

Protocol Summary Paragraph

Study Title: *Emergency Department Screen for Teens at Risk for Suicide (ED-STARS)*

Study Protocol Version: *v1.03, dated September 25, 2017*

Study Type: Observational

Study Period: June 2015 – February 2019

Enrollment: Total Study = 10,054 (Study 1 = 6004, Study 2 = 4050)

Consent: Yes

Purpose: Recognizing the importance of the emergency department (ED) as a setting for the identification of youth at risk for suicide, Emergency Department Screen for Teens at Risk for Suicide (ED-STARS) (5U01MH104311-02) was a multi-site collaborative project. The project was funded to improve identification of youth at risks for suicide in response to RFA-MH-14-070. ED-STARS is comprised of two studies, the primary aims of Study 1 were to develop a computerized adaptive screen (CAS) for predicting suicide attempts and to develop a CAS-based algorithm for risk stratification and triage for youth aged 12-17 years who presented to one of the PECARN EDs during randomly chosen screening shifts. We followed up with a subsample of these youth, enriched for suicide risk factors at 3 and 3 and 6 months. In study 2 we recruited a new sample of youth with the primary aims of validating the CAS, determine how it performs in comparison to a standard non-adaptive screen, and determine if a behavioral test for implicit suicidal thoughts has incremental value in predicting suicide attempts.

The hypotheses of this study were as follows:

1. We hypothesize that the CAS will outperform the ASQ with respect to accuracy of prediction of suicide attempts.
2. We hypothesize that the IAT will add incrementally to the prediction of suicide attempts above and beyond CAS and ASQ scores.

Patient enrollment took place beginning with study 1 in June 2015 and enrolled between June 2015 and July 2016 with the last follow-up procedures completed in September 2016. Study 2 enrolled between July 2017 and October 2018 with the last follow-up procedures completed in February 2019. This project was funded by the NIMH.