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EMDR Therapy Clinical Practice Workbook

A clinically branded, function-preserving edition retaining the original exercises, psychoeducation, checklists, logs, planning tools, and response space.

DSM-5-TR · ICD-11 CLINICAL ALIGNMENT

1 · Trauma Inventory

2 · Negative Cognition Identification

3 · Emotion Identification

4 · Body Scan

5 · Butterfly Hug

6 · Other Bilateral Stimulation Techniques

7 · Visualization Exercise

8 · Pre-EMDR Session Preparation

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How to use this workbook

- Use this workbook selectively and collaboratively; it is educational and does not replace individualized assessment, diagnosis, treatment, medical care, or crisis services.
- Skip, pause, or modify any activity that increases distress, danger, shame, or loss of functioning. Adapt language for culture, disability, neurodivergence, health, resources, and lived context.
- Ratings in this workbook are reflection tools unless a named, validated measure and interpretation are explicitly provided.

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Trauma Inventory

List significant life events that you feel have contributed to your current psychological stress or discomfort. Include events from childhood to the present, even if they seem minor or unrelated. For each event, provide a brief description and rate the current level of distress on a scale from 0 (no distress) to 10 (extreme distress).

	Event Description	Current Distress Level (0-10)
Childhood Events (Ages 0-12)		
Adolescent Events (Ages 13-18)		
Adulthood Events (Ages 19+)		
Recent Events (Past Year)		

Negative Cognition Identification

1. Identifying the Event

Briefly describe a specific event or experience that continues to impact you emotionally. Focus on one that evokes strong negative feelings.

2. Recognizing Negative Cognitions

List any negative beliefs or cognitions about yourself that arise when you think about the event described above. These might include feelings of inadequacy, shame, guilt, or beliefs like "I am not good enough" or "I am to blame."

3. Exploring the Impact

Reflect on how these negative beliefs about yourself have influenced your behavior, relationships, self-esteem, and emotional well-being.

4. Tracing Origins

If possible, identify any earlier life experiences that might have contributed to the development of these negative cognitions. Understanding their origins can be helpful in the EMDR processing.

5. Counteracting Negative Cognitions

For each negative cognition identified, write a corresponding positive cognition you would like to believe about yourself. These should reflect a more accurate, balanced view of yourself.

Negative Cognition	Desired Positive Cognition

Emotion Identification

1. Broad Emotion Categories

Start by identifying which of the broad emotion categories you are currently feeling or have felt in relation to a specific event or memory. Check all that apply.

- ☐ Joy
- ☐ Sadness
- ☐ Anger
- ☐ Fear
- ☐ Disgust
- ☐ Surprise
- ☐ _____
- ☐ _____

2. Specific Emotion Identification

For each broad category selected, identify more specific emotions you have experienced. This helps in understanding the nuances of your emotional experience.

3. Connecting Emotions to Experiences

Reflect on a recent event or memory that elicited some of the emotions identified above. Describe the event and the associated emotions.

4. Exploring Physical Sensations

Note any physical sensations you experience in connection with the identified emotions. This can help in recognizing emotional responses in the future.

5. Patterns of Emotional Response

Reflect on any patterns you notice in your emotional responses to different events or memories. Are there certain emotions that frequently arise in response to specific types of situations?

Body Scan

1. Preparation for the Body Scan

Choose a quiet, comfortable place where you won't be disturbed. Sit or lie down in a comfortable position, close your eyes, and take a few deep breaths to center yourself.

2. Conducting the Body Scan

Slowly direct your attention to the top of your head. Gradually move your focus down through each part of your body. Notice any sensations, tension, or discomfort without judgment.

3. Noticing Sensations

As you move your awareness through your body, jot down any sensations you notice in specific areas related to stress, tension, or trauma responses.

