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Unique Protocol ID: 2024-07566-01

Title: The Time Before the Crime - Risk Patterns in Offenders Undergoing a Forensic Psychiatric Evaluation (Tibec)

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Review Template for Medical Record Review

Case Number (anonymized):
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Age at Index Offense:
Age group: <input type="checkbox"/> 18-24 years <input type="checkbox"/> 25-39 years <input type="checkbox"/> ≥ 40 years
Unit(s) Reviewed:
<input type="checkbox"/> Outpatient only <input type="checkbox"/> Inpatient only <input type="checkbox"/> Emergency department only <input type="checkbox"/> Multiple units
Review Period:
Review Performed By:

Markers

Marker	Inpatient (IP)	Outpatient (OP)	Emergency (ED)
Benzodiazepines or benzodiazepine-like medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central stimulant medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of treatment/intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-adherence to treatment/intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compulsory psychiatric care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coercive measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Absence of violence risk assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased psychiatric care needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parallel psychiatric care contacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Polypharmacy (≥ 5 psychiatric meds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weapon possession or interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Firearm unsuitability report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suicide attempt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Historical suicide attempt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aggression or violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
History of aggression or violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Missed healthcare appointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Missed appointment without follow-up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multiple psychiatric diagnoses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safeguarding concern report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Police transport to care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance use (excluding alcohol)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Negative life event	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social vulnerability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Absence of crisis plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IP = Inpatient care, OP = Outpatient care, ED = Emergency department

List of Markers with Definitions

Benzodiazepines or benzodiazepine-like medications

Definition: The marker is considered positive if the patient was prescribed or administered a benzodiazepine or a benzodiazepine-like medication during the review period.

Note: Benzodiazepine-like medications refer to the substances Zopiclone and Zolpidem

Central stimulant medications

Definition: The marker is considered positive if the patient was prescribed or administered central stimulant medications during the review period.

Lack of treatment/intervention

Definition: The marker is considered positive if the patient had no treatment or intervention prescribed for their (main) diagnosis during the review period.

Note: Treatment refers to psychological or pharmacological treatment. Intervention refers to actions addressing issues resulting from diagnoses that do not primarily require pharmacological or psychological treatment (such as autism or intellectual disability), e.g., municipal housing, services under the LSS Act, or legal guardian.

If the patient lacks a main diagnosis, the diagnosis made at, e.g., an emergency visit is considered.

Non-adherence to treatment/intervention

Definition: The marker is considered positive if the patient was prescribed treatment or intervention but showed non-adherence during the review period.

Note: Non-adherence includes missed injections, low drug levels, failure to take medication, missed therapy appointments, not collecting medication from the pharmacy, or not residing in designated housing.

Compulsory psychiatric care

Definition: The marker is considered positive if the patient was treated under the Compulsory Psychiatric Care Act or the Forensic Psychiatric Care Act at least once during the review period.

Note: It is also positive if a medical certificate about compulsory care was issued and a detention decision was made, even if no final commitment decision followed.

Coercive measures

Definition: The marker is considered positive if the patient was subject to coercive measures decided by the chief physician under the Compulsory Psychiatric Care Act or the Forensic Psychiatric Care Act during the review period.

Absence of violence risk assessment

Definition: The marker is considered positive if no documented violence risk assessment was made during psychiatric care visits within the review period.

Note: If an assessment exists, the marker is negative regardless of quality or risk rating.

Increased psychiatric care needs

Definition: The marker is positive if the patient had any of the following during the review period:

- a) ≥ 2 inpatient admissions,
 - b) ≥ 1 readmission within one week after discharge,
 - c) ≥ 2 emergency visits,
 - d) ≥ 1 inpatient stay lasting over two months.
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Parallel psychiatric care contacts

Definition: The marker is considered positive if the patient had parallel psychiatric care contacts with both general psychiatry and specialized addiction services.

Note: Includes outpatient visits, inpatient admissions, or emergency visits. Excludes municipal addiction care.

Polypharmacy (≥ 5 psychiatric medications)

Definition: The marker is positive if the patient was prescribed ≥5 psychiatric medications at any point during the review period.

Note: Includes medications for psychiatric symptoms and narcotic substances like opioids and Pregabalin, both regular and PRN (when required).

