# Selective Serotonin Reuptake Inhibitor (SSRI) Protocol

<table>
<thead>
<tr>
<th>Medication</th>
<th>Low Starting Dose</th>
<th>Typical Starting Dose</th>
<th>Typical Effective Dose</th>
<th>Typical Dose Range</th>
<th>Typical Escalation amount</th>
<th>Half-life</th>
<th>Half-life of Active Metabolites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluoxetine</td>
<td>5mg</td>
<td>10mg</td>
<td>20mg</td>
<td>60mg</td>
<td>10mg</td>
<td>2-3 days</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Sertraline</td>
<td>25mg</td>
<td>50mg</td>
<td>100-150mg</td>
<td>200mg</td>
<td>25mg</td>
<td>Males – 22.4 hrs females 32-36 hrs</td>
<td>NA</td>
</tr>
<tr>
<td>Citalopram</td>
<td>5mg</td>
<td>10mg</td>
<td>20mg</td>
<td>40mg</td>
<td>10mg</td>
<td>20-35 hours</td>
<td>NA</td>
</tr>
<tr>
<td>Escitalopram</td>
<td>2.5mg</td>
<td>5mg</td>
<td>10mg</td>
<td>20mg</td>
<td>5mg</td>
<td>20-35 hours</td>
<td>NA</td>
</tr>
</tbody>
</table>

**1st SSRI CHECK SCRIPT**

- **Check side effects**
  - “Are you concerned about side effects? Has anything changed that you are worried might be related to medication”
  - “Have you had any thoughts about hurting yourself or anyone else?”
- **Check for response**
  - “How are you doing?”
  - “On a scale of 1-10, 10 being as good as you could feel, how are you doing?”
- **Review goals**
  - “Are you still hoping to work on ____?”
- **Review safety plan**
  - “Have you had to use your safety plan? Or How close have you come to using your safety plan. Do you still feel like you could use your safety plan”
  - “Could you repeat your safety plan?”
- **Review expectations**
  - “It’s early to see an impact of medication but you should see some positive response in 2-4 weeks.”
  - “We look forward to your next check-in in 1-2 weeks”
- **Increase medication (if you started low)**

**MANIA SCREEN**

- “Was there ever a period of time, for more than a few days, that you (or your child) didn’t need sleep, was on top of the world, and significantly different than usual?”