 5 = Certain intervention. Act committed in the presence of another person/made phone call immediately before or after in order to advise of act or to say good-bye.

LEVEL OF MEDICAL TREATMENT

21. Following your self-injury/suicide attempt/overdose were you taken to any of these places or did you turn to any of these places or people for help? (**Give Card B**); 0 = Not contacted, 1 = Contacted).
- \_\_\_\_\_ 1 Physician/nurse (Visit)
  - \_\_\_\_\_ 2 Crisis outreach/after hours team/mental health professional (In person visit)
  - \_\_\_\_\_ 3 Police/wellness check (At home or other residence)
  - \_\_\_\_\_ 4 Paramedics/ambulance/aid car (At home or other residence)
  - \_\_\_\_\_ 5 Hospital emergency room
    - \_\_\_\_\_ 5b 0 = Not medically treated, 1 = Treated
  - \_\_\_\_\_ 6 Inpatient, psychiatric unit
    - \_\_\_\_\_ 6b Number of days (CODE = "0" if 6 = 0)
    - \_\_\_\_\_ 6c Voluntary (1 = Yes; 2 = voluntary but threatened with legal commitment if not agreed to; 3 = legally detained on a 24-48 hr. hold; 4 = 72+ hold)
  - \_\_\_\_\_ 7 Hospital medical floor
    - \_\_\_\_\_ 7b Number of days (CODE = "0" if 7 = 0)
  - \_\_\_\_\_ 8 Intensive care
    - \_\_\_\_\_ 8b Number of days (CODE = "0" if 8 = 0)

- 22 \_\_\_\_\_ What was your physical condition afterward? (RECORD VERBATIM ANSWER.)  
22a \_\_\_\_\_

22b RECORD INFORMATION FROM MEDICAL RECORDS \_\_\_\_\_

INTERVIEWER: RATE PHYSICAL CONDITION FOLLOWING EPISODE

0 = No effect

1 = Very mild effect. *Death impossible.*

(e.g., went to sleep at regular time, woke up ok; slightly queasy or nauseous, but no vomiting; rash type abrasion, bruise; chilled; small non-sharp objects in digestive tract)

2 = Mild effect. *Death is highly improbable; could only occur due to secondary complications or very unusual circumstance.*

(e.g., nauseous; slept significantly more than normal, woke up ok; 1st degree burn; superficial lacerations without tendon, nerve or vessel damage and not requiring sutures; minimal blood loss; larger non-sharp objects in digestive tract)

3 = Moderate effect. *Death is improbable; could only occur due to secondary effects; medical aid is warranted, but not required for survival.*

(e.g., vomiting; slept significantly more than normal, woke up still drowsy; 2nd degree burn; non-septic infection; shallow lacerations on limbs or torso with slight tendon damage requiring sutures; broken digits or limbs; slight to moderate hypothermia or frost bite; slight concussion with no disorientation)

4 = Severe effect. *Death is improbable if first aid or medical attention is administered.*

(e.g., respiratory failure, elevated blood pressure, convulsions or seizures; 3rd degree burn covering 20% or less of body surface; septicemia; deep lacerations on face, limbs or torso with tendon damage or severing and possible nerve, vessel or artery damage; cuts on neck which may require sutures but no major nerves or vessels severed; blood loss less than 100 cc.; bullet in or deep piercing of limbs; severe head injury with decreased orientation; moderate tissue damage; sharp objects in digestive tract; vertebral fracture without cord injury)

5 = Very severe effect. *Death is somewhat probable unless first aid or medical attention is administered.*

(e.g., caustic substance; hypertensive crisis; stroke; 3rd degree burn covering 40% of body surface; severe, deep lacerations on face, limbs or torso with severing of major arteries; blood loss more than 200 cc; loss of eye, ear or digits; bullet or deep piercing in lower torso; severe tissue loss; vertebral fracture with cord injury; mild hypoxia; comatose but still responding to pain)

