

### **DEPTXYR** (MH)

Within the past year, did the patient have at least one clinical encounter where depression was identified as a reason for the clinical encounter as evidenced by one of the following ICD-10-CM diagnosis codes:

F0151, F320 - F325, F328, F3281, F3289, F329- F333, F3342, F339, F341, F4321, F4323

- 1. Yes
- 2. No

#### **BPDXYR** (MH)

Within the past year, did the patient have at least one clinical encounter where bipolar disorder was identified as a reason for the clinical encounter as evidenced by one of the following ICD-10-CM diagnosis codes:

F3010 – F3013, F302 – F304, F308 - F310, F3110 – F3113, F312, F3130 – F3132, F314, F315, F3160 – F3164, F3170 – F3178, F3181, F3189, F319

- 1. Yes
- 2. No

### SCRPHQi9 (MH)

During the past year was the patient screened for depression by the PHQ-2 + I9?

- 1. Yes
- 2. No

98. Patient refused depression screening

#### PH9SCOR (MH)

Enter the score for Primary Suicide Risk Screen (item 9/ question #3 of the PHQ-2 + I9 screen) documented in the record:

Over the last 2 weeks, how often have you been bothered by thoughts that you would be better off dead, or of hurting yourself in some way?

- 0. Not at all  $\rightarrow$  0
- 1. Several days → 1
- 2. More than half the days  $\rightarrow$  2
- 3. Nearly every day  $\rightarrow$  3
- 99. No answer documented

# OUTCOMEI9 (MH)

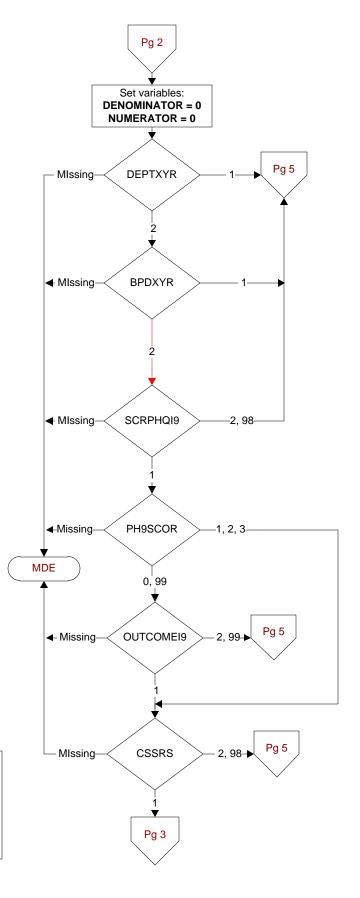
Enter the interpretation of the Primary Suicide Risk Screen (item 9/question #3 of the PHQ-2 +19 screen) as documented in the medical record.

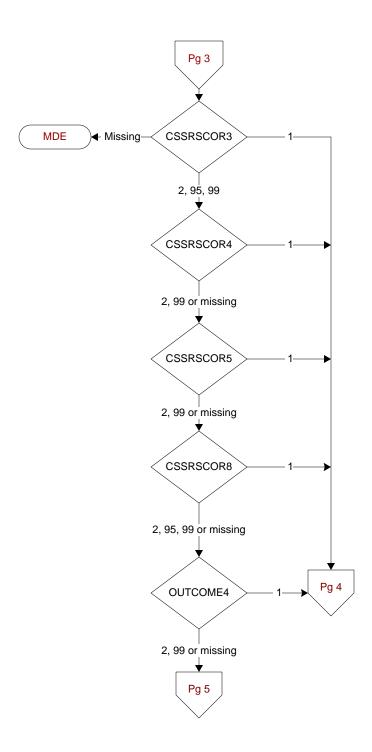
- 1. Positive
- 2. Negative
- 99. No interpretation documented

#### CSSRS (MH)

On (computer to display **phqi9dt**), the day of the positive Primary Suicide Risk Screen (item 9/question #3 of the PHQ-2 +I9 screen), did the acceptable provider complete the Columbia-Suicide Severity Rating Scale (C-SSRS) Screener?

- 1. Yes
- No
- 98. Patient refused to complete the C-SSRS Screener





### CSSRSCOR3 (MH)

Enter the score for C-SSRS Screener Question 3 documented in the record: (Time period designated, e.g. Over the past month) Have you been thinking about how you might do this?

- 1. Yes
- 2. No
- 95. Not applicable
- 99. Score not documented

### CSSRSCOR4 (MH)

Enter the score for C-SSRS Screener Question 4 documented in the record: (Time period designated e.g., Over the past month) Have you had these thoughts and had some intention of acting on them?

- 1. Yes
- 2. No
- 99. Score not documented

#### CSSRSCOR5 (MH)

Enter the score for C-SSRS Screener Question 5 documented in the record: (Time period designated e.g., Over the past month) Have you started to work out or worked out the details of how to kill yourself?

