



***ASK YOUR COMMUNITY***  
***ASK YOUR FELLOW OFFICER***  
***CARE & ESCORT THEM TO HELP***



THE COLUMBIA  
**LIGHTHOUSE**  
PROJECT  
IDENTIFY RISK. PREVENT SUICIDE.

**See Reverse for Questions  
that Can Save a Life**

|  |              |               |
|--|--------------|---------------|
|  | Past 1 Month |               |
| 1) Have you wished you were dead or wished you could go to sleep and not wake up?  |              |               |
| 2) Have you actually had any thoughts about killing yourself?  |              |               |
| If YES to 2, answer questions 3, 4, 5 and 6<br>If NO to 2, go directly to question 6   |              |               |
| 3) Have you thought about how you might do this?   |              |               |
| 4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?   | High Risk    |               |
| 5) Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?  | High Risk    |               |
| Always Ask Question 6  | Life-time    | Past 3 Months |
| 6) Have you done anything, started to do anything, or prepared to do anything to end your life?<br><i>Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, cut yourself, tried to hang yourself, etc.</i> |              | High Risk     |



Any **YES** indicates that someone should seek behavioral healthcare.  
 However, if the answer to **4, 5 or 6** is **YES**, seek immediate help: go to the **emergency room, call 1-800-273-8255, text 741741 or call 911. STAY WITH THEM** until they can be evaluated.



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