

Adult PTSD Screening and Management

PTSD Screener

see website or Epic BH/Collab Care tab.

.PTSDSCREEN to add results to note

PTSD Symptom Checklist

1. Patient Education & Resources (all available on website, *in Epic: attach to AVS in Wrap-Up, click Add and search UCM)

Self-Management: Trauma Patient Education*, Mental Health Apps*, My Plan to Manage Stress*, Reactions to Stress*, CBT Basics, Grounding Exercise, Mindfulness Skills

Social Support: Increasing Social Connection*, Talking to Your Loved Ones About Your Mental Health

Specific Topics: Grief*, Intimate Partner/Domestic Violence*, Sexual Violence*, LGBTQ Mental Health Resources*

2. Recommended Therapy (in-person or telehealth, see website for list of community partners who offer these therapies, use .BHIPreferral to collect info and email referral)

Cognitive Processing Therapy (CPT): learn to identify, challenge, and modify unhelpful thoughts and beliefs related to traumatic experiences; typically 12 weekly sessions with homework between sessions to practice skills

Eye Movement Desensitization and Reprocessing (EMDR): pay attention to visual or sound cues while recalling memories; aims to change how traumatic memories are stored and reduce symptoms from unprocessed memories; typically one or more sessions per week for a total of 6-12 sessions

Prolonged Exposure (PE): decrease avoidance and face fears by learning techniques to manage anxiety then gradually increasing exposure to trauma-related memories, feelings, and situations: typically one session per week for 3 months

Trauma exposure Recent Trauma (< 30 days ago) Assess current/ongoing safety AND

Address immediate physical/social needs AND Encourage reliance on social support AND Patient education and resources (see Box 1)

If distress/impairment → consider acute stress reaction or acute stress disorder dx AND refer to brief traumafocused CBT (DCAM BMed OR community partner)

Follow up in 4 weeks, if persistent/worsening symptoms, screen for PTSD

Score ≤ 33: Possible PTSD

≥ 30 days ago

Score ≥ 4

Patient education and resources (see Box 1)

AND

Screen/treat other conditions: Anxiety (GAD-2/7), Depression (PHQ-2/9), Suicidality (C-SSRS), Intimate Partner Violence (HITS), Substance Use

If distress/impairment → Refer to therapy (DCAM BMed OR community partner)

Score > 33: Likely PTSD

Patient education (see Box 1) AND Screen/treat other conditions AND

Preferred option: Refer to CPT, EMDR, or PE therapy (UCM Psych OR community partner, see Box 2) OR

Secondary option: Start SSRI/SNRI, consider prazosin for nightmares (see Box 3)

3. Recommended Medications

Sertraline (Zoloft) 50-200 mg/d Paroxetine (Paxil) 20-50 mg/d Venlafaxine XR (Effexor XL) 75-300 mg/d Prazosin 3-20 mg/d SSRI SSRI SNRI

a blocker

FDA for PTSD. Good for anxiety. Fewer interactions. CYP2d6. Lower dose needed in 10% Blacks. \$9-20 FDA for PTSD. Weight gain. Avoid in pregnancy. Sig withdrawal. CYP450 2d6. Lower dose needed in 10% Blacks. \$4-20 Off label for PTSD. Monitor BP. Sig withdrawal. CYP450 2d6. Lower dose needed in 10% Blacks. \$15-40 Off label for nightmares. Start 1 mg/d, ↑ 2mg every 2 weeks until clinical response or orthostatic symptoms/increased fall risk.

Readminister PTSD Symptom Checklist every 8 weeks

via MyChart, phone, or in person

Score ≤ 33 OR decreased by ≥ 10
Continue treatment and monitoring
symptoms for 12 months

Score > 33 OR increased/no change

Assess tx adherence and barriers AND

Start or increase frequency of therapy AND/OR Start, increase, or switch SSRI/SNRI

Note: elevated scores common around anniversary of trauma, consider remeasuring before changing tx

Lack of improvement after
≥ 3 months of
recommended therapy or
multiple drug trials at
clinically effective dose →
refer to Psychiatry (UCM
Psych OR community
partner)



PC-BHIP website