



Essential Veteran Services

EVALUATIONS & NEXUS LETTERS

VETERAN-LED · INDEPENDENT · CONFIDENTIAL

PTSD Field Guide

Understanding How Trauma Can Show Up in Everyday Life

Trauma does not always look the way people expect it to.

Sometimes it looks like constantly watching the room. Sometimes it looks like anger, exhaustion, avoiding people, working all the time, sleeping poorly, or never quite feeling comfortable enough to let your guard down.

This guide can help you recognize those experiences, understand the clinical concepts behind them, and reflect on how they may be affecting your everyday life.

01 Recognize

02 Understand

03 Reflect

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CREATED BY ESSENTIAL VETERAN SERVICES

Veteran-led, independent psychological evaluations that document the connection between military service and mental health — clearly, honestly, and in the language the VA expects.

Start With Your Experience

Before reading anything about PTSD, symptoms, or clinical terminology, simply look through the experiences below.

Check anything that feels familiar — whether it happens occasionally or has become such a normal part of your life that you rarely think about it anymore.

MY EXPERIENCE CHECKLIST

- ☐ When I enter a restaurant, waiting room, or public space, I automatically notice the exits or choose where I sit based on what I can see.

Learn more: Hypervigilance + heightened arousal — [Page 6](#)

- ☐ Unexpected noises or movements make me jump, tense up, or react immediately.

Learn more: Hypervigilance + heightened arousal — [Page 6](#)

- ☐ Memories, images, dreams, or thoughts about something that happened to me sometimes appear when I do not want them to.

Learn more: Intrusive memories + re-experiencing — [Page 7](#)

- ☐ Certain sounds, smells, places, dates, situations, conversations, or media can suddenly change how I feel.

Learn more: Intrusive memories + triggers — [Pages 7 and 14](#)

- ☐ I avoid certain places, people, conversations, activities, or situations because I know how they may make me feel.

Learn more: Avoidance — [Page 8](#)

- ☐ There are things I do not like thinking or talking about, even with people I trust.

Learn more: Avoidance — [Page 8](#)

- ☐ I feel emotionally disconnected, numb, detached, or less able to experience positive emotions than I used to.

Learn more: Changes in mood + emotional connection — [Page 9](#)

- ☐ People close to me sometimes say I seem distant, different, cold, or difficult to reach.

Learn more: Changes in mood + emotional connection — [Page 9](#)

My Experience Checklist

- ☐ I become irritated, angry, impatient, or overwhelmed more quickly than I think I should.

Learn more: Irritability + heightened reactivity — [Page 10](#)

- ☐ I have trouble relaxing because part of me feels like I should remain alert or prepared.

Learn more: Heightened arousal + difficulty feeling safe — [Pages 6 and 11](#)

- ☐ I have difficulty falling asleep, staying asleep, sleeping deeply, or feeling rested.

Learn more: Sleep disturbance — [Page 11](#)

- ☐ I keep myself extremely busy and become uncomfortable when there is nothing left to do.

Learn more: Overworking + overfunctioning as coping patterns — [Page 12](#)

- ☐ I spend more time alone than I used to or regularly turn down social activities.

Learn more: Social withdrawal + functional impairment — [Page 13](#)

- ☐ My symptoms have affected relationships, friendships, family life, work, school, or everyday responsibilities.

Learn more: Occupational + social impairment — [Page 13](#)

- ☐ I have changed parts of my life to avoid situations that make me uncomfortable, even if I rarely think about those changes anymore.

Learn more: Avoidance + functional impact — [Pages 8 and 13](#)

CHECK-IN

The three statements that felt most familiar were:

01

02

03

Sometimes Symptoms Become “Normal”

People adapt remarkably well. That can make trauma-related symptoms difficult to recognize.

If you have spent years sitting near exits, avoiding crowds, sleeping lightly, keeping yourself busy, limiting relationships, or controlling your environment, those behaviors may no longer feel unusual. They may simply feel like **you**.

PTSD involves patterns of symptoms that can develop after exposure to trauma. Clinically, those symptoms are generally grouped into several areas:

Intrusion symptoms — unwanted memories, nightmares, distressing reminders, or feeling as though the event is happening again.

Avoidance — avoiding memories, conversations, people, places, activities, or other reminders.

Changes in thoughts and mood — emotional numbness, detachment, loss of interest, negative beliefs, difficulty experiencing positive emotion, or memory gaps related to the trauma.

Changes in arousal and reactivity — hypervigilance, exaggerated startle response, irritability, sleep problems, concentration difficulty, or other changes in how the nervous system responds to perceived danger.

You do not need to identify with every symptom.

The purpose of the next several pages is simply to help you understand the experiences you recognized on [Page 3](#).