6 = Extremely severe effect. *Death is highly probable without out immediate and vigorous medical attention, and may occur even with vigorous first aid or medical attention.*

(e.g., 3rd degree burn covering 50% or more of body surface; loss of limb; deep lacerations on neck with major artery damage, i.e., cutting jugular vein; irreparable damage and/or systemic organ failure; gun shot or bullet in chest or head; closed airways, severe hypoxia and/or respiratory arrest; severe hypothermia; cardiac arrest; comatose and not responding to pain)

7 = Lethal effect. *Death occurred.*

23 \_\_\_\_\_ INTERVIEWER: USE ALL APPROPRIATE INFORMATION REGARDING TREATMENT THAT HAS BEEN GATHERED THROUGHOUT INTERVIEW TO CODE HIGHEST APPLICABLE NUMBER FROM LIST BELOW

- 0 = No medical treatment sought/required
- 1 = Went to emergency room or physician, had no medical treatment or assessment and went home (e.g., talked to social worker or resident and left)
- 2 = Went directly to an in-patient psychiatric unit
- 3 = Medically treated while on in-patient psychiatric unit, without going to emergency room
- 4 = Went to emergency room or physician, was medically treated and went home
- 5 = Went to emergency room, was treated and admitted to psychiatry unit
- 6 = While on psychiatric unit, went to emergency room for medical treatment and then returned to psychiatric unit
- 7 = Admitted to medical unit, whether or not via emergency room, for observation (hours to overnight)
- 8 = Admitted to medical unit, whether or not via emergency room, for required treatment
- 9 = Admitted to intensive care unit, whether or not via emergency room or medical floor
- 10 = Mortuary

24 \_\_\_\_\_ INTERVIEWER: RATE SUBJECT'S INTENT TO DIE, I.E., THE SERIOUSNESS OR INTENSITY OF THE WISH TO TERMINATE HIS OR HER OWN LIFE. RATINGS SHOULD REFLECT YOUR BEST ESTIMATE BASED ON ALL INFORMATION.

- 1 = Obviously no intent
- 2 = Only minimal intent
- 3 = Definite intent but very ambivalent
- 4 = Serious intent
- 5 = Extreme intent (careful planning and every expectation of death)

DESCRIBE REASON FOR RATING: 24a \_\_\_\_\_  
\_\_\_\_\_

25 \_\_\_\_\_ INTERVIEWER: BASED ON DEFINITION OF SASII ON APPENDIX, CATEGORIZE BEHAVIOR. CODING SHOULD REFLECT YOUR BEST JUDGMENT BASED ON ALL INFORMATION.

- 1 = Accidental self-harm, without undue risk taking and without unreasonable expectation of safety
- 2 = Accidental self-harm, with undue risk taking or with unreasonable expectation of safety
- 3 = Victim-precipitated self-harm, without intent to be harmed by others but with undue risk taking or with unreasonable expectation of safety
- 4 = "Victim-precipitated" self-harm with intent to be harmed by other
- 9 = OTHER, including absence of a behavior, which results in harm or illness (e.g., stopped taking important medicines such as insulin)
- 5 = Intentional self-injury, but not a suicide attempt
- 6 = Ambivalent suicide attempt
- 7 = Suicide attempt with no ambivalence
- 8 = Suicide attempt that is a "failed suicide", with continued life purely accidental and a near miracle

**Supplemental and experimental questions for the Suicide Attempt Self-Injury Interview**

26. If you had to pick one thing that you think most triggered your self-injury/suicide attempt, what would you say it was? (PROBE FOR MAIN PRECIPITATING EVENT)

\_\_\_\_\_ 26a. Did that happen on the day you injured yourself/attempted suicide? (0=no, 1=yes) \_\_\_\_\_ 26b. IF NO: did that happen right before you felt the urge to injure yourself or attempt suicide? (0=NO, 1=YES)

IF NO TO BOTH: In thinking about the trigger, ask yourself what was it about that particular day and that particular time that was different. What was the "straw that broke the camel's back" that triggered your action or your final decision to act? What was different about the day you harmed yourself from a day or a week before or after? Why did you injure yourself on that particular day, as opposed to the day before or the week before? What specific events, thoughts, or feelings were most important?

