

Investigation Form for Completed Suicides and Nonfatal Self-Injurious Events

Identifying Information: <i>Only people who have access to care in an Air Force facility (i.e., those whose records the Air Force can access) should be entered.</i>	
Victim's Last Name	Sponsor's SSN
Victim's First Name	Event Date (mm/dd/yyyy)
Victim's Middle Initial	Type of Event (circle one) Completed suicide Nonfatal self-injurious event (any intentional injury to the self that did not result in death)
Family Member Prefix (FMP)	
Personal Information	
DOB (mm/dd/yyyy)	Marital Status (circle one) Single (never married) Married (includes separated but not legally separated) Legally separated Divorced Widowed Annulled Unknown
Gender (circle one) Male Female	
Race (circle one) American Indian/Alaskan Asian/Pacific Islander Black (non-Hispanic) Hispanic White (non-Hispanic) Other Unknown	Resides With (circle one) Alone Spouse or Partner (with children) Spouse or Partner (without children) Children Only Parents (biological, step, or adoptive) Mother Only Father Only Friend Other Unknown
Ethnic Group (circle one) Chinese Japanese Korean Filipino Eskimo Aleut Mexican-American Spanish Descent Puerto Rican Cuban Descent None Other Unknown	
Military Information	
Military Service (circle one) (Civilians who are not affiliated with the military and others who do not fit into the categories below should not be entered into this database.) Air Force Army Marine Corps Navy Coast Guard Foreign military Other Uniformed Service Veteran's Administration Unknown	Military Status (circle one) Active duty Military academy cadet Basic trainee Technical Student Guard or Reserve Retired Family member of active duty Family member of retired/deceased Other Unknown
<i>If retired, enter only Pay Grade. If the victim is a dependent, the following questions apply to the victim's sponsor.</i>	
Pay Grade	MAJCOM of Unit (MAJCOM to which the UNIT belongs) ACC attached to AIA? yes no AETC AFMC AFSOC AFSPC AMC PACAF USAFA USAFE HQ USAF Other
Duty Status (circle one) Present for duty Temporary duty (TDY) Annual tour of duty (Guard or Reserve only) Ordinary leave Terminal leave Other Unknown	
Job Title	
AFSC (Air Force Specialty Code)	Unit
DAFSC (Duty Air Force Specialty Code)	Permanent Duty Station (base)

Temporary Duty Station (if TDY at the time of the event)		MAJCOM of Permanent Duty (MAJCOM to which the UNIT is physically located) ACC attached to AIA? yes no AETC AFMC AFSOC AFSPC AMC PACAF USAFA USAFE HQ USAF Other
Deployed at Time of Event?	Yes No Unknown	
Deployed in the Last 12 Months?	Yes No Unknown	
Number of Times Deployed? (within last 12 months)		Did clients command conduct suicide prevention training (within 12 months) Yes No Unknown
		Did client attend the suicide prevention training? Yes No Unknown
Event Information		
Medical Severity of Event (circle one) Mild (superficial, transient, or self-limited event) Moderate (required treatment, but was not life-threatening) Severe (was likely to be fatal without treatment) Unknown		Primary Method Used (circle one) Cutting or piercing instrument Firearm or explosive Hanging, strangulation, or suffocation Jumping from a high place Motor vehicle crash Poisoning by utility gas Poisoning by vehicle exhaust Poisoning by solid or liquid substance (overdose) Submersion (drowning) Other Unknown
Victim's Intent (circle one) Mild (self-injury with primary goal to receive attention or assistance) Moderate (self-injury with primary goal to harm self) Severe (self-injury with primary goal to kill self) Unknown		
Communicated Intent to (circle one) No one (do not use for suicide) Family member Friend or coworker Helping services Supervisory chain Other Unknown		Firearm Type (if applicable, circle one) Handgun Rifle Shotgun Other Unknown
General Location of Event (circle one) On base Off base Unknown		Firearm Source (if applicable, circle one) Military issue Privately owned Unknown
Specific Location of Event (circle one) Personal residence Dormitory Temporary lodging (hotel/motel/billeting) Victim's workplace Public area, common Public area, isolated Medical facility Confinement facility Other Unknown		Were Drugs (Illicit, Prescription, or Over-the-counter) Used During the Event? (circle one) Yes (confirmed by toxicology screen) Likely (suspected because of presence at the site or interview(s); toxicology screen not performed) Unlikely (not suspected; toxicology screen not performed) No (negative toxicology screen)
		Specify Drugs (if applicable and if known)
Precipitating Event within 72 hours? (Argument with spouse/family/sig other, Physical fight with spouse/family/sig other, Discovered sexual infidelity of spouse/partner, Spouse/partner discovered sexual infidelity of victim, Death of family/friend, Arrest/detainment for other than alcohol/drugs, Alcohol-related incident, Positive test or possession of illegal drugs, Other legal proceedings, Military discipline (LOR, LOC, Art 15), Nonselect for promotion, Separation from spouse/partner, Significant medical condition/diagnosis, Foreclosure, Bankruptcy, Repossession, Acute financial crisis)	Yes No Unknown	Was Alcohol Used During The Event (circle one) Yes (confirmed by lab) Likely (suspected because of presence at the site or interview(s); blood alcohol level not performed) Unlikely (not suspected; blood alcohol level not performed) No (blood alcohol level < 0.01 g/dl)
		If Yes, then Blood Alcohol Level (g/dl)

