Trauma Reaction Cards Checklist

Client Name:_____ Date:_____

Behavior Reactions

☐ Hitting	☐ Arguing	☐ Not Listening /Defiance
☐ Fighting	☐ Cursing	☐ Breaking Things
☐ Running away	☐ Crying	☐ Outbursts of anger
☐ School Problems	☐ Lying	☐ Bathroom Problems
☐ Avoiding people, places, things, or sensations related to the trauma	☐ Acting younger than you are	☐ Isolating yourself from others
	☐ Unsafe sexual practices	☐ Trying to end your life
	☐ Stealing	☐ Trouble with eating
☐ Hurting your own body	☐ Tantrums	☐ Using drugs/alcohol/cigarettes
☐ Taking out your feelings on people you care about	☐ Difficulty separating from caregivers	☐ Trouble getting along with others
☐ Trusting others too quickly/ Inappropriate boundaries	☐_____	☐_____
	☐_____	☐_____

Body Reactions

☐ Feeling like you are re-experiencing the trauma	☐ Being on guard or constantly alert	☐ Feeling disconnected from your body
☐ Jumpy or Easily Startled	☐ Trouble with eating	☐ Hyperactive
☐ Body Feeling Shaky	☐ Feeling short of breath	☐ Nightmares
☐ Trouble with sleep	☐ Bellyaches/Nausea	☐ Headaches
☐ Low energy	☐ Body Feeling of Panic	☐_____
☐ Body or muscles tense	☐_____	☐_____

Feelings Reactions

☐ Guilty	☐ Having worries	☐ Sad
☐ Angry	☐ Nervous/anxious	☐ Moody/Irritable
☐ Ashamed	☐ Depressed	☐ Helpless
☐ Numb	☐ Betrayed	☐ Hopeless about Future
☐ Rejected	☐ Easily Upset	☐ Not caring about others
☐ Not enjoying the things used to	☐ Feeling different from others	☐ Embarrassed

Brain & Thinking Reactions

☐ "Everyone is unsafe"	☐ Not trusting others	☐ "It's my fault" or blaming self
☐ "The world is a bad place"	☐ "I am bad"	☐ Memories/Flashbacks
☐ Difficulty Concentrating/ Focusing	☐ Forgetting parts of the trauma	☐ Trying to keep feelings/ thoughts of trauma out of head
☐ Thinking nothing good will ever happen	☐ Thinking about the safety of loved ones	☐ Thoughts about what happened pop into you head
☐ Thinking about the trauma often	☐ Thinking about dying/ wanting to die	☐ Pictures of what happen pop into your head