

Two Part PTSD Self-Assessment Test

Use this two-part PTSD test to help determine if you are experiencing PTSD symptoms and whether it is time for you to seek the help of a mental health professional for proper diagnosis. Complete Part 1 of the test by clicking the "true" or "false" box next to each question. Complete Part 2 of the test by marking the box next to each symptom you're experiencing.

PART 1:

Have you experienced or been exposed to a traumatic event?

True	False	
During the traumatic event, did you experience serious injury or witnessed someone's death, or perhaps the threat of injury or death?		
True	False	
During the traumatic event did you feel intense fear, helplessness, and/or horror?		
True	False	
Do you regularly experience intrusive thoughts or images about the traumatic event?		
True	False	
Do you sometimes feel like you are re-living the event or that it is happening all over again?		
True	False	
Do you have recurrent nightmares or distressing dreams about the traumatic event?		
True	False	

Do you feel intense distress when something reminds you of the traumatic event, whether it's something you think about or something in you see? True False		
Do you try to avoid though traumatic event?	nts, feelings, or conversations that remind you of the	
True	False	
Do you try to avoid activities, people, or places that remind you of the traumatic event?		
True	False	
Are you unable to remember something important about the traumatic event?		
True	False	
Since the trauma took place, do you feel less interested in activities or hobbies that you once enjoyed?		
True	False	
Since the trauma took place, do you feel distant from other people or have difficulty trusting them?		
True	False	
Since the trauma took place, do you have difficulty experiencing or showing emotions?		
True	False	
Do you feel that your future will not be "normal" that you won't have a career, marriage, children, or a normal life span?		
True	False	
Since the traumatic event, have you had difficulty falling or staying asleep?		
True	False	
Have you felt irritable or have you had outbursts of anger?		
True	False	

Have you had difficulty co	ncentrating, since the trauma?
True	False
Do you feel guilty because survived it?	others died or were hurt during the traumatic event but you
True	False
Do you often feel jumpy o	r startle easily?
True	False
Do you often feel hypervig any kind of threat?	ilant, that is, are you constantly feeling and acting ready for
True	False
Have you been experiencing symptoms for more than one month?	
True	False
Do your symptoms interfe	re with normal routines, work or school, or social activities?
True	False

PART 2:

Re-experiencing Symptoms:

Memories and images of the traumatic events often intrude into the minds of those with PTSD. They happen suddenly and without obvious cause, and they are often accompanied by intense emotions, such as grief, guilt, shame, fear, or anger. Sometimes they can be so vivid a person believes the trauma is actually reoccurring, and can cause a person to dissociate.

Nightmares, Night Terrors Sleepwalking, Sleep Fighting Unwanted Daytime Memories, Images, Thoughts, Daydreams Flashbacks, Feeling Like You're Reliving the Traumatic Event Somatic Flashbacks (Physical Pain / Medical Condition Linked to the Feeling or Bodily States Associated with the Traumatic Event)

Fixated on War Experience, Living the Past

Spontaneous Psychotic Episodes (the World Vanishes and you're Suddenly Somewhere Else, Experiencing Some Sort of Trauma)

Panic Attacks, Undefined Dread or Fear

Phobias

Avoidance Symptoms:

People who have suffered trauma attempt to avoid situations, people, events, and even objects that remind them of the event. They feel numb, emotionless, withdrawing into themselves trying to keep the painful memories and feelings out of their system. Friends, family, and loved ones feel rejected, as they are unable to show appropriate affection and emotion.

Avoiding anyone or anything that reminds you of the traumatic event

Physical/emotional reaction to things that remind you of the traumatic event

Self-isolating, dread or social interaction

Anxiety in crowds, traffic

Despair, depression, sadness, emptiness, loneliness

Inability to trust others

Very reluctant to talk about your traumatic event

Lack of interest or motivation regarding employment, recreation, former hobbies, sex, exercise

Relationships that were once close and even intimate are now strained, cold, distant, requiring too much energy to maintain

Emotional numbness, flat, can't get happy or sad, 'dead inside'

Substance abuse to 'numb' yourself (drug, alcohol, food)

Suicidal thoughts

Suicide attempts

Physical fatigue

Neglect/abandon personal care, hygiene, nutrition, exercise