27. Did any of the events or experiences on this list happen to you in the 24 hours before your self injury/suicide attempt? **Give Card D** (0 = Not mentioned, 1= Mentioned) ASSESSOR CHECK ALL ITEMS LISTED BY CLIENT.

THINGS THAT HAPPENED IN THE ENVIRONMENT

- \_\_\_\_\_ 1 You had an argument or conflict with another person
- \_\_\_\_\_ 2 You tried to spend time with someone but couldn't
- \_\_\_\_\_ 3 Someone was disappointed with you
- \_\_\_\_\_ 4 Someone was angry with you, criticized you, or put you down
- \_\_\_\_\_ 5 Someone let you down or broke a promise
- \_\_\_\_\_ 6 Someone rejected you
- \_\_\_\_\_ 7 You lost someone important (even if temporary loss)
- \_\_\_\_\_ 8 Therapist went out of town or took a break from having sessions
- \_\_\_\_\_ 9 You were isolated or alone more than you wanted to be
- \_\_\_\_\_ 10 You had financial problems
- \_\_\_\_\_ 11 You lost a job
- \_\_\_\_\_ 12 You had health problems or physical discomfort
- \_\_\_\_\_ 13 You had a new demand 13a \_\_\_\_\_.
- \_\_\_\_\_ 14 You tried to get (or continue) something you wanted but couldn't
- \_\_\_\_\_ 15 You heard of someone else attempting suicide or harming themselves
- \_\_\_\_\_ 16 You saw things that you could use to harm yourself or attempt suicide with
- \_\_\_\_\_ 17 You talked to someone about sexual abuse or rape
- \_\_\_\_\_ 18 You talked with your therapist about sexual abuse or rape
- \_\_\_\_\_ 19 You had a therapy session before your self-injury/suicide attempt (on the same day)
- \_\_\_\_\_ 20 You had a therapy session scheduled for later in the day (after self-injury/suicide attempt)
- \_\_\_\_\_ 21 Other important negative events happened which could have triggered your suicide attempt/self-injury  
21a \_\_\_\_\_

CLIENT'S FEELINGS

- \_\_\_\_\_ 22 Upset, miserable or distressed
- \_\_\_\_\_ 23 Out of control
- \_\_\_\_\_ 24 Anxious, afraid, or panicked
- \_\_\_\_\_ 25 Overwhelmed
- \_\_\_\_\_ 26 Angry, frustrated or enraged  
unspecified
- \_\_\_\_\_ 27 Angry, frustrated or enraged at  
someone else
- \_\_\_\_\_ 28 Angry frustrated or enraged at  
yourself
- \_\_\_\_\_ 29 Self-hatred or shame, or thought you were  
"bad"
- \_\_\_\_\_ 30 Like you deserved to be punished or hurt
- \_\_\_\_\_ 31 Like a failure or inferior
- \_\_\_\_\_ 32 Like a burden to others
- \_\_\_\_\_ 33 Felt bad about yourself
- \_\_\_\_\_ 34 Guilty
- \_\_\_\_\_ 35 Sad or disappointed
- \_\_\_\_\_ 36 Depressed
- \_\_\_\_\_ 37 Tired or exhausted
- \_\_\_\_\_ 38 Lonely, isolated, or abandoned
- \_\_\_\_\_ 39 Trapped or helpless
- \_\_\_\_\_ 40 Discouraged or hopeless
- \_\_\_\_\_ 41 Confused
- \_\_\_\_\_ 42 Emotionally empty or numb

CLIENT'S THOUGHTS

- \_\_\_\_\_ 43 About sexual abuse or rape
- \_\_\_\_\_ 44 About physical abuse or assault
- \_\_\_\_\_ 45 Had flashbacks or nightmares

