Trauma Screen

Name: _____ Date: _____

Stressful or scary events happen to many kids. Below is a list of stressful and scary events that sometimes happen. Mark YES if it happened to you. Mark NO if it didn't happen to you.

1. Serious natural disaster like a flood, tornado, hurricane, earthquake, or fire.	☐ Yes	☐ No
2. Serious accident or injury like a car/bike crash, dog bite, sports injury.	☐ Yes	☐ No
3. Robbed by threat, force or weapon.	☐ Yes	☐ No
4. Slapped, punched, or beat up in your family.	☐ Yes	☐ No
5. Slapped, punched, or beat up by someone not in your family.	☐ Yes	☐ No
6. Seeing someone in your family slapped, punched or beat up.	☐ Yes	☐ No
7. Seeing someone in the community slapped, punched or beat up.	☐ Yes	☐ No
8. Someone older touching your private parts when they shouldn't.	☐ Yes	☐ No
9. Someone forcing or pressuring sex, or when you couldn't say no.	☐ Yes	☐ No
10. Someone close to you dying suddenly or violently.	☐ Yes	☐ No
11. Attacked, stabbed, shot at or hurt badly.	☐ Yes	☐ No
12. Seeing someone attacked, stabbed, shot at, hurt badly or killed.	☐ Yes	☐ No
13. Stressful or scary medical procedure.	☐ Yes	☐ No
14. Being around war.	☐ Yes	☐ No
15. Other stressful or scary event?	☐ Yes	☐ No

Describe: _____

Which one is bothering you the most now? _____

If you answered NO to all of the above questions, STOP.
If you answered YES to any of the above questions, please complete the rest of this form.

When the event happened, did you feel?

Afraid I would die or be hurt badly.	☐ Yes	☐ No
Afraid someone else would die or be hurt badly.	☐ Yes	☐ No
Helpless to do anything.	☐ Yes	☐ No
Ashamed or disgusted.	☐ Yes	☐ No