Use of Military Helping Services <i>Records from each agency must be reviewed for one year prior to the event.</i>						
Within the past year, was the individual seen by any of the following helping services?						
Medical Treatment Facility		Y	N	Family Support	Y N	
If yes, when?	Within 1 month of the event?	Y	N	If yes, when?	Within 1 month of the event?	Y N
	1-3 months prior to the event?	Y	N		1-3 months prior to the event?	Y N
	3-12 months prior to the event?	Y	N		3-12 months prior to the event?	Y N
Medical Facility Type <i>(if yes to MTF above)</i>				Financial Counseling	Y N	
	PHA/Preventive Services?	Y	N	If yes, when?	Within 1 month of the event?	Y N
	Acute illness/injury care?	Y	N		1-3 months prior to the event?	Y N
	Chronic disease follow-up?	Y	N		3-12 months prior to the event?	Y N
	Other			Legal	Y N	
	Unknown			If yes, when?	Within 1 month of the event?	Y N
Mental Health		Y	N		1-3 months prior to the event?	Y N
If yes, when?	Within 1 month of the event?	Y	N		3-12 months prior to the event?	Y N
	1-3 months prior to the event?	Y	N	Chaplain	Y N	
	3-12 months prior to the event?	Y	N	If yes, when?	Within 1 month of the event?	Y N
Substance Abuse Services		Y	N		1-3 months prior to the event?	Y N
If yes, when?	Within 1 month of the event?	Y	N		3-12 months prior to the event?	Y N
	1-3 months prior to the event?	Y	N	Exceptional Family Member Program	Y N	
	3-12 months prior to the event?	Y	N	If yes, when?	Within 1 month of the event?	Y N
Family Advocacy		Y	N		1-3 months prior to the event?	Y N
If yes, when?	Within 1 month of the event?	Y	N		3-12 months prior to the event?	Y N
	1-3 months prior to the event?	Y	N	Child/Youth Development	Y N	
	3-12 months prior to the event?	Y	N	If yes, when?	Within 1 month of the event?	Y N
					1-3 months prior to the event?	Y N
					3-12 months prior to the event?	Y N
Risk Factors of Victim <i>Medical and mental health records for one year prior to the event must be reviewed. Also, interview the victim, a surviving family member, and/or others as needed.</i>						
Within the past year, did the individual have any of the following problems?						
Previous Nonfatal Self-injurious Events		Y	N	Victim of Abuse or Sexual Assault <i>(i.e., emotional abuse, physical abuse, domestic violence, or sexual assault)</i>	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Mood Disorder <i>(i.e., major depressive disorder, bipolar disorder, dysthymic disorder, cyclothymic disorder, or strong suspicion of a mood disorder)</i>		Y	N	Military Legal or Administrative Problems	Y N	
If yes, was it within the past 3 months?		Y	N	<i>(i.e., court martial, Article 15, involuntary discharge, unfavorable information file, AWOL or desertion, EEO or EOT complaint, or other military legal or administrative problem)</i>		
Psychotic Disorder <i>(i.e., schizophrenia, schizoaffective disorder, delusional disorder, brief psychotic reaction, schizophreniform disorder, or strong suspicion of a psychotic disorder)</i>		Y	N	If yes, was it within the past 3 months?	Y N	
If yes, was it within the past 3 months?		Y	N	Under Investigation or Apprehension <i>(i.e., IG or unit/command-directed inquiry, AFOSI investigation, civilian investigation, or SP investigation)</i>	Y N	
Anxiety Disorder <i>(i.e., panic disorder, panic attacks, agoraphobia, specific phobia, social phobia, posttraumatic stress disorder, acute stress disorder, or strong suspicion of an anxiety disorder)</i>		Y	N	If yes, was it within the past 3 months?	Y N	
If yes, was it within the past 3 months?		Y	N	Civil Legal Problems <i>(i.e., divorce, child custody dispute, bankruptcy, civil trial, or other civil legal problem)</i>	Y N	
Personality Disorder <i>(i.e., borderline, paranoid, schizoid, schizotypal, antisocial, histrionic, narcissistic, avoidant, dependent, obsessive-compulsive, or strong suspicion of a personality disorder)</i>		Y	N	If yes, was it within the past 3 months?	Y N	
Adjustment Disorder?		Y	N	Financial Difficulties <i>(i.e., gambling, indebtedness)</i>	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Bereavement <i>(i.e., death of a loved one)</i>		Y	N	Spouse Problems	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Medical Problems <i>(i.e., history of chronic illness or severe physical illness)</i>		Y	N	Job Loss <i>(i.e., involuntary separation, laid-off, relieved of duty, fired)</i>	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Alcohol Abuse <i>(i.e., alcoholism or binge drinking)</i>		Y	N	Work Problems <i>(i.e., work dissatisfaction, problems with supervisor or coworker, poor performance review, not selected for promotion, or other work problems)</i>	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Illegal Drug Abuse		Y	N	School Problems	Y N	
If yes, was it within the past 3 months?		Y	N	If yes, was it within the past 3 months?	Y N	
Prescription Drug Abuse		Y	N			
If yes, was it within the past 3 months?		Y	N			
					<i>Risk Factors continued on the next page</i>	

