**Role-Play – Patient “Pat”**

Pat has been referred to psychiatry to address suicidality.

Demographics

* Age = 60s
* Widowed 2 years
* Lives alone in rural community
* Recently retired from a career they enjoyed

Mental health and suicidality concerns

* Experiencing depression ever since the death of their spouse
* Screened as at-risk for suicide at a recent primary care visit
	+ Current active suicidality, but not imminent
	+ Has had thoughts about using a gun they have to end their life
	+ No prior suicide attempts

**Responses to the “Providers” questions**

When your partner asks about a recent suicidal crisis, at first, say…
I just feel like I can’t go on anymore. Since my spouse passed my life has been empty, like a void without joy. Retiring is lonely. It’s not what I thought it would be like. I don’t know…I just start thinking that there’s no point. Why not just join my spouse now?

If your partner then asks for more specifics about a recent time you felt most suicidal…

Well, the other night, I was sitting at my dining room table after eating dinner. We used to eat dinner every night together there and I just never stopped. And I got to thinking about how much I miss them. And how awful it is to be eating here alone. And I thought, maybe I should just get our gun and be done with all of this. I’ve don’t know what this is even all for now. And I sat there like that for a while. I think my sister called and then I went to bed.

If your partner helps you to identify warning signs, the following leads to suicidal thoughts:

* Being alone at home at night is a situation that triggers ruminating on sad and negative thoughts
	+ Thinking about how much I miss my spouse and feeling sad and grieving
	+ Thinking about how lonely I am and pointless my life is, feeling hopeless