28. During the 24 hours before your self-injury/suicide attempt/overdose, did you:
- \_\_\_\_1 Drink alcohol? (0 = No, 1 = Yes)
    - \_\_\_\_1b. How much did you drink? (CODE SEC's)
    - \_\_\_\_1c. How many hours were you drinking?
    - \_\_\_\_1d. How long before your self-injury did you stop drinking? (CODE HOURS; CODE = "0" IF DRANK IMMEDIATELY PRIOR TO INJURY)
  - \_\_\_\_2 Take illegal drugs or more than the prescribed amount of medications?
    - \_\_\_\_2a. How many different drugs did you use?
    - \_\_\_\_2b. What did you use?
    - \_\_\_\_2c. How much did you use?
    - \_\_\_\_2d. How long before your self-injury did you take the drugs/medications? (CODE HOURS; CODE = "0" IF USED IMMEDIATELY PRIOR TO INJURY)
    - \_\_\_\_2e. What did you use?
    - \_\_\_\_2f. How much did you use?
    - \_\_\_\_2g. How long before your self-injury did you take the drugs/medications? (CODE HOURS; CODE = "0" IF USED IMMEDIATELY PRIOR TO INJURY)
    - \_\_\_\_2h. What did you use?
    - \_\_\_\_2i. How much did you use?
    - \_\_\_\_2j. How long before your self-injury did you take the drugs/medications? (CODE HOURS; CODE = "0" IF USED IMMEDIATELY PRIOR TO INJURY)
    - \_\_\_\_2k. List any additional ones used. \_\_\_\_\_
  - \_\_\_\_3 Sleep worse than you usually do?
  - \_\_\_\_4 Ask someone for help?
    - \_\_\_\_4b Did you get the help you asked for?
  - \_\_\_\_5 Eat a lot more food than you usually do (i.e., binge eating)?
  - \_\_\_\_6 Engage in illegal behavior (other than using drugs)?
- 29 \_\_\_\_\_ Were you feeling disconnected from your feelings or as if you were unreal during or prior to your self-injury/suicide attempt/overdose? (0 = No, 1 = Yes).
- 30 \_\_\_\_\_ Did this state of being disconnected or unreal begin after you decided to self-injury/suicide attempt/overdose? (0 = No, began before, 1 = Maybe, 2 = Yes, began after, -8 = No dissociation).
- 31 \_\_\_\_\_ Were you hearing voices that were telling you to harm yourself during or prior to your self-injury/suicide attempt/overdose? (0 = No, 1 = Yes).
- 32 \_\_\_\_\_ Did you feel physical pain during your self-injury/suicide attempt/overdose? IF YES: How much pain did you feel on a scale of 1 to 5 with 1=little pain but mostly none and 5=extreme pain. (Score 0=none or number 1-5).
33. Following your self-injury/suicide attempt/overdose were you taken to any of these places or did you turn to any of these places or people for help? (*Give Card C and code in the order that Subject contacted each*) 0 = Not contacted, 1 = Contacted first, 2 = Contacted 2nd, etc.).
- \_\_\_\_1 Relative
  - \_\_\_\_2 Friend
  - \_\_\_\_3 Supervisor/teacher
  - \_\_\_\_4 Co-worker/other student
  - \_\_\_\_5 Stranger, neighbor
  - \_\_\_\_6 Crisis service/after hours team. (By phone)
  - \_\_\_\_7 Psychotherapist (By phone)
  - \_\_\_\_8 Physician/nurse (By phone)
  - \_\_\_\_9 Psychotherapist (Extra visit)
  - \_\_\_\_10 Other 10a \_\_\_\_\_
34. How helpful were each of the people/agencies with whom you had contact? Please rate on a scale of 1 to 5 with 1 = they made things worse to 5 = they made things much better.
- |                               |  |
|-------------------------------|--|
| ____1 Relative                | ____6 Crisis service/ after hours team. (By phone) |
| ____2 Friend                  | ____7 Psychotherapist (By phone)                   |
| ____3 Supervisor/teacher      | ____8 Physician/nurse (By phone)                   |
| ____4 Co-worker/other student | ____9 Psychotherapist (Extra visit)                |
| ____5 Stranger, neighbor      | ____10 Other 10a _____                             |

