

CASE PRESENTATION FOR CALL: (Please remember to disguise any identifying information)

• What is your clinical question or what feedback would you like from the group?
(If you don't have a specific question, please let the group know that.)

- Age:
- Gender/Race/Ethnicity and/or other relevant cultural considerations:
- Living situation (if in care, what led to the placement?):

- Reason(s) for referral to you or your agency:
- Trauma(s) and when traumas occurred as identified on UCLA PTSD Reaction Index:
- Results of UCLA (anchor trauma; total score; subscales B,C,D,E; dissociation subscale):
- How were assessment results explained to caregivers/child and how were they received:

- Parental/Caregiver involvement:

- Share one approach that worked well for each of the PRACTICE components you have implemented:
 - Psychoeducation
 - Parenting Skills
 - Relaxation
 - Affect Regulation
 - Cognitive Coping
 - Trauma Narrative Development & Processing
 - In-Vivo Exposure to Trauma Reminders
 - Conjoint/Witnessing Session
 - Enhancing Future Safety & Social Skills

- How have you addressed gradual exposure from the beginning of the model?

- What adaptations did you make to any of the components to fit with the individual needs of the child/family:

- What are you planning for your next step:

- Successes – what do you feel has gone really right with this case:

- Repeat clinical question for group feedback: