Suicidality Question Review

A. Suicidality Question Review

1

Date that the subject's answers to the PSPS-Q form questions 57 through 59 were reviewed
(Wanting to die, Thinking of suicide, Suicide attempt):

☐ ☐ ☐
Month Day Year

#	Field Name	Lookup Set	Type	Length	Range Checks
1	SQReviewDate		DATETIME		No range checks

2

Was action required?
○ --
○ No
○ Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	SQActionRequired	*Name:* YesNo *SASFmt:* YesNo 	Val	Text	Culture Suppression
---	---	---
-1	--	
0	No	
1	Yes			SMALLINT		No range checks

3

If Yes, was appropriate action taken according to your site"s Clinical Standard Operating Procedure?
○ --
○ No
○ Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	SQActionTaken	*Name:* YesNo *SASFmt:* YesNo	SMALLINT		No range checks

Val	Text	Culture Suppression
-1	--	
0	No	
1	Yes	

4 If No, specify:

#	Field Name	Lookup Set	Type	Length	Range Checks
1	SQActionNo		NVARCHAR	500	No range checks

B. Questionnaire Complete

B1 Questionnaire Complete
- ○ --
- ○ Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	CenterComplete	*Name:* QuestComp *SASFmt:* QuestComp Val / Text / Culture Suppression -1 / -- / 1 / Yes /	SMALLINT		No range checks