- 1.Yes
- 2.No
- 99. Score not documented

### CSSRSCOR8 (MH)

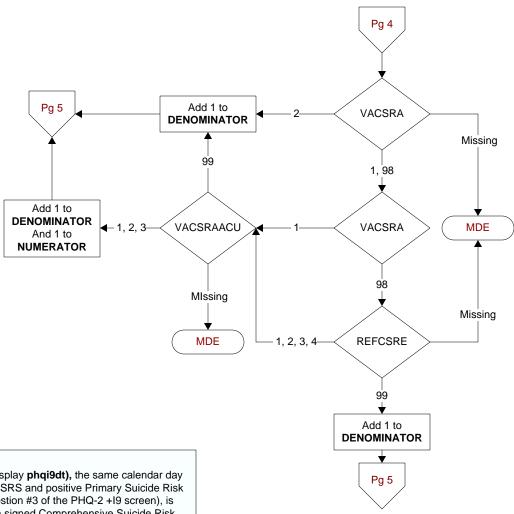
Enter the score for C-SSRS Screener Question 1 documented in the record: (Time period designated, e.g. Over the past month) Have you wished you were dead or wished you could go to sleep and not wake up?

- 1. Yes
- 2. No
- 99. Score not documented

### OUTCOME4 (MH)

Enter the interpretation of the C-SSRS Screener as documented in the medical record.

- 1. Positive
- 2. Negative
- 99. No interpretation documented



## VACSRA (MH)

On (computer to display **phqi9dt)**, the same calendar day as the positive C-SSRS and positive Primary Suicide Risk Screen (item 9/question #3 of the PHQ-2 +19 screen), is there evidence of a signed Comprehensive Suicide Risk Evaluation (CSRE) in the record?

- 1. Yes
- 2. No
- 98. Patient refused to complete CSRE

### REFCSRE (MH)

Was there documentation by the acceptable provider that the validity of the information contained within the CSRE was in question?

- 1. Yes, due to Veteran being under the influence (e.g., drugs, alcohol, etc.)
- 2. Yes, due to Veteran's medical condition (e.g., dementia, etc.)
- 3. Yes, due to Other (e.g., refusal)
- 4. No (no checkbox indicates validity of the CSRE information was not in question)
- 99. No documentation whether the validity of the CSRE information was or was not in question

### VACSRAACU (MH)

Enter the Clinical Impression of Acute Risk as documented in the medical record:

- 1. High Risk (as evidenced by):
- 2. Intermediate Risk (as evidenced by):
- 3. Low Risk (as evidenced by):
- 99. Acute risk not documented

## PTSDX (MH)

Within the past year, did the patient have at least one clinical encounter where PTSD was identified as a reason for the clinical encounter as evidenced by one of the following ICD-10-CM diagnosis codes:

### F431, F4310 - F4312

- 1. Yes
- 2. No

### SCRPTSD5I9 (MH)

Within the past year, was the patient screened for PTSD using the Primary Care PTSD5 +19?

- 1. Yes
- 2. No

98. Patient refused to complete PC-PTSD5 +I9

### PTSDI9SCOR (MH)

Enter the score for the Primary Suicide Risk Screen (item 9/question #6 of the PC-PTSD5 + I9 screen) documented in the record:

Over the last 2 weeks, how often have you been bothered by thoughts that you would be better off dead, or of hurting yourself in some way?

- 0. Not at all  $\rightarrow$  0
- 1. Several days → 1
- 2. More than half the days  $\rightarrow$  2
- 3. Nearly every day  $\rightarrow$  3
- 99. No answer documented

### PTSDI9OUT (MH)

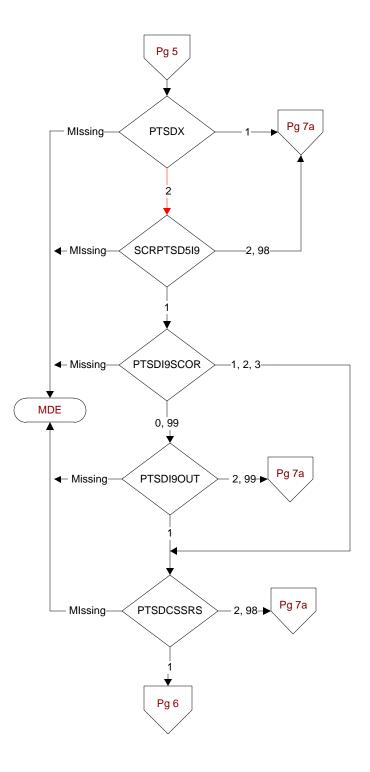
Enter the interpretation of the Primary Suicide Risk Screen (item 9/question #6 of the PC-PTSD5- +19 screen) as documented in the medical record.

