

# The Role for Suicide Risk Assessment Screening in the Pediatric Orthopedic Clinic

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**INTRODUCTION:** Suicide is the second leading cause of death for youth 12-18 years of age. Suicidal ideation can be predictive of suicide attempts and other self-harming behaviors, so identification of those at risk can help facilitate early interventions. This study evaluates the use of a PSS-3 Suicide Risk Screener (SRA), given to patients presenting to a specialty pediatric orthopedic clinic (SCC), to identify suicide risk and interventions performed for these patients.

**METHODS:** We conducted a retrospective cohort study using data from the SRA screens and patient demographics from the 1920 patients that presented to the SCC in 2022. Every patient that enters the clinic is given a SRA to complete. We determined the frequency of positive screens, negative screens, and incomplete screens and the demographics of the patients in the positive group. We also determined the frequencies of the interventions performed for patients that did have a positive screen.

**RESULTS:** Of the 1920 patients that presented in the SCC in 2022, 319 patients had an incomplete screen and were excluded from the analysis. One patient was incorrectly coded to have a positive screen in the SCC clinic and was excluded. Of the 1600 patients that had a complete screen, 3% (48) had a positive SRA screen. Of the patients with a positive screen, the mean age was 13.6 (1.27), 54.2% (26) female, and 89.8% (43) had public insurance. Of those with a positive screen, 42% (20) met with a social worker and got mental health resources, 23% (11) met with a social worker and were admitted to an inpatient facility, and 35% (17) received no intervention. Notably, 1 in every 34 patients that completed the SRA screened positive.

**DISCUSSION AND CONCLUSION:** The addition of the PSS-3 Suicide Risk Screener in this pediatric orthopedic clinic screened 83% of patients presenting to clinic and found a 3% positivity rate for patients that completed the screen. In 2022, 1 in every 180 patients that visited the SCC were admitted to an inpatient facility for suicidality. The implementation of a suicide risk assessment was able to identify and assess need for intervention in patients originally presenting for musculoskeletal complaints that may not have been identified or referred to appropriate treatment. There is a role for suicide risk screening in pediatric orthopedic clinics.

Demographics of all patients who completed the SRA screening tool		
Characteristics	Total Positive	Total Negative
Number of Patients	48	1552
Mean age (y)	13.6 (1.27)	14.0 (1.72)
Mode age (y)	14	12
Sex (%)		
Male	22 (45.8)	971 (62.6)
Female	26 (54.2)	581 (37.4)
Insurance Status (%)		
Private	3 (6.1)	85 (5.5)
Public	43 (89.8)	1382 (89.0)
Uninsured	2 (4.1)	85 (5.5)