Criminal Acts (<i>i.e., collateral homicide, sexual misconduct, traffic-related, narcotics, crimes against person/property, criminal trial, or other criminal acts</i>)	Y	N	Family Problem (<i>Parent, sibling, or other family member</i>)	Y	N
If yes, was it within the past 3 months?	Y	N	If yes, was it within the past 3 months?	Y	N
Last DSMIV Diagnosis			Significant Other Problem	Y	N
			If yes, was it within the past 3 months?	Y	N
			Other Risk Factors		
Disposition at 2 weeks after the event (<i>for victims of nonfatal self-injurious events only</i>)					
Days Admitted to MTF			Current Status (<i>circle one</i>)		
Days Quarters			Returned to duty		
Days Limited Duty			Restricted duty		
Date Report Submitted			Job transfer		
			Medically retired		
			Medically evacuated		
			Outpatient treatment		
			Unknown		
Name of Individual Who Collected This Information (<i>for future reference in your institution</i>)					
Comments: <i>Please comment on any aspect of this case (i.e., information that you believe is important but was not requested).</i>					
PRIVACY ACT STATEMENT					
AUTHORITY: Title 10 U.S.C. Sec 8012 and 8013 and Executive Order 9397.					
PURPOSE: SSN is used for positive identification of member or sponsor of member involved in event being captured.					
ROUTINE USES: None.					
DISCLOSURES: Voluntary. Failure to provide SSN will result in the event not being captured in the SESS database.					