SUICIDE ATTEMPT(s) (18 p.)

All Classes
(Updated 11/18/2026)

A. Remote History (5 or more years ago) Single episode Applies to **any lifetime** history occurring 5 or more years ago.	**Submit the following to the FAA:** **1.** A current, detailed Clinical Progress Note generated from a clinic visit with the **treating provider** no more than 90 days before the AME exam. *It should include a summary of the history of the condition or diagnosis; current medications, dosages, and side effects (if any); clinical exam findings; results of any testing performed; diagnosis; assessment and plan (prognosis); and follow-up.* **It must include** if there is any concern for continued suicidal ideation(s) or suicide attempt. **2.** **Most recent** evaluation by **the treating psychiatrist or psychologist** with clinical summary to include how the diagnosis was made, severity, frequency of episodes, and response to treatment (medications or psychotherapy). The report should identify if there is any history of suicidal ideation(s), homicidal ideation(s), substance use disorder(s), or other co-morbid psychiatric or psychological conditions, and identify diagnosis (DSM-V), treatment plan, and prognosis. **3.** **Medication list.** List all current medications, reason for use, start dates, and side effects, if any. If recently discontinued, list date and reason. **4.** **Medical Records**: Include inpatient, ER, EMS run, and outpatient records. Hospital records, submit, at a minimum, the admission H&P, discharge summary, and any consultant notes. For ER or outpatient psychiatric evaluations or treatment, submit clinical progress notes documenting dates, severity, and treatment history. **Note:** After review of the above, additional information or evaluation may be required.	**DEFER** Submit the information to the FAA for review.
B. Any attempt(s) **within the past 5 years** **OR** **More than one attempt in a lifetime.**	**Submit the following to the FAA:** • **All items listed in Row A** • **Current FAAR Psychiatry evaluation** **Note:** If associated with substance use/misuse, see Substance Dependence/Abuse. **Note:** After review of the above, additional information or evaluation may be required.	**DEFER** Submit the information to the FAA for review.