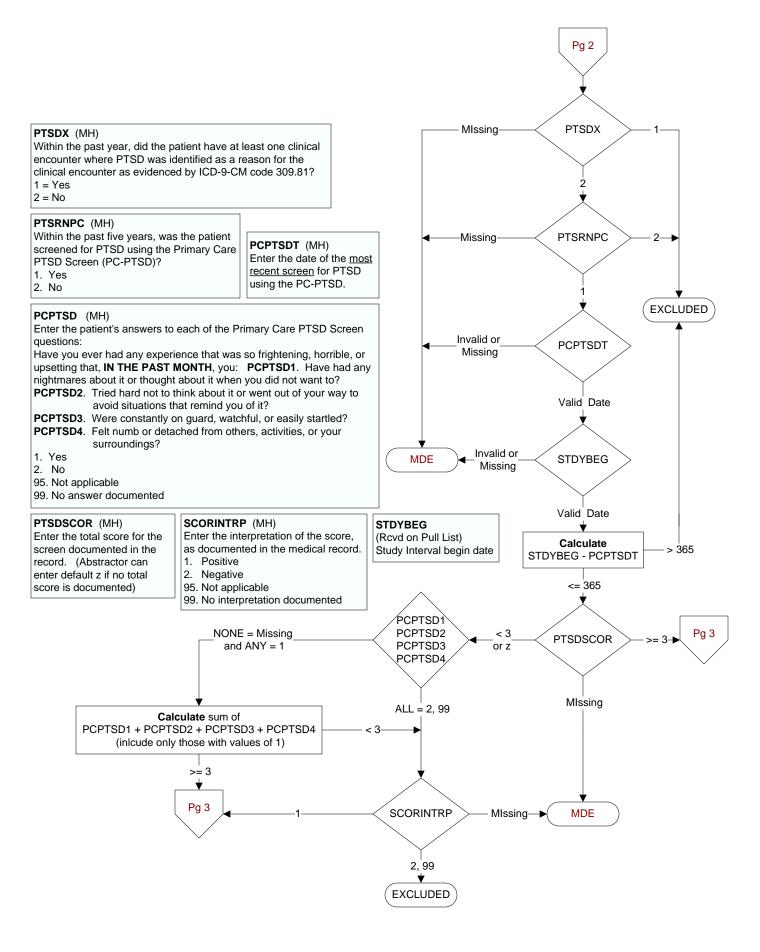


(data error)

Pg 2



### PTSDEVAL (MH)

Following the positive PC-PTSD screen, did the provider document the patient needed further intervention for PTSD?

- 1. Yes, documented further intervention needed
- 2. Documented no further intervention needed 99. No documentation regarding further intervention

#### NOPTSINT (MH)

Did the provider document the patient refused further evaluation/treatment for PTSD?

- 1. Yes
- 2. No

#### PTSDCARE (MH)

Did the provider document the patient was already receiving recommended care for PTSD?

- 1. Yes
- 2. No

### OUTPTSD (MH)

Did the provider document the patient was to receive care for PTSD outside this VA?

- 1. Yes
- 2. No

## PTSDMHEVL (MH)

Following the positive PC-PTSD screen, did the provider document that the patient needed a mental health evaluation?

- 1. Yes, mental health evaluation needed
- 2. No mental health evaluation needed
- 99. No documentation regarding mental health evaluation

## PCPTSDFO (MH)

Did the provider document that the patient will follow-up with a primary care provider for the positive PC-PTSD screen?

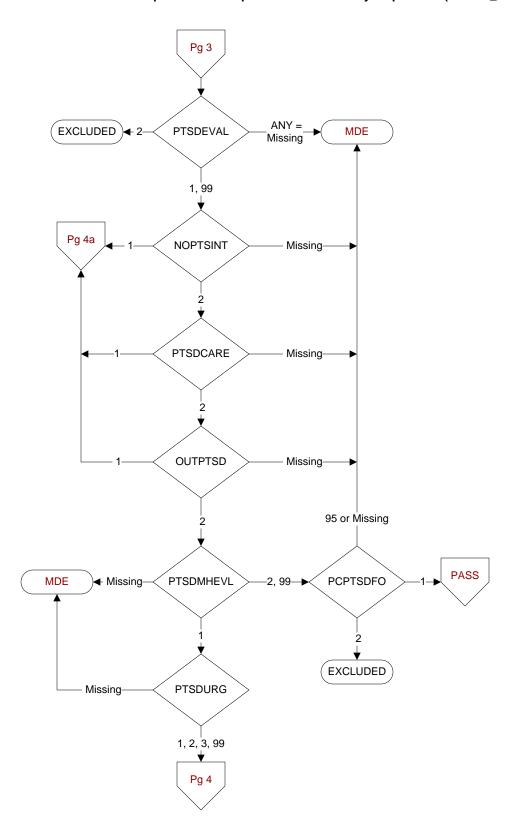
- 1. Yes
- 2. No
- 95. Not applicable

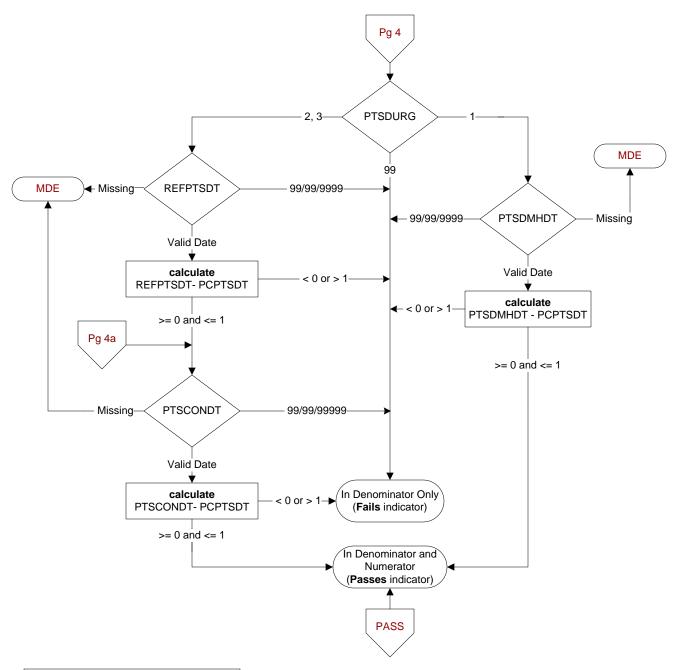
### PTSDURG (MH)

Following the positive PTSD screen, did the provider document the urgency of the mental health evaluation?

- Immediate/emergent mental health evaluation needed
- 2. Urgent mental health evaluation needed
- 3. Non-urgent mental health evaluation needed

99. No documentation of urgency of care





# REFPTSDT (MH)

Enter the date the mental health consult was placed.

### PTSDMHDT (MH)

Enter the date the patient was <u>emergently</u> transferred to mental health care services.

### PTSCONDT (MH)

Enter the date the licensed independent provider documented that contact information was provided to the patient.