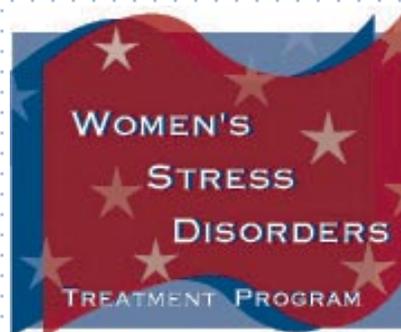


Assessing PTSD

—◆◆—
A guide for clinicians

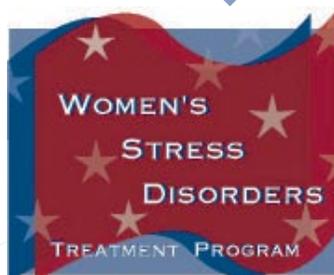


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Types of assessment

- ◆ **Brief Screening for PTSD in primary care**
- ◆ **Screening and Diagnosing PTSD**
 - Clinical interview
 - Client self-report measures
 - Clinician-administered measures



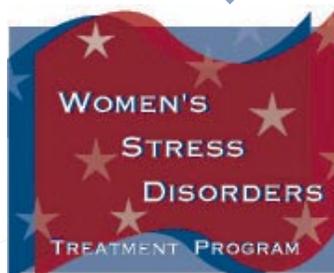
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Brief screening for PTSD

The National Center for PTSD (NCPTSD) recommends screening for PTSD in primary care. The NCPTSD has created a PTSD screening measure

(www.ncptsd.org/screen_disaster.html) to quickly and easily identify clients who would benefit from further evaluation for PTSD.

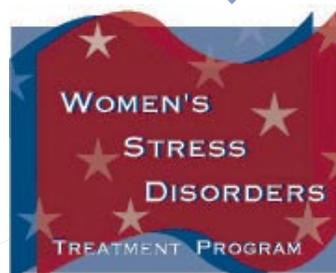


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Clinical interview

- ◆ Clinicians can assess for PTSD during a clinical interview in the same way that they assess for other psychiatric disorders. They may choose to employ the Structured Clinical Interview for DSM-IV (SCID-IV) for diagnosis.
- ◆ It is important to establish a “Criterion A” trauma before assessing further.
- ◆ Remember the “1, 3, 2” rule. In order to meet full criteria for PTSD, a client needs to have at least one symptom from cluster B (re-experiencing), 3 symptoms from cluster C (avoidance) and 2 symptoms from cluster D (hyperarousal).

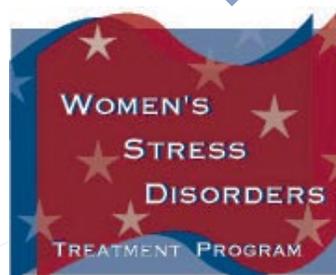


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Client self-report measures

- ◆ There are various self-report measures currently in use that have reasonably well-established psychometric data. These measures may be specific to one type of population or trauma. Measures should be used to assist in diagnosis and not as a sole means of assessing for a disorder.
- ◆ The Mississippi Scale for Combat-Related PTSD (www.ncptsd.org/treatment/assessment/adult_self_report.html#MISSISSIPPI) (Keane, Caddell, & Taylor, 1988) is a widely-used, psychometrically sound, clinical measure of PTSD in combat veterans.

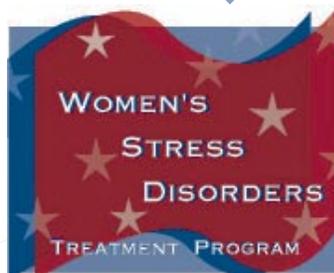


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Client self-report measures (cont.)

- ◆ **The Posttraumatic Stress Diagnostic Scale**
(assessments.ncspearson.com/assessments/tests/pds.htm) (Foa, 1995) - aids in the diagnosis of DSM-IV PTSD and assesses the impact of PTSD on functioning. It can track treatment outcomes.
- ◆ **The Davidson Trauma Scale (Davidson, Book, Colket, et al, 1997)** (www.mhs.com) aids in the diagnosis of DSM-IV PTSD and can track treatment outcomes.



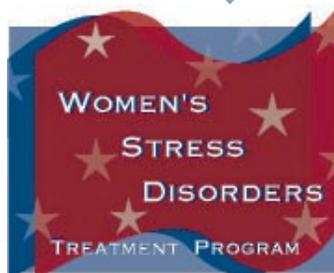
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Clinician-Administered Measures

There are two clinician-administered measures of PTSD that are currently the gold standard for diagnosis of PTSD:

- ◆ **The Clinician-Administered PTSD Scale (CAPS)**
(www.ncptsd.org/treatment/assessment/adult_interviews_chart.html)
- ◆ **The SCID-IV PTSD module**
(www.ncptsd.org/treatment/assessment/adult_interviews_chart.html)

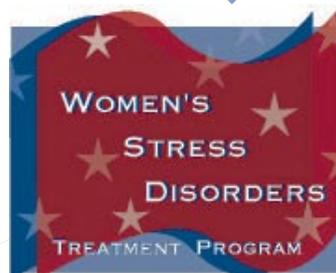


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Special issues in assessing PTSD

- ◆ Describing the criterion A trauma and discussing PTSD symptoms can be distressing to some clients. It is important to modulate the pace, nature, and length of assessment accordingly. See Briere (1997) for an excellent discussion of critical issues in assessment.
- ◆ There are many common co-occurring disorders including anxiety, depression, dissociation, and substance abuse. These disorders should be assessed too.

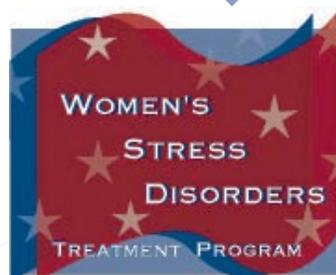


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Special issues in assessing PTSD

If a client does not meet full criteria for PTSD, but does have some symptoms, you may choose to describe this as “Post-Traumatic Stress Syndrome” or “sub-threshold PTSD.” They may still be very distressed by their symptoms and this should not be lost in diagnosis.

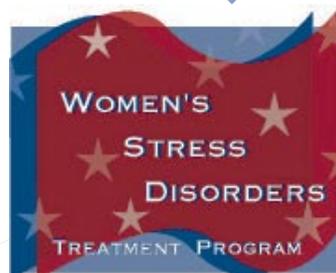


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References

- ◆ Briere, J. (1997). *Psychological Assessment of Posttraumatic States*. Washington, DC: American Psychological Association.
- ◆ Davidson, J.R. et al. (1997). Assessment of a new self-rating scale for post-traumatic stress disorder. *Psychological Medicine*, 27, 153-160.
- ◆ Foa, E. B. (1995). *Posttraumatic Stress Diagnostic Scale (PDS) Manual*. Minneapolis: National Computer Systems.
- ◆ Keane, T. M., Caddell, J.M., & Taylor, K.L. (1988). Mississippi scale for combat-related posttraumatic stress disorder: Three studies in reliability and validity. *Journal of Consulting and Clinical Psychology*, 56, 85-90.



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