

For Pediatric Primary Care Providers: Addressing the Rising Suicide Rates Among Children and Adolescents

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Pediatric suicides have reached crisis levels, particularly among [youths aged 10 to 24, who account for 15% of all suicides](#), according to the most recent data from the Centers for Disease Control and Prevention (CDC). Suicide stands as [the second leading cause of death](#) in this demographic. Studies indicate that many individuals who die by suicide have visited general medical settings prior to their deaths. Despite these alarming statistics, pediatric primary care providers often express insufficient confidence and training in suicide prevention strategies. Thus, it is imperative that pediatric providers become integral in preventing youth suicides.

Concert Health and Northeast Pediatrics have pioneered suicide safer care pathways tailored for pediatric settings, offering structured guidance to assist healthcare providers in mitigating adolescent suicide risk factors.



| ICD-10-CM Diagnosis Codes | |
|---------------------------|---------------------------------------|
| T14.91 | Suicide attempt |
| R45.851 | Homicidal and suicidal ideations |
| Z91.5 | Personal history of self-harm |
| Z91.51 | Personal history of suicidal behavior |

Key Components of Suicide Safer Care Pathways



1. **Identification:** Training all healthcare staff comprehensively is crucial to enhance their comfort levels in addressing suicide risk. Tools such as the [Ask Suicide-Screening Questions \(ASQ\)](#) and the [Columbia-Suicide Severity Rating Scale \(C-SSRS\)](#) aid in stratifying suicide risk factors and conducting clinical assessment for pediatric patients.



2. **Problem List Integration:** Formal integration of suicide-related diagnosis codes into electronic health records (EHRs) is essential. This practice ensures that suicide risk remains a priority, facilitates normalized discussions, and enables systematic data monitoring across vulnerable populations.



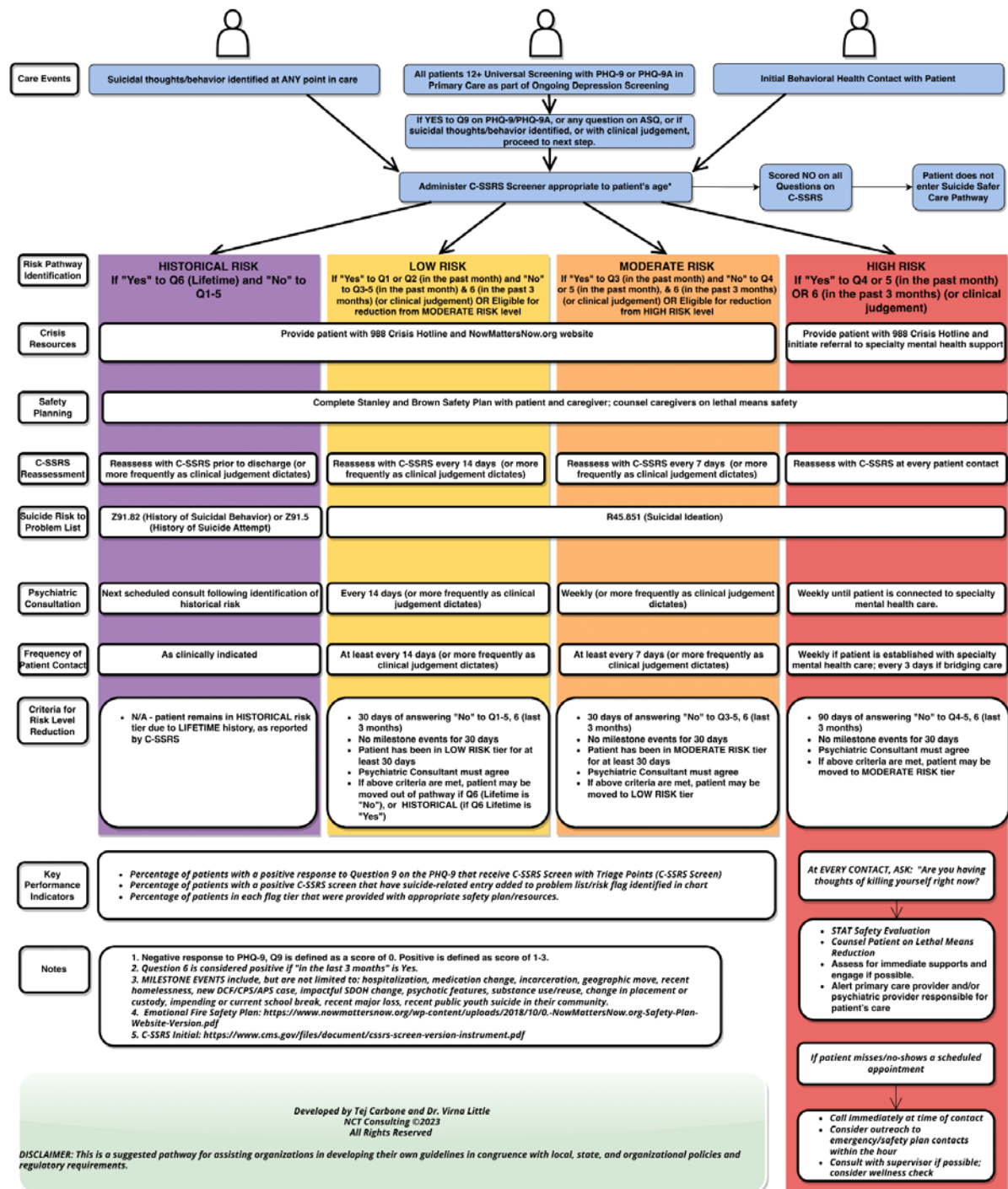
3. **Standardized Pathways:** Establishing consistent protocols for follow-up schedules, safety planning procedures, and addressing access to lethal means ensures a systematic approach to suicide prevention.