BEFORE YOU CONTINUE

One experience I checked that I have always thought was “just how I am”:

Something I am curious to understand better:

When Your Nervous System Stays on Watch

CLINICAL CONCEPT Alterations in arousal and reactivity

Hypervigilance describes a heightened awareness of potential danger.

For many Veterans, situational awareness was once necessary. Noticing exits, monitoring surroundings, reacting quickly, evaluating strangers, and staying prepared may have helped keep you or other people safe.

The problem is not that your nervous system learned those skills. The problem can occur when it continues using them in environments where that level of alertness is no longer necessary.

YOU MAY NOTICE

- Automatically scanning rooms.
- Sitting where you can see entrances.
- Discomfort when someone stands behind you.
- Closely watching unfamiliar people.
- Startling easily.
- Reacting strongly to unexpected noises.
- Feeling tense in traffic.
- Monitoring parking lots or crowds.
- Checking locks repeatedly.
- Feeling responsible for everyone's safety.
- Difficulty relaxing in public.

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MY HYPERVIGILANCE MAP

Where do I feel most on guard?

What situations make it especially difficult to relax?

What do I automatically monitor?

Has this changed where I go or what I do? How?

When the Past Shows Up Without Permission

CLINICAL CONCEPT

Intrusion symptoms

Traumatic experiences can sometimes return through unwanted memories, dreams, emotional reactions, or physical sensations.

Some people experience vivid flashbacks. Others experience something much less obvious.

A reminder may suddenly create fear, anger, sadness, tension, nausea, or a sense that something is wrong — even before you consciously understand why.

INTRUSION SYMPTOMS MAY INCLUDE

- Unwanted memories.
- Nightmares.
- Distressing dreams that are not exact recreations of the event.
- Feeling emotionally overwhelmed by reminders.
- Physical reactions to reminders.
- Flashbacks or moments when the experience feels unusually present.
- Sudden memories triggered by sounds, smells, dates, places, people, or events.

MY EXPERIENCE

Something that sometimes brings the past back unexpectedly:

What happens physically?

What happens emotionally when that occurs?

What do I usually do afterward?

When Avoiding Something Becomes Easier Than Experiencing It

CLINICAL CONCEPT Avoidance symptoms

Avoidance is one of the ways people naturally try to protect themselves from distress.

If something makes you uncomfortable, frightened, angry, overwhelmed, or emotionally exposed, avoiding it can provide immediate relief.

AVOIDANCE MAY INVOLVE

- Refusing to discuss an experience.
- Avoiding thoughts or memories.
- Staying away from certain places.
- Avoiding specific people.
- Avoiding crowds.
- Avoiding news, movies, sounds, or images.
- Changing driving routes.
- Declining social activities.
- Avoiding vulnerability or emotional conversations.
- Avoiding medical or mental health care because discussing experiences feels difficult.

Avoidance can work extremely well in the short term. The challenge is that life can gradually become organized around everything you are trying not to experience.

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WHAT HAVE I CHANGED?

Something I avoid now:

How has avoiding it changed my everyday life?

What makes it uncomfortable?

Something I miss but still tend to avoid:

When Feeling Less Becomes Protective

CLINICAL CONCEPT Negative changes in cognition and mood

Trauma does not always cause overwhelming emotion. Sometimes the response is the opposite.

You may feel emotionally numb, detached, disconnected from other people, or unable to experience positive emotions as strongly as you once did.

YOU MIGHT NOTICE

- Feeling emotionally flat.
- Difficulty experiencing happiness or excitement.
- Losing interest in hobbies.
- Feeling detached from family.
- Difficulty expressing affection.
- Feeling uncomfortable with emotional conversations.
- Feeling like you are watching life rather than fully participating.
- Loved ones describing you as distant.
- Feeling disconnected even when you are physically present.

CONNECTION CHECK

Something I once enjoyed more than I do now:

Someone I have become more distant from:

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An emotion that is difficult for me to express:

Something I wish the people closest to me understood:

When the Distance Between “Fine” and “Overwhelmed” Gets Shorter

CLINICAL CONCEPT Alterations in arousal and reactivity

A nervous system that spends significant time on alert may have less room left for everyday stress. That can make relatively small problems feel unusually intense.

YOU MIGHT EXPERIENCE

- Irritability.
- Anger.
- Road rage.
- Difficulty tolerating noise.
- Feeling overwhelmed by chaos.
- Strong reactions when plans change.
- Impatience.
- Conflict with family members.
- Difficulty calming down after becoming upset.
- Regret after reacting more strongly than intended.

Sometimes anger is the emotion that other people see, while the experience beneath it is fear, anxiety, overstimulation, helplessness, exhaustion, or feeling unsafe.

LOOKING BENEATH THE REACTION

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Think of a recent situation where your reaction felt unusually strong. What happened?

What did you do or say?

What did you notice in your body first?

Looking back, what might have been underneath the anger or irritation?

