TITLE: Rapid Assessment of Suicide Risk in Facilities Lacking Services for Immediate Psychiatric Consultation: Clinical Evidence and Guidelines for Use

DATE: 08 October 2008

RESEARCH QUESTIONS:

1. What tools are available for rapid assessment of suicide risk in mental health patients unable to receive immediate psychiatric consultation in regional or rural/remote healthcare facilities?

2. What is the clinical effectiveness of rapid assessment tools for suicide risk in mental health patients unable to receive immediate psychiatric consultation in regional or rural/remote healthcare facilities?

3. What are the guidelines regarding assessment of suicide risk including how to manage patients deemed to be high risk?

METHODS:

A limited literature search was conducted on key health technology assessment resources, including PubMed, the Cochrane Library (Issue 3, 2008), University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, EuroScan, international health technology agencies, and a focused Internet search. Results include articles published between 2003 and September 2008, and are limited to English language publications only. No filters were applied to limit the retrieval by study type for Questions 1-2, but a guideline filter was applied to limit the retrieval for Question 3. Internet links are provided, where available.

RESULTS:

HTIS reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials (RCTs), controlled clinical trials, observational studies, and evidence-based guidelines.

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Thirteen observational studies and nine evidence-based guidelines were identified pertaining to the rapid assessment of suicide risk in mental health patients. No relevant health technology assessments, systematic reviews, RCTs, or controlled clinical trials were identified. Additional information that may be of interest has been included in the appendix.

**Health technology assessments**
No literature identified.

**Systematic reviews and meta-analyses**
No literature identified.

**Randomized controlled trials**
No literature identified.

**Controlled clinical trials**
No literature identified.

**Observational studies**


Guidelines and recommendations


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APPENDIX – FURTHER INFORMATION:

Observational studies


Review articles


Additional references


