



POST TRAUMATIC STRESS DISORDER

FACT SHEET

POST-TRAUMATIC STRESS DISORDER (PTSD), also known as "shell shock," is a type of anxiety condition. It can occur after a person has seen or experienced a traumatic event that involved the threat of injury or death. PTSD symptoms usually start soon after the traumatic event, but may not happen until months or years later. Symptoms may also come and go over many years. During the initial readjustment period (3-6 months) after deployment, it is normal to experience Combat Operational Stress with PTSD-like symptoms. However, if after the initial readjustment period or at any time PTSD symptoms are affecting day-to-day activities (i.e. interfering with work or home life); an individual should be evaluated to see if they are suffering from PTSD.

Symptoms of PTSD are as follows:

- Repeated "reliving" of the event, which disturbs day-to-day activity. This could include: flashback episodes triggered by sight, sounds or smells; recurrent distressing memories of the event; repeated dreams of the event; and physical reactions to situations similar to the original traumatic event.
- Avoidance, which could include: emotional "numbing"; feelings of detachment; inability to remember important aspects of the trauma; lack of interest in normal activities; less expression of moods; staying away from places, people, or objects that resemble or are related to the event; sense of having no future.
- Arousal and or difficulty concentrating, which could include: exaggerated responses to unexpected events; hyper vigilance; irritability or outbursts of anger; sleeping difficulties.

There are screening tools available to help medical providers identify whether you or a loved one is suffering from symptoms of PTSD. There are also many medical and

alternative treatments and therapies available for those suffering from PTSD, some of these include: counseling, cognitive-behavioral therapy, eye movement desensitization and reprocessing, exercise therapy, acupuncture and medications to name a few.

COMMAND ASSISTANCE

The WWR Clinical Staff is available to assist Wounded, Ill and Injured (WII) Marines, their families and commands with the following:

- Coordination of assistance and care at varying medical facilities and with charitable organizations
- Providing outreach education about PTSD
- Assist commands in evaluating the needs of a WII Marine and answering questions about medical symptoms and diagnosis
- Discuss coping and resiliency resources with Marines and family members after deployment
- Reviewing the Post-Deployment Health Reassessment (PDHRA) and addressing any questions or unresolved issues

If you or a loved one is experiencing symptoms of PTSD, make an appointment with your primary care manager. If you need counseling or help locating services, please contact:

Sergeant Merlin German
Wounded Warrior Call Center
24/7 toll free at 1-877-487-6299

THE WOUNDED WARRIOR REGIMENT

The Wounded Warrior Regiment (WWR) stood up in April 2007 and immediately began to assume responsibilities for non-medical Wounded Warrior care. **The mission of the WWR is to provide and facilitate assistance to WII Marines, Sailors attached to or in direct support of Marine units, and their family members, throughout the phases of recovery.** The Regimental Headquarters element, located in Quantico, Virginia, coordinates the operations of two Wounded Warrior Battalions located at Camp Pendleton, California, and Camp Lejeune, North Carolina. The Regimental Headquarters provides unity of command and unity of effort through a single Commander who provides guidance, direction, and oversight to the Marine Corps WII non-medical care process and ensures continuous improvements to care management and the seamless transition of recovering Marines.



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