(For those items answered with a number in question #21, ask the above question. Code = "-8" if person/agency was coded "0" in #21)

- \_\_\_\_1 Physician/nurse (Visit)
- \_\_\_\_2 Crisis outreach/after hours team/mental health professional (In person visit)
- \_\_\_\_3 Police/wellness check (At home or other residence)
- \_\_\_\_4 Paramedics/ambulance/aid car (At home or other residence)
- \_\_\_\_5 Hospital emergency room
- \_\_\_\_6 Inpatient, psychiatric unit
- \_\_\_\_7 Hospital medical floor
- \_\_\_\_8 Intensive care

- 35 \_\_\_\_\_ Did your self-injury/suicide attempt/overdose have any of the following consequences on your job? (CODE "-8" IF SUBJECT UNEMPLOYED)
- 1 = Strongly improved my job performance by causing me to work more, be more focused, etc.
  - 2 = Slightly improved my job performance
  - 3 = No effect or overall neutral effect
  - 4 = Impaired my job performance
  - 5 = Reprimanded/demoted
  - 6 = Lost job
- 36 \_\_\_\_\_ How many work days did you miss because of your self-injury? (CODE = "-8" IF SUBJECT UNEMPLOYED)
- 37 \_\_\_\_\_ Did your self-injury/suicide attempt/overdose have any of the following consequences on your school work? (CODE = "-8" IF SUBJECT NOT ENROLLED)
- 1 = Strongly improved my school performance by causing me to study more, be more focused, etc.
  - 2 = Slightly improved my school performance
  - 3 = No effect or overall neutral effect
  - 4 = Impaired my school performance
  - 5 = Dropped a class(es) / Failed a class(es)
  - 6 = Expelled
- 38 \_\_\_\_\_ How many days did you miss because of your self-injury? (CODE = "-8" IF SUBJECT NOT ENROLLED)
- 39 \_\_\_\_\_ Did your self-injury/suicide attempt/overdose have any of the following consequences on your housing situation?
- 1 = Strongly improved living situation by making roommates/family with whom you live more understanding, reducing housework, etc.
  - 2 = Slightly improved living situation
  - 3 = No effect or overall neutral effect
  - 4 = Housemates/neighbors upset / Restrictions placed on me
  - 6 = Neighbors called the authorities to complain / Threatened with an eviction
  - 7 = Evicted
- 40 \_\_\_\_\_ Did your self-injury/suicide attempt/overdose have any of the following consequences on your financial situation?
- 1 = Significantly improved my financial situation by causing others to give me money, reduce my debt, etc.
  - 2 = Slightly improved my financial situation
  - 3 = No effect or overall neutral effect
  - 4 = Costs paid for by insurance or other third party or paid less than \$100 out of pocket
  - 5 = Paid costs out of pocket of more than \$100
  - 6 = Bankrupt
- 41 \_\_\_\_\_ Did your self-injury/suicide attempt/overdose have any of the following consequences on your relationships with people that you care about?
- 1 = Much closer, much more contact
  - 2 = Somewhat closer or somewhat more contact
  - 3 = No effect or overall neutral effect
  - 4 = Somewhat more distant or strained or somewhat less contact
  - 5 = More distant or strained or less contact
  - 6 = Relationship(s) ended

42 \_\_\_\_\_ Did any of the events or experiences on this list happen immediately following your self-harming/suicidal incident? **Give Card E.** If so please give a rating for each question on the following 1-5 scale: 1 = "Not true at all/ did not happen at all," to 5 = "Very true/ happened a lot".

