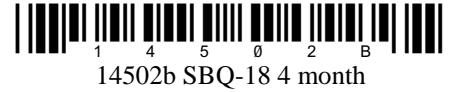


Data Entry Initials: \_\_\_\_\_  
Date: \_\_\_\_\_  
Second Entry: \_\_\_\_\_  
Date: \_\_\_\_\_

Subject ID #: \_\_\_\_\_  
Date: \_\_\_\_\_  
Assessment: \_\_\_\_\_ Session: \_\_\_\_\_



**UNIVERSITY OF WASHINGTON  
BEHAVIORAL RESEARCH & THERAPY CLINICS**

**INSTRUCTIONS:** Please answer every item with the number that applies to you. Please put only ONE number per space. **DO NOT** leave any empty spaces. If you have any questions, please ask.

Your last assessment was on \_\_\_\_\_, \_\_\_\_\_ months ago.  
month day year

1. Have you thought about or attempted to kill yourself since your last assessment? \_\_\_\_\_  
 0 = No  
 1 = It was just a passing thought.  
 2 = I briefly considered it, but not seriously.  
 3 = I thought about it and was somewhat serious.  
 4 = I had a plan for killing myself which I though would work and seriously considered it.  
 5 = I attempted to kill myself, but I do not think I really meant to die.  
 6 = I attempted to kill myself, and I think I really hoped to die.

***How often have you thought about killing yourself...***

0 = Not at all    1 = Rarely    2 = Sometimes    3 = Often    4 = Very often

2. Since your last assessment (including immediately afterwards)? (If 0, go to questions #5-7) \_\_\_\_\_
3. if *yes*, within the last 4 weeks? (If 0, go to questions #5-7) \_\_\_\_\_
4. if *yes*, in the last several days, including today? (If 0, go to questions #5-7) \_\_\_\_\_

***Have you ever told someone that you were going to commit suicide, or that you might do it ...***

0 = No                      1 = Yes, during one short period of time.                      2 = Yes, during more than one period of time.

5. Since your last assessment (including immediately afterwards)? (If 0, go to questions #8) \_\_\_\_\_
6. if *yes*, within the last 4 weeks? (If 0, go to questions #8) \_\_\_\_\_
7. if *yes*, in the last several days, including today? (If 0, go to questions #8) \_\_\_\_\_
8. Since your last assessment, have you attempted suicide or intentionally harmed or injured yourself? \_\_\_\_\_  
(0 = No, 1 = Yes)

***What chance is there that you will consider the possibility, no matter how remote, of killing yourself ...***

- |                  |   |             |   |             |  |
|------------------|---|-------------|---|-------------|--|
| 0                | 1 | 2           | 3 | 4           |  |
| No chance at all |   | Some chance |   | Very likely |  |
9. in your lifetime? (If 0, go to questions #14-18). \_\_\_\_\_
10. within the next year? (If 0, go to questions #14-18). \_\_\_\_\_
11. within the next 4 months? (If 0, go to questions #14-18). \_\_\_\_\_
12. within the next 4 weeks? (If 0, go to questions #14-18). \_\_\_\_\_
13. today or in the next several days? (If 0, go to questions 14-18). \_\_\_\_\_

***How likely is it that you will attempt suicide ...***

- |                  |   |             |   |             |  |
|------------------|---|-------------|---|-------------|--|
| 0                | 1 | 2           | 3 | 4           |  |
| No chance at all |   | Some chance |   | Very likely |  |
14. in your lifetime? (If 0, go to questions #19-23). \_\_\_\_\_
15. within the next year? (If 0, go to questions #19-23). \_\_\_\_\_
16. within the next 4 months? (If 0, go to questions #19-23). \_\_\_\_\_
17. within the next month 4 weeks? (If 0, go to questions #19-23). \_\_\_\_\_
18. today or in the next several days? (If 0, go to questions #19-23). \_\_\_\_\_

***If you did attempt suicide, for any reason, how likely is it that you would die as a result ...***

- |                  |   |             |   |             |  |
|------------------|---|-------------|---|-------------|--|
| 0                | 1 | 2           | 3 | 4           |  |
| No chance at all |   | Some chance |   | Very likely |  |
19. in your lifetime? (If 0, go to question #24). \_\_\_\_\_
20. within the next year? (If 0, go to question #24). \_\_\_\_\_
21. within the next 4 months? (If 0, go to question #24). \_\_\_\_\_
22. within the next 4 weeks? (If 0, go to question #24). \_\_\_\_\_
23. today or in the next several days? (If 0, go to question #24). \_\_\_\_\_

24. Do you currently have a plan for how you would go about killing yourself, if you decided to do it?

0 = No

1 = Yes, a vague plan

2 = Yes, a definite plan

25. Sometimes people who decide to kill themselves want to do it but can't find a way to actually carry through with their plan because the means are not available to them. If you decided to kill yourself at this point in your life, would the means for carrying out such an action be available to you?

0 = No

1 = Yes, possibly

2 = Yes, definitely

26. If you decided to kill yourself at this point in your life, is there someone in your environment who would want to stop you?

0 = No

1 = Yes, to a small degree

2 = Yes, very much so

27. Some individuals say they cannot even imagine or conceive of the idea of attempting or committing suicide. For these people, suicidal behavior is as alien as the thought of becoming a tree or lifting the Empire State Building. Other people, even though they might never actually consider the idea, can at least imagine the idea of attempting or considering suicide. Which group of people do you belong to?

0 = Group who definitely  
can't imagine1 = Group who can somewhat  
imagine2 = Group who can definitely  
imagine

28. Would any of your problems be solved if you committed suicide?

0  
No, definitely not

1

2  
Maybe

3

4  
Yes, definitely

29. Thinking about the way your life is today, that is, given the good things in your life now and any problems you might be having, IF you knew the QUALITY of your life would never change, that is, it would never get better or worse, do you feel that suicide would be a good way out?

0  
No, definitely not

1

2  
Maybe

3

4  
Yes, definitely

30. If the QUALITY of your life were to get worse (very bad), do you feel that attempting suicide would solve any of your problems?

0  
No, definitely not

1

2  
Maybe

3

4  
Yes, definitely