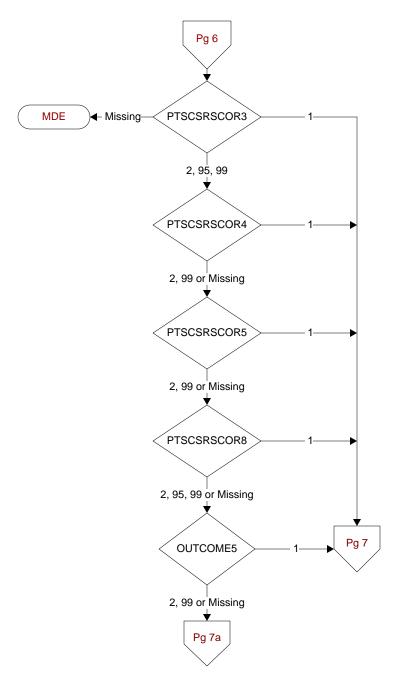
- Positive
- 2. Negative
- 99. No interpretation documented

### PTSDCSSRS (MH)

On (computer to display pcptsd5dt), the day of the positive Primary Suicide Risk Screen (item 9/question #6 of the PC-PTSD5- +I9 screen), did the acceptable provider complete the Columbia-Suicide Severity Rating Scale (C-SSRS) Screener?

- 1. Yes
- 2. No
- 98. Patient refused to complete the C-SSRS Screener





### PTSCSRSCOR3 (MH)

Enter the score for C-SSRS Screener Question 3 documented in the record: (Time period designated, e.g. Over the past month) Have you been thinking about how you might do this?

1. Yes

2. No

95. Not applicable

99. Score not documented

### PTSCSRSCOR4 (MH)

Enter the score for C-SSRS Screener Question 4 documented in the record: (Time period designated e.g., Over the past month) Have you had these thoughts and had some intention of acting on them?

1. Yes

2. No

99. Score not documented

### PTSCSRSCOR5 (MH)

Enter the score for C-SSRS Screener Question 5 documented in the record: (Time period designated e.g., Over the past month) Have you started to work out or worked out the details of how to kill yourself?

1.Yes

2.No

99. Score not documented

### PTSCSRSCOR8 (MH)

Enter the score for C-SSRS Screener Question 8 documented in the medical record: Was this within the past 3 months?

1. Yes

2. No

95. Not applicable

99. Score not documented

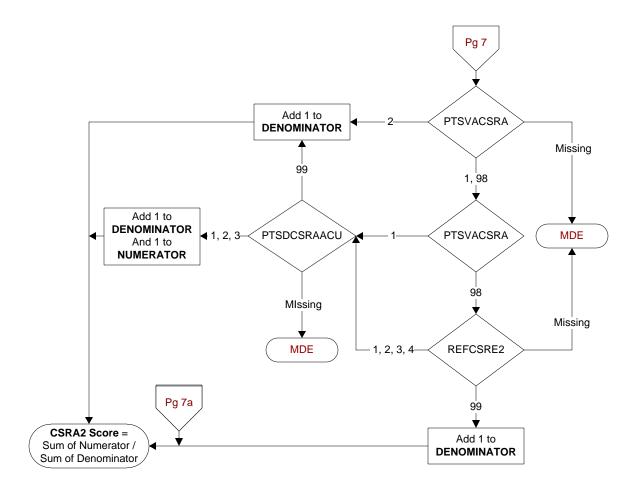
## OUTCOME5 (MH)

Enter the interpretation of the C-SSRS Screener as documented in the medical.

1. Positive

2. Negative

99. No interpretation documented



### PTSVACSRA (MH)

On (computer to display pcptsd5dt), the same calendar day as the positive C-SSRS Screener and positive Primary Suicide Risk Screen (item 9/question #6 of the PC-PTSD5+19 screen), is there evidence of a signed Comprehensive Suicide Risk Evaluation (CSRE) in the record?

- 1. Yes
- 2. No

98. Patient refused to complete CSRE

# PTSDCSRAACU (MH)

Enter the Clinical Impression of Acute Risk as documented in the medical record:

- 1. High Risk (as evidenced by):
- 2. Intermediate Risk (as evidenced by):
- 3. Low Risk (as evidenced by):
- 99. Acute risk not documented

#### REFCSRE2 (MH)

Was there documentation by the acceptable provider that the validity of the information contained within the CSRE was in question?

- 1. Yes, due to Veteran being under the influence (e.g., drugs, alcohol, etc.)
- 2. Yes, due to Veteran's medical condition (e.g., dementia, etc.)
- 3. Yes, due to Other (e.g., refusal)
- 4. No (no checkbox indicates validity of the CSRE information was not in question)
- 99. No documentation whether the validity of the CSRE information was or was not in question