Weapon possession or interest

Definition: The marker is considered positive if the patient had access to weapons, carried a weapon during a search, or expressed current or historical interest in weapons during the review period.

Note: Weapons refer to firearms or knives.

Firearm unsuitability report

Definition: The marker is considered positive if a report was filed with the police during the review period regarding the patient's unsuitability to possess firearms, in accordance with Chapter 6, Section 6 of the Swedish Firearms Act (1996:67).

Suicide attempt

Definition: The marker is considered positive if the patient attempted suicide at least once during the review period.

Note: Includes all acts intended to end life. If intent is denied or unclear, it is still considered positive if the event required medical care.

Historical suicide attempt

Definition: The marker is considered positive if there is information indicating the patient attempted suicide at least once before the review period.

Note: Includes all acts intended to end life. If intent is denied or unclear, it is still considered positive if the event required medical care.

Aggression or violence

Definition: The marker is considered positive if the patient displayed aggressive or violent behavior toward objects, others, or self during the review period.

Note: Behavior must be documented as a clinical observation or from history. Includes all types of self-harm, e.g., cutting.

History of aggression or violence

Definition: The marker is considered positive if there is information indicating the patient had shown aggressive or violent behavior before the review period.

Note: Behavior must be documented as a clinical observation or from history. Includes all types of self-harm, e.g., cutting.

Missed healthcare appointment

Definition: The marker is considered positive if the patient missed or canceled at least one scheduled healthcare appointment during the review period.

Missed appointment without follow-up

Definition: The marker is considered positive if the patient missed or canceled at least one appointment during the review period without adequate follow-up by the healthcare provider.

Note: Adequate follow-up includes phone contact, home visits, or rescheduling.

Multiple psychiatric diagnoses

Definition: The marker is considered positive if the patient had psychiatric diagnoses from three or more different diagnostic clusters during the review period. Diagnoses must be recorded using ICD codes.

Note: Clusters are based on the first number following the F in ICD codes. For example, F20.3 and F29.9 are in the same cluster. An example of three different clusters: F20.0 (schizophrenia), F10.0 (alcohol intoxication), F84.1 (autism).

Safeguarding concern report

Definition: The marker is considered positive if a family member or other person reported a concern about the patient's mental state to psychiatry, or if a report was made to social services in accordance with Chapter 14, Section 1 of the Social Services Act (2001:453).

Police transport to care

Definition: The marker is considered positive if the patient arrived at psychiatric care with police assistance during the review period, either:

- a) voluntarily,
 - b) under Section 11 of the Police Act (1984:387),
 - c) under the Care of Intoxicated Persons Act (1976:511), or
 - d) under Section 47 of the Compulsory Psychiatric Care Act (1991:1128).
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Substance use (excluding alcohol)

Definition: The marker is positive if the patient during the review period:

- a) had ≥ 1 substance use diagnosis,
- b) self-reported use,
- c) tested positive for non-prescribed narcotics,
- d) was reported to social services under the Care of Substance Abusers Act (1988:870), or
- e) was assessed by a physician according, Section 9 of the Care of Substance Abusers Act (1988:870).

Note: Alcohol use is excluded from this marker.

Alcohol use

Definition: The marker is positive if the patient during the review period:

- a) had ≥ 1 alcohol-related diagnosis,
- b) self-reported overuse,
- c) had >0.30 $\mu\text{mol/L}$ phosphatidylethanol,
- d) was reported to social services under the Care of Substance Abusers Act (1988:870), or
- e) was assessed by a physician according, Section 9 of the Care of Substance Abusers Act (1988:870).

Note: This marker refers solely to alcohol use or dependence.

Negative life event

Definition: The marker is considered positive if the patient experienced a negative life event (e.g., separation, bereavement, unemployment, or housing loss) during the review period and psychiatry was informed.

Social vulnerability

Definition: The marker is considered positive if the patient was in a socially vulnerable situation that significantly affected functioning during the review period.

Examples: lack of social network, homelessness, or no source of income.

Absence of crisis plan

Definition: The marker is considered positive if there was no crisis plan in the patient's record during the 12 months preceding the index offense date.

Note: This refers to the full year before the offense, not just the 3-month review period. The marker is positive only if the plan is entirely missing or older than 12 months.
