

CRITICAL INCIDENT STRESS INFORMATION SHEETS

You have experienced a traumatic event or a critical incident (any event that causes unusually strong emotional reactions that have the potential to interfere with the ability to function normally). Even though the event may be over, you may now be experiencing or may experience later, some strong emotional or physical reactions. It is very common, in fact quite *normal*, for people to experience emotional aftershocks when they have passed through a horrible event.

Sometimes the emotional aftershocks (or stress reactions) appear immediately after the traumatic event. Sometimes they may appear a few hours or a few days later. And, in some cases, weeks or months may pass before the stress reactions appear.

The signs and symptoms of a stress reaction may last a few days, a few weeks, a few months, or longer, depending on the severity of the traumatic event. The understanding and the support of loved ones usually cause the stress reactions to pass more quickly. Occasionally, the traumatic event is so painful that professional assistance may be necessary. This does not imply craziness or weakness. It simply indicates that the particular event was just too powerful for the person to manage by himself.

Here are some common signs and signals of a stress reaction:

<i>Physical*</i>	<i>Cognitive</i>	<i>Emotional</i>	<i>Behavioral</i>
chills	confusion	fear	withdrawal
thirst	nightmares	guilt	antisocial acts
fatigue	uncertainty	grief	inability to rest
nausea	hypervigilance	panic	intensified pacing
fainting	suspiciousness	denial	erratic movements
twitches	intrusive images	anxiety	change in social activity
vomiting	blaming someone	agitation	change in speech patterns
dizziness	poor problem solving	irritability	loss or increase of appetite
weakness	poor abstract thinking	depression	hyperalert to environment
chest pain	poor attention/decisions	intense anger	increased alcohol consumption
headaches	poor concentration/memory	apprehension	change in usual communications
elevated BP	disorientation of time, place or person	emotional shock	etc...
rapid heart rate	difficulty identifying objects or people	emotional outbursts	
muscle tremors	heightened or lowered alertness	feeling overwhelmed	
shock symptoms	increased or decreased awareness of surroundings	loss of emotional control	
grinding of teeth	etc...	inappropriate emotional response	
visual difficulties		etc...	
profuse sweating			
difficulty breathing			
etc...			

** Any of these symptoms may indicate the need for medical evaluation.
When in doubt, contact a physician.*

THINGS TO TRY:

- WITHIN THE FIRST 24 - 48 HOURS periods of appropriate physical exercise, alternated with relaxation will alleviate some of the physical reactions.
- Structure your time; keep busy.
- You're normal and having normal reactions; don't label yourself crazy.
- Talk to people; talk is the most healing medicine.
- Be aware of *numbing* the pain with overuse of drugs or alcohol, you don't need to complicate this with a substance abuse problem.
- Reach out; people do care.
- Maintain as normal a schedule as possible.
- Spend time with others.
- Help your co-workers as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feelings with others.
- Keep a journal; write your way through those sleepless hours.
- Do things that feel good to you.
- Realize those around you are under stress.
- Don't make any big life changes.
- Do make as many daily decisions as possible that will give you a feeling of control over your life, i.e., if someone asks you what you want to eat, answer him even if you're not sure.
- Get plenty of rest.
- Don't try to fight reoccurring thoughts, dreams or flashbacks - they are normal and will decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

FOR FAMILY MEMBERS & FRIENDS

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if (s)he has not asked for help.
- Reassure him that he is safe.
- Help him with everyday tasks like cleaning, cooking, caring for the family, minding children.
- Give him some private time.
- Don't take his anger or other feelings personally.
- Don't tell him that he is "lucky it wasn't worse;" a traumatized person is not consoled by those statements. Instead, tell him that you are sorry such an event has occurred and you want to understand and assist him.

TWENTY SIGNALS THAT SAY, "I'M STUCK!"

Some people, particularly those who avoid dealing with their emotional reactions, may find themselves increasingly re-living their trauma. It may seem to them that little is resolved in the first weeks following the incident. An individual should seek professional consultation if the following reactions persist longer than a month and interfere with his or her ability to function:

TWENTY SIGNALS

1. Intrusive images: distressing memories, thoughts, nightmares, and flashbacks.
2. Distress at exposure to events that resemble or symbolize the event.
3. Avoids thoughts and emotions connected with the incident, or activities or situations that arouse memories of the trauma.
4. Numbing or restricted range of emotional responsiveness.
5. Excessive stress reactions.
6. Hyper vigilance
7. Overreaction \ under-reaction \ risk taking.
8. Increased irritability, anger or rage.
9. Obsession with the incident. Thoughts of the incident are easily triggered—one seems stuck in the past and has difficulty looking toward the future.
10. Feelings associated with past events. The combined emotional impact of old and new situations may seem so overwhelming that one's ability to deal effectively with any incident seems to suffer.
11. Self-doubt, guilt, second-guessing of oneself, feelings of inadequacy, obsession with perceived mistakes
12. A growing sense of isolation "No one understands what I'm experiencing...I feel lost, abandoned, and different than others."
13. Intense or sustained feelings of depression, grief, loss of control.
14. Mental confusion: Increased distractibility, difficulty concentrating or making decisions, poor judgement.
15. Development of suspiciousness in dealing with others.
16. Relationship problems. Withdrawal from others, increasing difficulty with peer/supervisory/family relationships.
17. Decline in work performance. Increased absenteeism, burnout, and decline in productivity and quality of work.
18. One may have little or no noticeable initial reaction to the incident, but reactions are triggered months later.
19. Self-destructive behavior: Substance abuse, poor judgement and inappropriate decisions.
20. In rare cases, suicidal thinking may result from feelings of depression, guilt, despair, and anger with oneself.

When a person experiences a traumatic stress reaction, current behavior may change substantially from previous normal behavior.

If the person continues demonstrating effects of traumatic stress, consulting with a mental health professional can help in working through the emotional reactions.