### Patient Safety Plan Template

**Step 1:** Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. 
2. 
3. 

**Step 2:** Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. 
2. 
3. 

**Step 3:** People and social settings that provide distraction:

1. Name__________________________ Phone__________________________
2. Name__________________________ Phone__________________________
3. Place__________________________ 4. Place__________________________

**Step 4:** People whom I can ask for help:

1. Name__________________________ Phone__________________________
2. Name__________________________ Phone__________________________
3. Name__________________________ Phone__________________________

**Step 5:** Professionals or agencies I can contact during a crisis:

1. Clinician Name__________________________ Phone__________________________
   Clinician Pager or Emergency Contact # ________________________________
2. Clinician Name__________________________ Phone__________________________
   Clinician Pager or Emergency Contact # ________________________________
3. Local Urgent Care Services
   Urgent Care Services Address__________________________
   Urgent Care Services Phone____________________________________
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

**Step 6:** Making the environment safe:

1. 
2. 

---

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of the Safety Plan Template may be reproduced without their express, written permission. You can contact the authors at bhs2@columbia.edu or gregbrow@mail.med.upenn.edu.

The one thing that is most important to me and worth living for is: ________________________________