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Sample report

# Trauma & PTSD Test (PCL-5)

Self-assessment questionnaire

| Prepared for | Date | Questions | Reference |
|---|---|---|---|
| Fatima Al-Hassan | March 21, 2026 | 20 | 00000024 |

**Contents**


1 Your result p. 2

2 What your answers say p. 3

3 Next steps p. 4

4 Prepare your appointment p. 5

5 Your answers p. 6

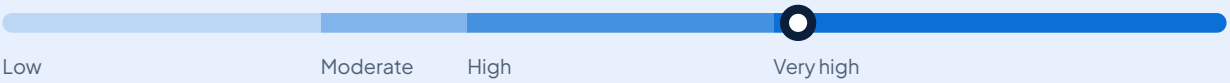

This report is a self-assessment tool. It is not a medical or psychological diagnosis.

# Your result

**52** / 80

## Severe PTSD – Please Seek Help

65 % of the maximum score




Severe post-traumatic stress symptoms causing significant distress and impairment.

## By dimension

As a percentage of each dimension's maximum, so they can be compared.

| | | |
|---|---|---|
| **Negative thoughts and mood** | **46 %** | 13 / 28 |
| **Arousal and reactivity** | **46 %** | 11 / 24 |
| **Re-experiencing** | **35 %** | 7 / 20 |
| **Avoidance** | **50 %** | 4 / 8 |

Least marked  Most marked

# What your answers say

Written by Claude (Anthropic) from your answers.

**Least marked**

**Re-experiencing · 35 %**

**Most marked**

**Negative thoughts and mood · 46 %**

**Arousal and reactivity · 46 %**

Thank you for taking the time to complete this screening and for having the courage to look closely at your own experiences. Reflecting on difficult memories and their impact on daily life is not easy, and the fact that you engaged with this process speaks to real strength and self-awareness. If the past weeks or months have felt heavy, overwhelming, or exhausting, please know that what you're feeling is a valid and understandable response to what you've been through. You are not alone, and many people who carry similar experiences find themselves navigating the same kinds of struggles.

Your results, with a total score of 52 out of 80, fall into a range that suggests you may be experiencing a significant level of distress related to past traumatic events. Looking at the breakdown, it seems that intrusive thoughts or memories, avoidance of reminders, difficult shifts in mood or beliefs about yourself and the world, and heightened alertness or reactivity are all showing up in meaningful ways for you. This pattern often reflects how deeply a difficult experience can affect the mind and body long after the event itself has passed. Please remember that this screening tool is not a clinical diagnosis; it is simply a starting point for understanding your current experience and deciding on next steps.

In the meantime, there are gentle, supportive steps you might consider. Grounding techniques, such as focusing on your breath or naming five things you can see and hear, can help calm moments of intense distress. Creating small pockets of safety in your daily routine, whether through rest, movement, creative expression, or spending time with people who feel supportive, can also offer relief. Journaling your thoughts and feelings, even briefly, can help you process what feels overwhelming and notice patterns over time.

Most importantly, please consider reaching out to a licensed mental health professional, such as a trauma-informed therapist or counselor, who can offer a thorough evaluation and personalized support. Healing is absolutely possible, and with the right guidance, many people find meaningful relief and renewed hope. Taking this screening was a brave first step, and reaching out for professional care can be the next one toward feeling more like yourself again.

# Next steps

Pick one or two. Regularity matters more than duration.

Recommendation

### Severe PTSD – Please Seek Help

Please reach out to a mental health professional as soon as possible. PTSD is highly treatable.

### To talk about it with a professional

Psychologist, therapist, doctor: this report can start the conversation.

- Bring page 2 (result by dimension).
- Note one or two situations that were hard for you lately.
- Say what you would like to change, even vaguely.

**Need to talk to someone now?** Call Suicide & Crisis Lifeline on **988**, or 911 in an emergency.

This report is a self-assessment tool. It does not replace an assessment by a professional. For a reliable diagnosis, see a neuropsychologist, a psychiatrist or another qualified healthcare professional.

# Prepare your appointment

Doctor, psychiatrist, psychologist, neuropsychologist: bring this page. Fill it in a few days before, when examples come to mind.

### My key figures

**Trauma & PTSD Test (PCL-5)** · 52 / 80 (65 %) · Severe PTSD - Please Seek Help

Most marked: Negative thoughts and mood (46 %), Arousal and reactivity (46 %)

Test taken on March 21, 2026 · reference 00000024

### Examples from my daily life

Work or studies, home, relationships: two or three concrete situations, with what happened.

### Since when?

Was it already there in childhood or adolescence? School reports or a relative's memories can help.

### What I would like to change

Even vaguely: what costs you the most energy today.

### Questions I can ask

- ☐ Is a full assessment useful in my case, and with whom?
- ☐ How long is the wait, and what can I do in the meantime?
- ☐ Could something else explain this (sleep, stress, thyroid, another condition)?
- ☐ What support exists, at work or in my studies?
- ☐ What should I bring next time?

# Your answers

Scale from “Not at all” to “Extremely”.

| # | Question | Your answer | Pts |
|---|---|---|---|
| **Re-experiencing · 7 / 20** | | | |
| 1 | Repeated, disturbing, and unwanted memories of the stressful experience. | Moderately | 2 |
| 2 | Repeated, disturbing dreams of the stressful experience. | A little bit | 1 |
| 3 | Suddenly feeling or acting as if the stressful experience were happening again (flashbacks). | A little bit | 1 |
| 4 | Feeling very upset when something reminds you of the stressful experience. | Moderately | 2 |
| 5 | Having strong physical reactions when something reminds you of the stressful experience. | A little bit | 1 |
| **Avoidance · 4 / 8** | | | |
| 6 | Avoiding memories, thoughts, or feelings related to the stressful experience. | Moderately | 2 |
| 7 | Avoiding external reminders of the stressful experience (people, places, activities). | Moderately | 2 |
| **Negative thoughts and mood · 13 / 28** | | | |
| 8 | Trouble remembering important parts of the stressful experience. | Moderately | 2 |
| 9 | Having strong negative beliefs about yourself, other people, or the world. | A little bit | 1 |
| 10 | Blaming yourself or someone else for the stressful experience. | Moderately | 2 |
| 11 | Having strong negative feelings such as fear, horror, anger, guilt, or shame. | Moderately | 2 |
| 12 | Loss of interest in activities that you used to enjoy. | Moderately | 2 |
| 13 | Feeling distant or cut off from other people. | Moderately | 2 |
| 14 | Trouble experiencing positive feelings (happiness, love, joy). | Moderately | 2 |
| **Arousal and reactivity · 11 / 24** | | | |
| 15 | Irritable behavior, angry outbursts, or acting aggressively. | Moderately | 2 |
| 16 | Taking too many risks or doing things that could cause you harm. | Moderately | 2 |
| 17 | Being 'superalert', watchful or on guard (hypervigilant). | Moderately | 2 |

| # | Question | Your answer | Pts |
|---|---|---|---|
| 18 | Feeling jumpy or easily startled. | A little bit | **1** |
| 19 | Having difficulty concentrating. | Moderately | **2** |
| 20 | Trouble falling or staying asleep. | Moderately | **2** |