- \_\_\_\_ 1. Bad feelings stopped
- \_\_\_\_ 2. Others understood how desperate you are/were
- \_\_\_\_ 3. You got help
- \_\_\_\_ 4. You gained admission into a hospital or treatment program
- \_\_\_\_ 5. You felt something, even if it was pain
- \_\_\_\_ 6. You felt punished or succeeded in punishing yourself
- \_\_\_\_ 7. You got a vacation from having to try so hard
- \_\_\_\_ 8. You got out of doing something
- \_\_\_\_ 9. You shocked or impressed others
- \_\_\_\_ 10. You proved to yourself that things really were bad
- \_\_\_\_ 11. It gave you something, anything to do
- \_\_\_\_ 12. Other people treated you better
- \_\_\_\_ 13. You got back at or hurt someone
- \_\_\_\_ 14. Other people were better off than before you harmed yourself
- \_\_\_\_ 15. You got away or escaped
- \_\_\_\_ 16. You stopped feeling numb or dead
- \_\_\_\_ 17. You prevented yourself from being hurt in a worse way
- \_\_\_\_ 18. Feelings of anger, frustration, or rage stopped
- \_\_\_\_ 19. Others realized how wrong they are/were
- \_\_\_\_ 20. Feelings of anxiety or terror stopped
- \_\_\_\_ 21. You were distracted from other problems
- \_\_\_\_ 22. Feelings of aloneness, emptiness, or isolation stopped
- \_\_\_\_ 23. Feelings of self-hatred/shame stopped
- \_\_\_\_ 24. Your (self-injury/suicide attempt/overdose) expressed your anger or frustration
- \_\_\_\_ 25. You experienced relief from a terrible state of mind
- \_\_\_\_ 26. Feelings of sadness stopped
- \_\_\_\_ 27. You stopped feeling empty inside, as if you were unreal, or disconnected from your feelings
- \_\_\_\_ 28. Feelings of depression stopped
- \_\_\_\_ 29. You felt worse about yourself or felt more self-hatred/shame
- \_\_\_\_ 30. Other \_\_\_\_\_

## Appendices

### **SASII Card A** (Question #11)

Would you say that you injured yourself/attempted suicide for any of the reasons on this list and, if so, which ones?

1. To stop bad feelings
2. To communicate to or let others know how desperate I was
3. To get help
4. To gain admission into a hospital or treatment program
5. To die
6. To feel something, even if it was pain
7. To punish myself
8. To get a vacation from having to try so hard
9. To get out of doing something
10. To shock or impress others
11. To prove to myself that things really were bad
12. To give me something, anything to do
13. To get other people to act differently or change
14. To get back at or hurt someone
15. To make others better off
16. To get away or escape
  - To get away or escape from what? (tell assessor all that apply)
  - 16a. my thoughts and memories
  - 16b. my feelings
  - 16c. other people
  - 16d. myself
17. To stop feeling numb or dead
18. To prevent being hurt in a worse way
19. To stop feeling angry or frustrated or enraged
20. To demonstrate to others how wrong they are/were
21. To relieve anxiety or terror
22. To distract myself from other problems
23. To relieve feelings of aloneness, emptiness or isolation
24. To stop feeling self-hatred, shame
25. To express anger or frustration
26. To obtain relief from a terrible state of mind
27. To make others understand how desperate I am
28. To stop feeling sad
29. Other \_\_\_\_\_

**SASII CARD B**

(Question #21)

Following your self-injury/suicide attempt/overdose were you taken to any of these places or did you turn to any of these places or people for help?

1. Physician/nurse (Visit)
2. Crisis outreach/after hours team/mental health professional (In person visit)
3. Police/wellness check (At home or other residence)
4. Paramedics/ambulance/aid car (At home or other residence)
5. Hospital emergency room
6. Inpatient, psychiatric unit
7. Hospital medical floor
8. Intensive care

**SASII CARD C**

(Question # 33)

Following your self-injury/suicide attempt/overdose were you taken to any of these places or did you turn to any of these places or people for help?

