

UNIVERSITY of WASHINGTON





What is Dementia?

Clinicians can, and should, ask their patients about access to firearms and their safety in the context of routine clinical care. Asking patients about firearms in the context of other safety issues may make it more comfortable to address. If a patient acknowledges they have a firearm, the clinician may follow up to ask if the firearm is stored in a locked safe with ammunition locked separately. If it is not, a clinician may provide their patient with information on resources for safe firearm storage.

WHEN should we ask patients about firearms?

- Routine wellness visits, as part of a standard clinical template
- After a diagnosis of a serious health problem
- If they have chronic pain
- If they face changes in functional status requiring more assistance
- Revisit the discussion about firearms annually (or more frequently, if necessary)

HOW should we ask patients about firearms?

In a non-judgmental way:

- Ask in the context of a safety assessment and include other safety issues
- Ask how they value and enjoy using their firearms, and allow them to share stories if they wish
- Ask if they have currently have firearms in the home then ask if they have a plan for the future

WHAT should we do if a patient says they have a firearm in the home, and there is a risk factor for suicide?

- National Suicide Prevention Lifeline
 1-800-273-8255
 (warm hand-off, if necessary)
- If not an immediate risk, provide them with resources such as our Three Interventions Toolkit and University of Colorado's Firearm Life Plan
- Ask how the firearm is stored and counsel your patient on the safest options for storage (which is storing the firearm unloaded and ammunition separately, and securely locked)