When Letting Your Guard Down Is Difficult

CLINICAL CONCEPT Alterations in arousal and reactivity

Sleep requires the nervous system to allow a certain degree of vulnerability. That can become difficult after trauma.

YOU MAY EXPERIENCE

- Trouble falling asleep.
- Waking frequently.
- Nightmares.
- Waking suddenly.
- Sleeping lightly.
- Reacting to small noises.
- Checking the home during the night.
- Sleeping differently when alone.
- Needing television or background noise.
- Delaying bedtime until exhaustion takes over.
- Daytime fatigue.

Difficulty resting can also happen while awake. Quiet sometimes allows memories, thoughts, or emotions that stay hidden during activity to become more noticeable.

MY SLEEP EXPERIENCE [ESSENTIALVETERANSERVICES.COM](https://essentialveteranservices.com)

Average hours of sleep: _____

What usually interrupts or delays my sleep?

How does poor sleep affect me the following day?

How comfortable am I doing absolutely nothing and resting?

When Staying Busy Becomes a Coping Strategy

Overworking is **not itself a formal PTSD diagnostic symptom**, but it can become an important coping pattern for some people living with trauma-related symptoms.

Work, exercise, projects, cleaning, errands, volunteering, or constant responsibility can provide structure and distraction. Staying busy may prevent uncomfortable thoughts or feelings from having room to surface.

YOU MIGHT RECOGNIZE

- Difficulty sitting still.
- Filling every available hour.
- Feeling guilty while resting.
- Taking responsibility for everything.
- Rarely asking for help.
- Becoming uncomfortable during vacations or downtime.
- Feeling emotionally worse when life becomes quiet.
- Using work to avoid being alone with your thoughts.

BUSY OR AVOIDING STILLNESS?

What do I normally do with unexpected free time?

What tends to enter my mind when things become quiet?

How do I feel when nothing needs my attention?

Does staying busy help me avoid anything uncomfortable?

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Symptoms Matter Because of What They Change

Mental health symptoms do not exist separately from everyday life.

They may affect your ability to work, maintain relationships, socialize, parent, study, participate in hobbies, handle stress, communicate, or complete responsibilities.

SOCIAL IMPAIRMENT MAY INCLUDE

- Relationship conflict.
- Emotional distance.
- Isolation.
- Reduced friendships.
- Avoiding activities.
- Difficulty connecting with family.
- Difficulty trusting people.

OCCUPATIONAL IMPAIRMENT MAY INCLUDE

- Concentration problems.
- Conflict with coworkers.
- Difficulty adapting to stress.
- Reduced productivity.
- Missing work.
- Changing jobs frequently.
- Choosing isolated work.
- Difficulty working with supervisors.
- Forgetting tasks.
- Feeling mentally exhausted simply from getting through a workday.

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MY IMPACT INVENTORY

My relationships have been affected by:

Something I participate in less often now:

My work, school, or responsibilities have been affected by:

Something that requires more effort than other people realize:

What Happens Before, During, and After?

Triggers are not always obvious. A trigger may be a sound, smell, location, physical sensation, conflict, crowd, date, conversation, feeling of being trapped, or another experience that the nervous system connects with danger.

Understanding patterns does not mean you should be able to simply stop your reaction. It gives you more information about what happens.

PATTERN TRACKER

Situation or possible trigger:

What happened in my body?

What thought or memory appeared?

What emotion did I notice?

What did I do next?

How did the experience affect the rest of my day?

Consider completing this exercise more than once. Patterns are sometimes much easier to recognize after they are written down.

Your Experience Is More Than a Symptom Label

When you have lived with symptoms for a long time, broad questions such as “How does PTSD affect you?” can be surprisingly hard to answer.

Concrete examples often tell the story more clearly.

INSTEAD OF

“I don’t like crowds.”

YOU MIGHT RECOGNIZE

I stopped attending concerts because I spend the entire time monitoring everyone around me and cannot enjoy being there.

INSTEAD OF

“My sleep is bad.”

YOU MIGHT RECOGNIZE

I wake several times each night when I hear noises, and the exhaustion makes it difficult to concentrate the following day.

The goal is never to exaggerate symptoms. It is to recognize them accurately.

MY FIELD GUIDE SUMMARY

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The three patterns that affect me most are:

01

02

03

The area of my life most affected is:

Something I want to better understand is:

Something I had not previously recognized as a possible trauma response is:

NEXT STEPS

Essential Veteran Services

Essential Veteran Services provides independent mental health evaluations for Veterans seeking greater clarity and documentation regarding mental health conditions and their impact.

An EVS evaluation considers your individual history, symptoms, records, experiences, and occupational and social functioning.

Sometimes understanding the full picture begins by recognizing the things that have become so familiar that you stopped seeing them as symptoms.

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EMAIL

info@essentialveteranservices.com



PHONE

(469) 240-9353



WEBSITE

essentialveteranservices.com

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