- Head (e.g., tightness, headaches):

- Neck and Shoulders (e.g., stiffness, heaviness):

- Chest and Back (e.g., tightness, pain):

- Arms and Hands (e.g., tingling, coldness):

- Abdomen (e.g., nausea, tightness):

- Legs and Feet (e.g., restlessness, numbness):

4. Connecting Sensations to Emotions

Reflect on the sensations you've noted and consider if they connect to specific emotions or memories. This can help in identifying how your body holds and responds to traumatic experiences.

5. Breathing Through the Sensations

Focus on any areas where you noted significant tension or discomfort. Take deep, slow breaths, imagining sending breath to these areas to release tension and promote relaxation.

6. Reflecting on the Experience

After completing the body scan, take a moment to reflect on the experience. Note any insights gained about how trauma is stored in your body and any changes in physical sensations or emotional states.

Butterfly Hug

The Butterfly Hug technique involves crossing your arms over your chest and lightly tapping your shoulders alternately, mimicking the gentle beating of a butterfly's wings.

This method engages bilateral brain stimulation, similar to the eye movements in EMDR therapy, to help process and alleviate emotional distress.

Steps for the Butterfly Hug:

- **Step 1:** Cross your arms over your chest so that each hand rests on the opposite upper arm or shoulder.
- **Step 2:** Close your eyes and take a few deep breaths. Focus on slowing your breathing and calming your mind.
- **Step 3:** Begin to alternately tap your shoulders with your hands, establishing a rhythm that feels comfortable for you. Concentrate on the sensation of the taps.
- **Step 4:** As you continue the tapping, bring to mind a distressing memory or emotion briefly. Observe any thoughts, feelings, or bodily sensations that arise, without judgment.
- **Step 5:** Shift your focus to a neutral or positive thought, memory, or sensation. Maintain the tapping rhythm as you do so.
- **Step 6:** Continue for a few minutes, or until you feel a decrease in emotional intensity.

Other Bilateral Stimulation Techniques

Bilateral Stimulation involves stimulating both hemispheres of the brain through rhythmic, side-to-side patterns. This stimulation facilitates the processing of distressing memories and emotions.

Eye Movements

1. Choose a neutral or positive thought to focus on. If you're using this technique for stress relief and not within a formal EMDR session, avoid focusing on distressing memories.
2. Hold your head still and begin moving your eyes side to side, following an imaginary point or your finger moving about 30 centimeters in front of your face.
3. Continue for about 20-30 seconds, or as long as it feels comfortable.
4. Notice how you feel. If you become uncomfortable, stop and ground yourself with deep breaths.

Knee Tapping

1. Place your hands on your knees. Start tapping your knees alternately, left then right, in a rhythmic pattern.
2. While tapping, you can focus on a neutral or mildly positive thought to maintain a grounding effect.
3. Continue for a few minutes, paying attention to how your body feels.
4. Slow down your tapping gradually and then stop. Take a few deep breaths and notice any changes in your mental or emotional state.

Auditory Stimulation

1. Find a binaural beats track or any music that alternates sounds between the left and right ears. Headphones are required for this method to be effective.
2. Put on your headphones and start the audio. Focus on the sounds moving from one ear to the other.
3. Listen for about 5-10 minutes. You can close your eyes to enhance concentration.
4. Once you're done, turn off the audio and sit quietly for a moment, breathing deeply. Reflect on any differences in how you feel.

General Tips for Using Bilateral Stimulation on Your Own:

- **Start Slowly:** If you're new to bilateral stimulation, start with shorter sessions to see how you react.
- **Safety First:** If you're dealing with severe trauma, it's best to use these techniques under the guidance of a trained professional.
- **Use as a Coping Tool:** These techniques can be part of your coping toolbox, used when you feel the need for grounding.
- **Personal Preference Matters:** Experiment to find which technique works best for you and is most comforting.

Visualization Exercise

Choose a bilateral stimulation method works for you.

1. Imagine Your Safe Place:

- Describe in detail a place (real or imagined) where you feel completely safe, calm, and comfortable. Use vivid sensory details to bring this place to life in your mind.

