PTSD Checklist for DSM-5 (PCL-5)

	stressful experience.
1)	Please read each problem carefully and then select a response to indicate how much you have been bothered by that problem in the past month.
	○ Continue
	In the past month, how much were you bothered by:
2)	Repeated, disturbing, and unwanted memories of the stressful experience?
	 Not at all A little bit Moderately Quite a bit Extremely
	In the past month, how much were you bothered by:
3)	Repeated, disturbing dreams of the stressful experience?
	 Not at all A little bit Moderately Quite a bit Extremely
	In the past month, how much were you bothered by:
4)	Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?
	 Not at all A little bit Moderately Quite a bit Extremely
	In the past month, how much were you bothered by:
5)	Feeling very upset when something reminded you of the stressful experience?
	 Not at all A little bit Moderately Quite a bit Extremely

₹EDCap°

	In the past month, how much were you bothered by:
5)	Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
7)	Avoiding memories, thoughts, or feelings related to the stressful experience?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
3)	Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the next weath here were very betheved here
	In the past month, how much were you bothered by:
9)	Trouble remembering important parts of the stressful experience?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
101	
10)	Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely

₹EDCap°

	In the past month, how much were you bothered by:
11)	Blaming yourself or someone else for the stressful experience or what happened after it?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
12)	Having strong negative feelings such as fear, horror, anger, guilt, or shame?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
13)	Loss of interest in activities that you used to enjoy?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
14)	Feeling distant or cut off from other people?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
15)	Trouble experiencing positive feelings (for example, being unable to feel happiness or have loving feelings for people close to you)?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely

₹EDCap°

	In the past month, how much were you bothered by:
16)	Irritable behavior, angry outbursts, or acting aggressively?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
17)	Taking too many risks or doing things that could cause you harm?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
18)	Being "superalert" or watchful or on guard?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
19)	Feeling jumpy or easily startled?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely
	In the past month, how much were you bothered by:
20)	Having difficulty concentrating?
	 ○ Not at all ○ A little bit ○ Moderately ○ Quite a bit ○ Extremely



In the past month, how much were you bothered by:

21)	Trouble falling or staying asleep?
	○ Not at all○ A little bit○ Moderately○ Quite a bit
	Extremely



09/24/2021 2:11pm