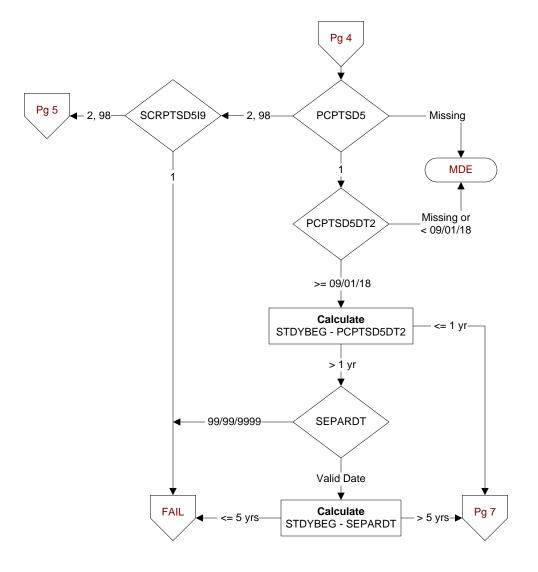
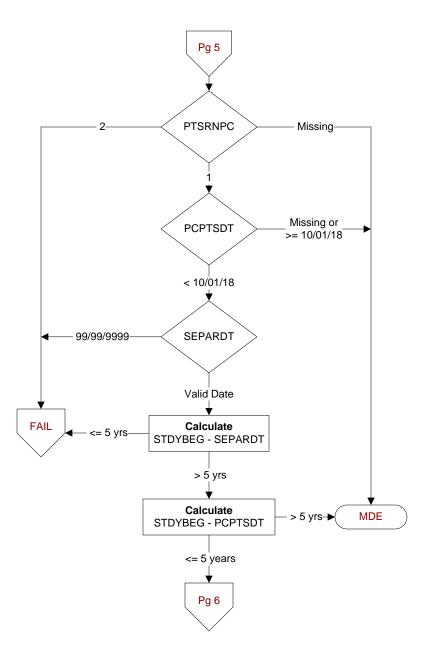


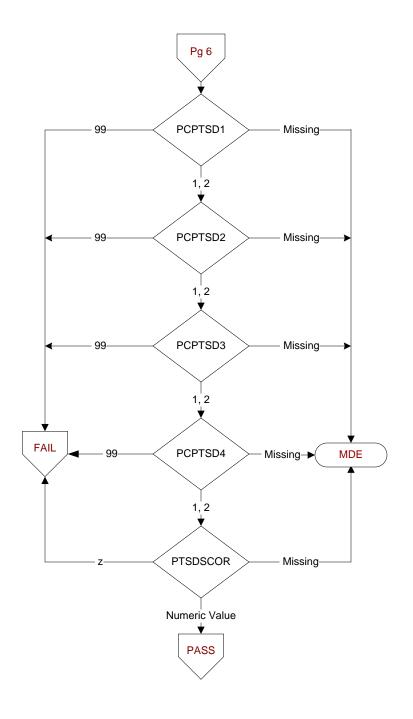
Enter the date of the <u>most recent screen</u> for PTSD using the PC-PTSD5+ I9.



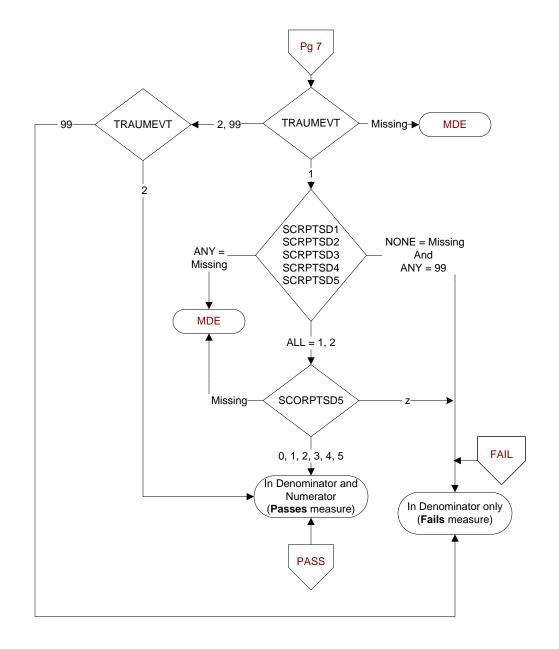
PTSD using the Primary Care PTSD5 (PC-PTSD5)?	PCPTSD5DT2 (MH)
1. Yes	Enter the date of the <u>most recent screen</u>
2. No	for PTSD using the PC-PTSD5.
98. Patient refused screening by the PC-PTSD5	



PTSRNPC (MH) Within the past five years and prior to 10/01/ 2018, was the patient screened for PTSD using the Primary Care PTSD Screen (PC-PTSD)? 1. Yes 2. No	PCPTSDT (MH) Enter the date of the <u>most</u> recent screen for PTSD using the PC-PTSD.
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PCPTSD (MH)	
Enter the patient's answers to each of the Primary Care PTSD Screen questions:	
Have you ever had any experience that was so frightening, horrible, or upsetting that, IN	
THE PAST MONTH, you:	
PCPTSD1. Have had any nightmares about it or thought about it when you did not want to?	
PCPTSD2 . Tried hard not to think about it or went out of your way to avoid situations that remind you of it?	
PCPTSD3. Were constantly on guard, watchful, or easily startled?	
PCPTSD4. Felt numb or detached from others, activities, or your surroundings?	PTSDSCOR (MH)
1. Yes	Enter the total score for the screen
2. No	documented in the record.
95. Not applicable	(Abstractor can enter default z if no
99. No answer documented	total score is documented)



TRAUMEVT (MH)	(MH) Enter the patient's answers to each of the	
Enter the response documented in the record for	PC-PTSD5 Screen questions:	
PC-PTSD5 exposure to traumatic event(s).	In the past month, have you:	
Sometimes things happen to people that are	SCRPTSD1. Had nightmares about the event(s)	
unusually or especially frightening, horrible, or	or thought about the event(s) when you did	
traumatic. For example:	not want to?	
 a serious accident or fire 	SCRPTSD2. Tried hard not to think about the	
 a physical or sexual assault or abuse 	event(s) or went out of your way to avoid	
an earthquake or flood	situations that remind you of the event(s)?	
• a war	SCRPTSD3. Been constantly on guard, watchful,	
 seeing someone be killed or seriously 	or easily startled?	
injured	SCRPTSD4. Felt numb or detached from people,	
 having a loved one die through homicide or 	activities, or your surroundings?	
suicide.	SCRPTSD5. Felt guilty or unable to stop blaming	
Have you ever experienced this kind of event?	yourself or others for the event(s) or any	
	problems the event(s) may have caused?	SCORPTSD5 (MH)
1. Yes	1. Yes	Enter the total score for the
2. No	2. No	PC-PTSD5 screen
99. Response not documented	99. Response not documented	documented in the record