Harborview 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 by someone in your family. ☐ Yes ☐ No
5. Slapped, punched, or beat up by someone <u>not</u> in your family. ☐ Yes ☐ No
6. Seeing someone in your family slapped, punched or beat up. ☐ Yes ☐ No

6a. Hearing someone in your family (or knowing about someone in your family) being 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 sexual acts 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. Suicide attempted or completed by a family member. ☐ Yes ☐ No
16. Suicide attempted or completed by a friend. ☐ Yes ☐ No
17. Family members taken away by police. ☐ Yes ☐ No
18. Family members ill/sick for a long time. ☐ Yes ☐ No
19. Family members dying. ☐ Yes ☐ No
20. Being bullied. ☐ Yes ☐ No
21. Being told that you are no good. ☐ Yes ☐ No
22. Having to move. ☐ Yes ☐ No
23. 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.

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