

# Warm Handoff Script



**PRIMARY  
CARE  
CLINICIAN:**

*I know that [BH Specialist Name] would really love to be a part of this conversation; do you mind if I bring them in?*

**PRIMARY  
CARE  
CLINICIAN:**

If patient agrees, Primary Care Clinician calls the BH Specialist on the phone in front of the patient and says,  
*“Hi, [BH Specialist Name], this is [PC Clinician Name]. [Patient Name] is with me, and we would really appreciate it if you could come over and join us.”*

*This is the scribed statement to the BH Specialist that clues the BH Specialist in that this is a high-risk suicide patient.*

BH Specialist immediately comes to the door, knocks, and enters, saying,

*“Hi [PC Clinician Name] and [Patient Name], thanks for inviting me. How can I help?”*

**BH  
SPECIALIST:**

**PRIMARY  
CARE  
CLINICIAN:**

*“Hi, [BH Specialist Name], [Patient Name] and I have been talking, and she is struggling with intrusive thoughts that she would be better off dead.”*

BH Specialist would then take over the conversation and begin their assessment.

**BH  
SPECIALIST:**

**PRIMARY  
CARE  
CLINICIAN:**

The PC Clinician would stay and be available to facilitate any transports or any referrals. This can be done with the patient present or not.

*If the patient is present, the more you can do in front of the patient, the better; it maintains trust and assures the patient you understand and empathize with their situation. Always queue the person on the phone with the statement:*

*“Hello, I am [PC Clinician Name] here at [Practice Name], and I am with [Patient Name], one of our patients who is needing a higher level of care....”*