



Lethal Means Counseling in Hospital Emergency Departments

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A recent survey of discharge practices and protocols in hospital-based emergency departments revealed serious gaps in the provision of lethal means counseling. This suggests that there is a need for emergency department discharge counseling protocols to improve the care of patients with suicide risk.

In 2015 and 2016, nurse managers from 149 hospital-based emergency departments in eight Mountain States completed a telephone survey of their discharge counseling practices and written protocols. While most nurse managers reported that their discharge counseling addressed the presence of firearms (80%), fewer addressed access to alcohol in the home (68%) and the safe storage of medication (65%). Only slightly more than half (52%) said that they addressed all three. Less than one third of nurse managers (31%) indicated that the safe storage of firearms is addressed at discharge with “all suicidal patients, even if they don’t tell a provider about having or thinking about using a firearm for suicide.” Less than half (46%) reported that their emergency departments had written standard practice protocols for safety planning.

The authors noted that no single lethal means counseling protocol has been tested. They recommended that emergency department providers access SPRC’s [consensus guide](#) [1] on caring for adult patients with suicide risk and [online training](#) [2] on lethal means counseling.

Runyan, C. W., Brooks-Russell, A., Tung, G., Brandspigel, S., Betz, M. E., Novins, D. K., & Agans, R. (2017). Hospital emergency department lethal means counseling for suicidal patients. *American Journal of Preventive Medicine*. Advance online publication. <https://doi.org/10.1016/j.amepre.2017.10.023> [3]

Links within this resource

[1] <http://www.sprc.org/edguide>

[2] <https://training.sprc.org/enrol/index.php?id=3>

[3] <https://doi.org/10.1016/j.amepre.2017.10.023>

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