



## TRAUMA-INFORMED PRIMARY CARE SCRIPT TEMPLATES

This tool includes sample scripts to use with patients before you introduce your trauma screening at their initial and subsequent appointments. It is strongly suggested that whomever performs this screening should talk with the patient in the exam room or other private area, as the questions are sensitive for most people and considering privacy and safety is a key part of a trauma-informed approach. Italicized text provides guidance of what to do while normal text represents what to say.

**Please note:** People in recovery, because of the trauma in their past, may be hesitant to share personal and sensitive information, especially at their first appointment. Ensuring kindness, listening for understanding, and respecting boundaries will help the provider begin to build a relationship with the patient. Setting the tone and focusing on building relationships in the practice is what is important to increase safety.



### Introducing Inquiry

#### At First Appointment

Hello, my name is [name], and I am [role]. Is [name] your preferred name? *(wait for patient response)*. Thank you; I'll make a note of this for future appointments. *(make a note in the chart)*. I'm glad you are here today.

I have some questions to ask you about your history. As medical providers, we are becoming more and more aware of how past experiences can affect our health in the here and now. Sometimes knowing about difficult experiences in the past can help us to change our approach for you as a patient to make this a safe and comfortable place for your health care. How would you feel about answering a few brief questions about your personal and family history?

#### At Follow-up Appointments

Hello, [name]. *(Be sure to use the preferred name noted in their chart from the first appointment.)* Each year we like to check in about experiences in your life that might affect how we help you with your medical care. Would you be willing to look at this survey about your past experiences again and update our understanding of you as a person and how we can best support you?





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### Trauma Inquiry



#### *Sample Script* of Culturally Resonant Trauma Inquiry

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This series of questions was developed by the Native American Rehabilitation Association of the Northwest specifically for its patient population. It serves as an example of a culturally resonant inquiry:

- Do you feel you have experienced trauma in your life in the past?
- Do you currently feel safe from trauma in your life?
- Do you feel you carry the trauma of your ancestors in your life?
- Would you like more support in taking care of your body, emotions and spirit?
- Do you feel that trauma affects your participation in medical care?

#### *Sample Script* for Inquiry using Open-ended Questions (Option 3)

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“Difficult life experiences, like growing up in a family where you were hurt, or where there was mental illness or drug/alcohol issues, or witnessing violence, can affect our health. Do you feel like any of your past experiences affect your physical or emotional health? Trauma can continue to affect our health. If you would like, we can talk more about services that are available that can help.”

#### Identifying Patient’s Resilience Factors

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“In the past, which of your strengths have you relied on to “bounce back” after difficult experiences?”



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### Response to Trauma Disclosure

“I am sorry this happened to you. Thank you for sharing this with me. This information can help me understand how best to care for you. Trauma can continue to affect our lives and health.

Do you feel like this experience affects your health or well-being?”

*(await their answer and note their response)*

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“In light of what you've shared today, is there anything I can do to make you feel more comfortable during our appointments together? Do you have any concerns we should address before moving forward?”

*(await their answer and note their response)*

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“Thank you for sharing this. I will note it in the record for future appointments, and you can always change or add to it later. What questions do you have?”

*(Note the questions and answer them if possible. If you do not know the answers, then tell the patient you will call them with an answer after you research it.)*



### Adaptations to Care

#### Harm Reduction for Maladaptive Coping Strategies

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“You mentioned that heroin makes you feel calm when you are very stressed and that you have a goal to stop using but are not ready to now. So, let's talk about how you can stay safe when you do use heroin. What ideas do you have? Are you familiar with steps to prevent and respond to an overdose, such as using with a friend and carrying naloxone?”



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### Identifying Strengths as Part of the Treatment Plan

Your strengths are the basis of your treatment plan. You are the expert on what works best for your health and your life. Who are some people in your life that support your health? Are there any places you like to go to or activities you prefer to do as part of your wellness? *(use the checklist below to generate additional ideas if necessary; note response in the health record)* Do you have a sense of what leads to stress in your life and a few strategies to manage it? *(note response in the health record)* Do you have a sense of your current health status, such as blood pressure and cholesterol? Do you have any goals for your health and overall wellness? *(note response in the health record)*

✓	REFERRAL NETWORK AND COMMUNITY PARTNERS CHECKLIST
	National hotlines for domestic violence, sexual assault, and suicide prevention
	Community domestic violence services
	Rape and sexual assault crisis services
	Community behavioral health and substance use disorder services
	Food banks and nutrition assistance agencies
	Housing assistance agencies
	Language access assistance
	Local welfare office(s)
	Legal services
	Parenting classes
	Education and employment supports
	Supports for populations with unique needs (e.g., members of the LGBT community, people with HIV, people with disabilities, people who are immigrants)