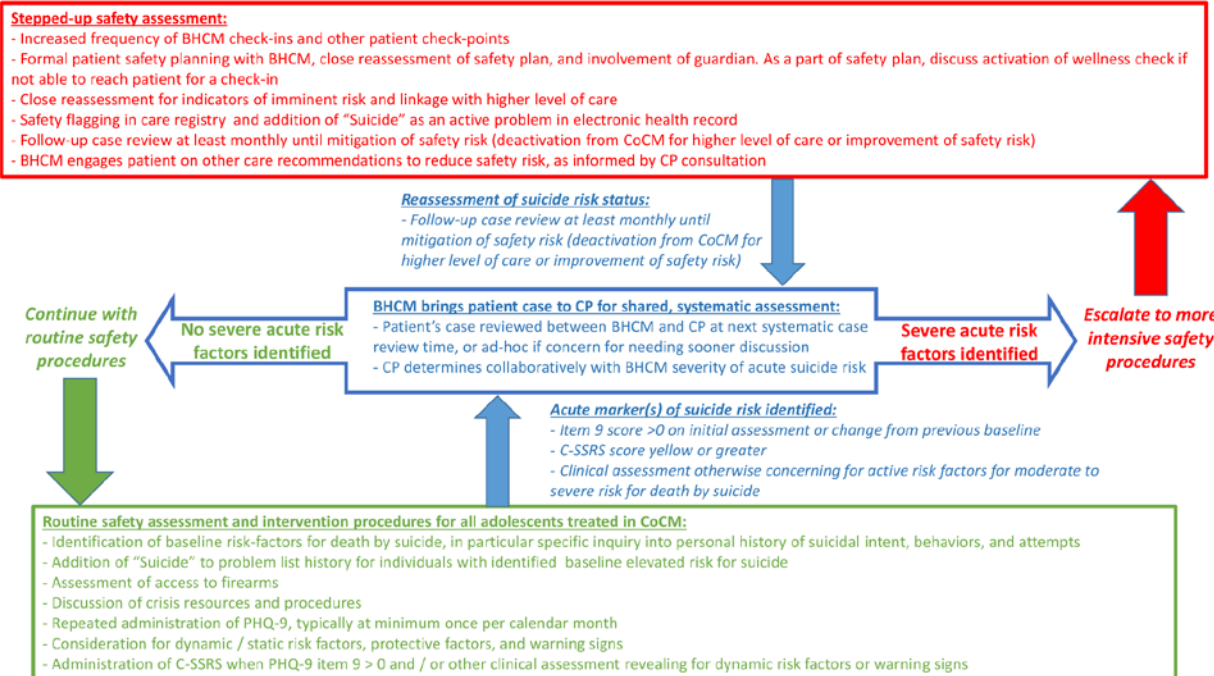
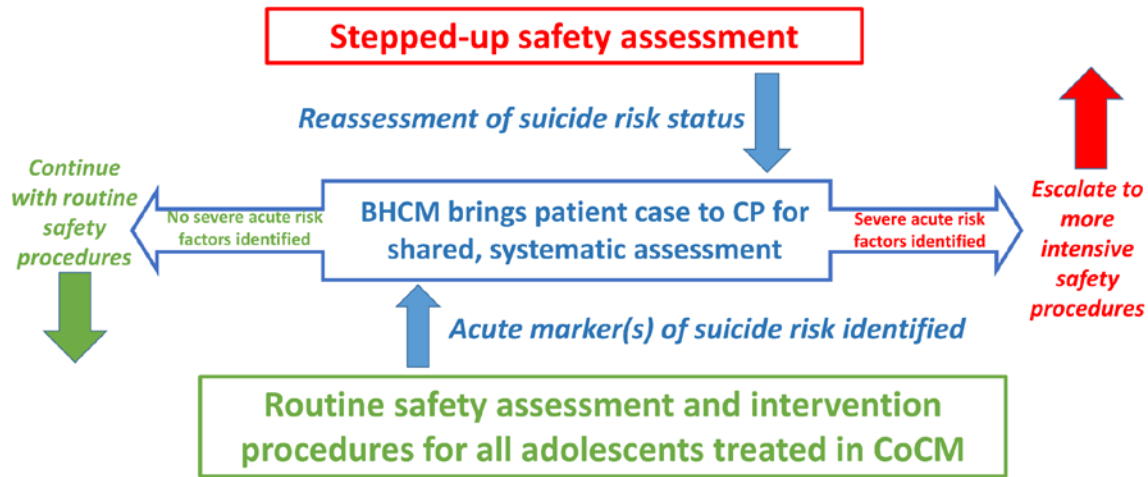
4. **Outcome Measurement:** Implementing processes to measure and track risk reduction is crucial for evaluating the effectiveness of interventions and refining ongoing patient care.

Safer Pathways:

Collaborative Care Management (CoCM) Suicide Safer Care Pathway - Ages 6-17yo



Dynamic Safety Assessment Processes for Adolescent Management in Collaborative Care Model (CoCM)



Addressing the escalating youth suicide rates demands coordinated efforts from pediatric primary care teams. Suicide safer care pathways streamline suicide assessment and intervention procedures within the fast-paced pediatric setting. By translating evidence-based recommendations into practice, these care frameworks empower pediatric providers to play a pivotal role in preventing youth suicide deaths. Together, we can make a substantial impact in saving young lives.

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