

TRAUMATIC EXPOSURE PROTOCOL

POTENTIALLY TRAUMATIZING EVENT (PTE) CRITERIA

- FAMILY CONTACT
- PERSONAL CONNECTION OR EMPLOYEE INVOLVEMENT
- DUTY TO ACT
- MISSION INJURY/ HELPLESSNESS
- EXTREMES OF EXPOSURE
- OVERWHELMED/DEPLETION
- INCIDENTS INVOLVING CHILDREN
- COMPLEXITY OF INCIDENT
- FIRST TIME EXPOSURE

3-3-3 EXPOSURE PROTOCOL

3 DAYS POST INCIDENT

Stress Continuum Check-in

Normalization/Education

Leverage **GREEN** Choices (make a plan)

Self & Partner Awareness
(Support Return to Baseline)

Life Stressors Check-in

3 WEEKS POST INCIDENT

Complete TSQ

Scores > 6 = increase risk of stress injury development

Provide Resources for Professional Support

Stress Continuum Check-in

Revisit Plan to return to Green Baseline

3 MONTHS POST INCIDENT

Stress Continuum Check-in

Revisit Plan to return to Green Baseline

Offer Resources and Connection

Offer Further check-ins if requested.

TRAUMATIC STRESS QUESTIONNAIRE

COMPLETE AT THE 3 WEEK CHECK-IN. ASKING THE QUESTION:
HAVE YOUR RECENTLY EXPERIENCED ANY OF THE FOLLOWING?

(AT LEAST TWICE IN THE PAST WEEK)

	YES	NO
1. Upsetting thoughts or memories about the event that have come into your mind against your will?	<input type="checkbox"/>	<input type="checkbox"/>
2. Upsetting dreams about the event?	<input type="checkbox"/>	<input type="checkbox"/>
3. Acting or feeling as though the event were happening again?	<input type="checkbox"/>	<input type="checkbox"/>
4. Feeling upset by reminders of the event?	<input type="checkbox"/>	<input type="checkbox"/>
5. Bodily reactions (such as fast heartbeat, stomach churning)?	<input type="checkbox"/>	<input type="checkbox"/>
6. Difficulty falling or staying asleep?	<input type="checkbox"/>	<input type="checkbox"/>
7. Irritability or outbursts of anger?	<input type="checkbox"/>	<input type="checkbox"/>
8. Difficulty concentrating?	<input type="checkbox"/>	<input type="checkbox"/>
9. Heightened awareness of potential dangers to yourself and others?	<input type="checkbox"/>	<input type="checkbox"/>
10. Feeling jumpy or being startled by something unexpected?	<input type="checkbox"/>	<input type="checkbox"/>