

**Special Indicators for Children & Adolescents
Posttraumatic Stress Disorder – Code 309.81**

Client Name: _____
Medicaid ID: _____
DOB: _____

NOTE: Please see the PTSD Diagnostic Tool for APA DSM diagnostic criteria, as this diagnostic tool is meant to provide additional indicators specific to children and adolescents pertaining to the PTSD diagnosis. PLEASE REVIEW THE DSM-IV-TR CRITERIA, THEN COMPLETE THIS FORM TO ENSURE ACCURATE DIAGNOSIS AND TO FURTHER CLARIFY PRESENTING SX AND DETAILS OF FUNCTIONAL IMPAIRMENTS.

Posttraumatic Stress Disorder is NOT an active diagnosis. If PTSD is not an active diagnosis, sign and date the form at the bottom, no other information is required.

Posttraumatic Stress Disorder is an active diagnosis.

APA Diagnostic Criteria

List Stressor _____

Pertaining to Part B of the DSM PTSD criteria, “The traumatic event is persistently re-experienced in one (or more) of the following ways,” these elements may also exist in children:

(1) In young children, repetitive play may occur in which themes or aspects of the trauma are expressed.

SPECIFIC BRIEF EXAMPLE(S): _____

(2) In children, there may be frightening dreams without recognizable content.

FREQUENCY OF DREAMS/NIGHTMARES, PER WEEK: _____

Returns to sleep wakes crying/screaming/other reports dreams to caregiver/s

(3) In young children, trauma-specific reenactment may occur.

SPECIFIC BRIEF EXAMPLE(S): _____

Age Specific Indicators

Age 5 years and younger:

(1) Fear of being separated from the parent – crying, whimpering, screaming, immobility and/or aimless motion, trembling, frightened facial expressions and excessive clinging.

(2) Parents may also notice children returning to behaviors exhibited at earlier ages such as thumb-sucking, bedwetting, and fear of darkness

(3) Worries about re-occurrence of the violence or traumatic event.

(4) Children in this age bracket tend to be strongly affected by the parent(s) reactions to the traumatic event.

Children 6 to 11 years of age:

(1) May show extreme withdrawal, disruptive behavior, and/or inability to pay attention.

(2) Nightmares, sleep problems, irrational fears, irritability, refusal to attend school, changes in eating habits, outbursts of anger, fighting, and/or repetitive thoughts of death and dying.

(3) Complaints of stomachaches or other bodily symptoms that have not medical basis.

(4) School work often declines.

(5) Symptoms of depression and/or anxiety, as well as feelings of guilt, flat affect, and emotional numbing resulting in lack of interest in once enjoyed activities.

(6) Increased sensitivity to sounds, such as sirens, planes, thunder, backfires, and other loud noises.

Adolescents 12-17 years of age:

(1) May exhibit responses similar to those of adults, including flashbacks, nightmares, emotional numbing, and avoidance of any reminder of the traumatic event.

(2) Symptoms of depress and/or substance abuse.

(3) Problems with peers and anti-social behaviors; hate and anger statements.

(4) Withdrawal and isolation, physical complaints, suicidal thoughts, school avoidance, academic decline, sleep disturbances, and confusion.

(5) May feel extreme guilt over his/her failure to prevent injury or loss of life.

(6) May harbor revenge fantasies that interfere with recovery from the trauma.

Reviewer’s Name: _____

Date: _____

Reviewer’s Signature: _____

Supervisor’s Name: _____

Date: _____

Supervisor’s Signature: _____

Telephone #: _____