



## ***DSM-5-TR* Diagnostic Criteria for Acute Stress Disorder**

- **Criterion A.** Exposure to actual or threatened death, serious injury, or sexual violence in  $\geq 1$  of the following ways:
  1. Direct experience
  2. Witnessing event(s) in person
  3. Learning the event(s) occurred to a close family member/friend
    - If actual or threatened death of family member/friend, the event(s) must have been violent or accidental.
  4. Repeated or extreme exposure to aversive details of event(s)
    - Examples: first responders collecting human remains, police officers repeatedly exposed to details of child abuse.

- Does *not* apply to media exposure unless work related.
- **Criterion B.** At least 9 of the following sx from any of the 5 categories (intrusion, negative mood, dissociation, avoidance, and arousal), beginning or worsening after the traumatic event(s) occurred:
  - Intrusion sx
    1. Recurrent, involuntary, and intrusive distressing memories of the event(s)
    2. Recurrent distressing dreams in which the content or affect of the dream is related to the event(s)
    3. Dissociative rxns (e.g., flashbacks) in which the individual feels or acts as if the traumatic event was recurring. Most-extreme expression may be complete loss of awareness of present surroundings.
    4. Intense or prolonged psychological distress or marked physiological rxns to internal or external cues that symbolize or resemble an aspect of the event(s)

- Negative mood

- 5. Persistent inability to experience positive emotions—e.g., happiness, satisfaction, loving feelings

- Dissociative sx

- 6. Altered sense of the reality of one's surroundings or oneself—e.g., seeing oneself from another's perspective, being in a daze, time slowing

- 7. Inability to remember an important aspect of the event(s), typically due to dissociative amnesia and not to other factors such as head injury, alcohol, or drugs

- Avoidance sx

- 8. Efforts to avoid distressing memories, thoughts, or feelings about or closely assoc w/ the event(s)

- 9. Efforts to avoid external reminders (people, places, conversations, activities, objects, situations) that arouse distressing memories, thoughts, or feelings about or closely assoc w/ the event(s)

○ Arousal sx

10. Sleep disturbance—e.g., difficulty falling or staying asleep, restless sleep

11. Irritable behavior and angry outbursts (w/ little or no provocation), typically expressed as verbal or physical aggression toward people or objects

12. Hypervigilance

13. Problems w/ concentration

14. Exaggerated startle response

- **Criterion C.** Sx typically begin immediately after the trauma exposure but must persist for  $\geq 3$  days and  $< 1$ mo.
- **Criterion D.** Disturbance (Criterion B) causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- **Criterion E.** Disturbance isn't attributable to the physiological effects of a substance (e.g., medication or alcohol) or another medical condition (e.g., mild TBI) and isn't better explained by a brief psychotic d/o.

Source: Management of Posttraumatic Stress Disorder and Acute Stress Disorder Work Group. *VA/DoD Clinical Practice Guideline for Management of Posttraumatic Stress Disorder and Acute Stress Disorder*. U.S. Department of Veterans Affairs and U.S. Department of Defense; June 2023. Accessed April 19, 2024.

<https://www.healthquality.va.gov/guidelines/MH/ptsd/VA-DoD-CPG-PTSD-Full-CPGAug242023.pdf>