

Student Distress Recognition and Response Card

Chapter 45: Recognizing and Responding to a Student Mental Health Crisis

- ☐ Notice pattern changes, not single incidents — a sudden shift from a student's own baseline (engagement, punctuality, affect, hygiene, communication) is more informative than any one data point
 - ☐ Address what you've observed directly and privately, using specific behavioral language ("I've noticed you've missed two huddles this week") rather than a diagnostic label
 - ☐ Ask directly and without alarm whether the student is doing okay — asking does not increase risk, and avoiding the question does not protect anyone
 - ☐ If the student discloses a crisis, stay with them and connect them immediately to your institution's counseling service, campus crisis resources, or the 988 Suicide & Crisis Lifeline — do not attempt to manage a mental health crisis alone
 - ☐ Separately from supporting the student, assess in the moment whether they are currently safe to continue direct patient care, and adjust the clinical assignment if there is any doubt
 - ☐ Document what you observed and what you did in behavioral, factual terms, and loop in your course coordinator per your program's policy — this is an escalation matter (Chapter 46), not something to manage alone indefinitely
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From The Clinical Faculty Complete Field Guide: Ready-to-Use Tools, Scripts, and Evidence-Based Guidance for Every Stage of the Clinical Rotation.

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