

OPTIONAL PEI OUTCOMES WORKSHEET
Trauma: Individual Cognitive Behavioral Therapy (CBT-Trauma)

ADMINISTRATIVE INFORMATION

| | | | |
|------------------|----------------------|--------------------|----------------------|
| Client ID | <input type="text"/> | Client First Name | <input type="text"/> |
| Client Last Name | <input type="text"/> | Therapist ID/NPI # | <input type="text"/> |
| Provider ID | <input type="text"/> | | |

BEGINNING OF TREATMENT INFORMATION

| | |
|-------------------------------------|----------------------|
| Date of First EBP Treatment Session | <input type="text"/> |
|-------------------------------------|----------------------|

BEGINNING OF TREATMENT QUESTIONNAIRES

**UCLA PTSD-RI DSM-5
Parent**
Clients Ages 7-18

| | |
|---|----------------------|
| Admin. Date | <input type="text"/> |
| RAW SCORE | <input type="text"/> |
| If "Unable to Collect," Enter Number from Below | <input type="text"/> |

**UCLA PTSD-RI DSM-5
Child/Adolescent**
Clients Ages 7-18

| | |
|---|----------------------|
| Admin. Date | <input type="text"/> |
| RAW SCORE | <input type="text"/> |
| If "Unable to Collect," Enter Number from Below | <input type="text"/> |

PTSD Checklist for DSM-5
Clients Ages 19+

| | |
|---|----------------------|
| Admin. Date | <input type="text"/> |
| RAW SCORE | <input type="text"/> |
| If "Unable to Collect," Enter Number from Below | <input type="text"/> |

Reasons for "Unable to Collect"

- Administered Wrong Form
- Administration Date Exceeds Acceptable Range
- Client Refused
- Client Unavailable
- Clinician not Trained in Outcome Measure
- Invalid Outcome Measure
- Lost Contact with Client
- Lost Contact with Parent/Caregiver
- Not Available in Primary Language
- Outcome Measure Unavailable
- Parent/Caregiver Refused
- Parent/Caregiver Unavailable
- Premature Termination
- Therapist did not Administer Tool