The emergency department (ED) is the frontline of medicine and the initial point of contact in the medical system for people in distress – including those who have attempted suicide. The ED assists people who have attempted suicide to begin the recovery process.

After an Attempt: A Guide for Medical Providers in the Emergency Department

Helpful Tips in the Emergency Department
Medical and psychological assessments as well as suicide prevention and safety plans are key in treating an individual who has attempted suicide. Communicating with others who have information about a patient’s history, can also provide insight when assessing the patient’s situation. Any communication about a patient’s protected health information must be in accordance with the Federal patient privacy standards (HIPAA).

Communicating with Other Medical Professionals
Consult with the individual’s inpatient/outpatient provider(s) to ensure continuity of care and to allow for decision making with the individual and their treatment team. Informing the patient about the institution’s privacy practices, HIPAA allows you to share information about the patient with other medical providers who are involved in their care.

Patient Discharge from the Emergency Department
A well-conceived discharge plan will go a long way in helping individuals recover. Before leaving the ED, it is recommended that the patient and their family should have: an understanding of discharge arrangements, a written statement with information about prescribed medication(s) and treatment plans, key contacts including outpatient providers, and specific instructions about signs, symptoms, or conditions that require a return.

After an Attempt: A Guide for Family Members after Treatment in the Emergency Department

What the Emergency Department Needs to Know and How You Can Help
Family members are a source of history and are often key to the discharge plan. Provide as much information as possible to the emergency department staff. You can offer information that may influence the decisions made for your relative. Important information to share with the emergency department staff includes: family history regarding suicide, a list of medications and other forms of treatment, and if the individual has an advanced directive.

Next Steps After the Emergency Department
Once the physical and mental health of the individual is examined, the ED staff will determine if they need to be hospitalized (voluntarily or involuntarily).

What You Need to Know
Make safety a priority for your relative after the suicide attempt. As a family member, you can help keep your loved one safe by: reducing the risk at home through removing lethal means, creating a safety plan, maintaining hope and self-care. Means restriction resources for family members include:

- Highlight that removing means from the home is always the best option
- Set a safety plan
- If removing means form the home is not an option, lock boxes with a key can be used to store hand guns, medications, and sharp objects (Master Lock 7148D Locking Steel Security File Box is recommendation – available on amazon)
- Cable gun lock with a key – cable threads through the gun and is locked
- A key is always better than a lock box with a code
- Take the gun apart and store it in different lock boxes

Moving Forward
ED care is short-time and crisis orientated, but longer-term interventions have been shown to reduce suicidal behavior and thoughts. Multiple types of interventions may be beneficial.

After an Attempt: A Guide for Yourself after Treatment in the Emergency Department

After the Emergency Department Visit
After you have been treated for a suicide attempt in an ED, you will either be discharged or hospitalized. If you are discharged, the ED staff will provide you with a plan for follow-up care. If the ED staff believes you need immediate or long-term care you will be referred for inpatient hospitalization.

If You Don’t Want to Visit the Hospital
Individuals have the right to refuse treatment. However, if the ED staff believes that you are a danger to yourself or others, the staff will consider involuntary hospitalization for a limited amount of time. The laws regarding commitment vary by state (Minnesota 144.651 Health Care Bill of Rights).

Moving Forward and Coping with Suicidal Thoughts in the Future
Recovering from the negative thoughts and feelings is possible. There are various treatments available and that work. There are several things you can do after leaving the ED. A few of these include: create a safety plan, build a support system, build self-coping strategies, and understand your road to recovery. It is important to remember that recovery is possible.

Resources for Medical Providers, Family Members and Survivors:

American Foundation for Suicide Prevention:
Firearms and Suicide Prevention – American Foundation for Suicide Prevention
Survivor Outreach Program – American Foundation for Suicide Prevention
Book and Film Recommendations – American Foundation for Suicide Prevention

Sources:
- American Foundation for Suicide Prevention: https://afsp.org
- Substance Abuse and Mental Health Services Administration: https://www.samhsa.gov
- Minnesota Statutes/Healthcare Bill of Rights: https://www.revisor.mn.gov/statutes/cite/144.651
- February 2010