1. Relative
2. Friend
3. Supervisor/teacher
4. Co-worker/other student
5. Stranger, neighbor
6. Crisis service/after hours team (by phone).
7. Psychotherapist (by phone)
8. Physician/nurse (by phone)
9. Psychotherapist (extra visit)
10. Other \_\_\_\_\_

**SASII**  
**CARD D**  
(Question #27)

Did any of the events or experiences on this list happen to you in the 24 hours before your self injury/suicide attempt?

**THINGS THAT HAPPENED IN THE ENVIRONMENT**

1. I had an argument or conflict with another person
2. I tried to spend time with someone but couldn't
3. Someone was disappointed with me
4. Someone was angry with me, criticized me, or put me down
5. Someone let me down or broke a promise
6. Someone rejected me
7. I lost someone important (even if temporary loss)
8. Therapist went out of town or took a break from having sessions
9. I was isolated or alone more than I wanted to be
10. I had financial problems
11. I lost a job
12. I had health problems or physical discomfort
13. I had a new demand
14. I tried to get (or continue) something I wanted but couldn't
15. I heard of someone else attempting suicide or harming themselves
16. I saw things that I could use to harm myself or attempt suicide with
17. I talked to someone about sexual abuse or rape
18. I talked with my therapist about sexual abuse or rape
19. I had a therapy session before my self-injury/suicide attempt (on the same day)
20. I had a therapy session scheduled for later in the day (after self-injury/suicide attempt)
21. Other important negative events happened which could have triggered my self injury/ suicide attempt

**FEELINGS**

- |  |                                     |
|--|-------------------------------------|
| 22. Upset, miserable or distressed               | 35. Sad or disappointed             |
| 23. Out of control                               | 36. Depressed                       |
| 24. Anxious, afraid, or panicked                 | 37. Tired or exhausted              |
| 25. Overwhelmed                                  | 38. Lonely, isolated, or abandoned  |
| 26. Angry, frustrated or enraged unspecified     | 39. Trapped or helpless             |
| 27. Angry, frustrated or enraged at someone else | 40. Discouraged or hopeless         |
| 28. Angry frustrated or enraged at myself        | 41. Confused                        |
| 29. Self-hatred or shame, or thought I was "bad" | 42. Emotionally empty or numb       |
| 30. Like I deserved to be punished or hurt       |                                     |
| 31. Like a failure or inferior                   | <b>THOUGHTS</b>                     |
| 32. Like a burden to others                      | 43. About sexual abuse or rape      |
| 33. Felt bad about myself                        | 44. About physical abuse or assault |
| 34. Guilty                                       | 45. Had flashbacks or nightmares    |

**SASII CARD E**

(Question #42)

Did any of the events or experiences on this list happen immediately following your self-harming/suicidal incident? If so please give a rating for each question on the following 1-5 scale:  
1 = "Not true at all/ did not happen at all," to 5 = "Very true/ happened a lot".

1. Bad feelings stopped
2. Others understood how desperate I am/was
3. I got help
4. I gained admission into a hospital or treatment program
5. I felt something, even if it was pain
6. I felt punished or succeeded in punishing myself
7. I got a vacation from having to try so hard
8. I got out of doing something (PH2909)
9. I shocked or impressed others (PH2910)
10. I proved to myself that things really were bad
11. It gave me something, anything to do (PH2912)
12. Other people treated me better
13. I got back at or hurt someone
14. Other people were better off than before I harmed myself
15. I got away or escaped
16. I stopped feeling numb or dead
17. I prevented myself from being hurt in a worse way
18. Feelings of anger, frustration, or rage stopped
19. Others realized how wrong they are/were
20. Feelings of anxiety or terror stopped
21. I was distracted from other problems
22. Feelings of aloneness, emptiness, or isolation stopped
23. Feelings of self-hatred/shame stopped
24. My (self-injury/suicide attempt/overdose) expressed my anger or frustration
25. I experienced relief from a terrible state of mind
26. Feelings of sadness stopped
27. I stopped feeling empty inside, as if I was unreal, or disconnected from my feelings
28. Feelings of depression stopped
29. I felt worse about myself or felt more self-hatred/shame
30. Other \_\_\_\_\_