2. Engaging with Your Safe Place

- Close your eyes and take deep breaths to center yourself. Visualize entering your safe place, using the detailed descriptions you provided. Walk through this place in your mind, exploring each sensory detail.
- Use the butterfly hug that you learned above.

3. Introduce a Positive Belief

- Once you feel fully immersed in your safe place, introduce a positive belief about yourself that you want to reinforce. It could relate to your strength, resilience, or any quality you wish to emphasize.

Positive Belief:

- Visualize scenarios within your safe place where this positive belief is clearly true. See yourself embodying this belief in action.

4. Anchor the Positive Feeling

- Identify a physical gesture or touch (e.g., placing a hand over your heart) that can serve as an anchor for the feelings of safety and positivity you're experiencing.
- Practice this gesture while fully engaging with the sense of safety and the positive belief in your visualization. This will help you recall these feelings later.

5. Gently Return to the Present

- When you're ready, slowly bring your awareness back to the present. Take a few deep breaths and open your eyes, maintaining a sense of calm and positivity.

Pre-EMDR Session Preparation

1. Reflecting on Past Sessions

Briefly reflect on your previous EMDR sessions. Note any progress, challenges, or insights you experienced.

2. Setting Intentions for the Upcoming Session

Set clear intentions for what you hope to achieve in your next EMDR session. This can help focus the session and align your mindset with your therapeutic goals.

3. Identifying Current Concerns and Feelings

Identify and describe your current concerns, feelings, and any specific areas you feel need attention in the upcoming session.

4. Practicing Grounding Techniques

List grounding techniques you've found effective. Practice one or more of these techniques before your session to help stabilize your emotions and ensure you're in a grounded state when you begin. The following are some suggestions:

5-4-3-2-1 Technique:

- Identify and focus on 5 things you can see, 4 things you can touch, 3 things you can hear, 2 things you can smell, and 1 thing you can taste.
- *Use when feeling overwhelmed or disconnected.*

Deep Breathing:

- Take slow, deep breaths, inhaling through your nose and exhaling through your mouth, focusing on the rise and fall of your abdomen.
- *Use when experiencing panic or anxiety.*

Walking Barefoot:

- Walk barefoot on different surfaces (grass, carpet, sand) and focus on the sensations under your feet.
- *Use when needing to feel more grounded or connected to your environment.*

Hold an Object:

- Hold a small object (a stone, a piece of jewelry, a toy) and focus on its texture, temperature, and weight.
- *Use when needing a tangible anchor to the present.*

Naming Colors:

- Description: Look around you and silently name all the colors you can see, focusing on the variety of shades.

- *Use when needing a simple distraction from distressing thoughts.*

Stretching:

- Gently stretch different parts of your body, focusing on the feeling of tension and release.

- Use when feeling physically stiff or disconnected from your body.

Savoring a Scent:

- Inhale a comforting scent, whether from a cup of tea, a scented candle, or a perfume. Focus on the feelings the scent evokes.

- *Use when needing an immediate sensory distraction.*

Other Techniques:

EMDR Eight-Phase Treatment Process

EMDR therapy involves an eight-phase treatment process that includes:

Phase 1: History Taking and Treatment Planning

- **Objectives:** Gather comprehensive history and identify past events that contribute to current symptoms. Develop a treatment plan.

Therapist: "Let's start by discussing your history to understand the experiences that have brought you here. We'll identify specific memories that seem to be causing distress and outline a treatment plan."

1. What significant life events have impacted your current psychological state?

2. How do these events influence your present symptoms or behaviors?

Phase 2: Preparation

- **Objectives:** Establish rapport, explain the EMDR process, and ensure the client is prepared with coping strategies.

Therapist: "Before we begin processing these memories, I want to ensure you're familiar with some coping strategies like deep breathing and the safe place visualization. Let's practice these together."

- Explain bilateral stimulation (e.g., butterfly hug) and its role in processing.
- Teach grounding techniques for emotional regulation.
- Assess client's readiness and comfort level with proceeding.

Phase 3: Assessment

- **Objectives:** Identify the specific memory to target, including the negative belief, desired positive belief, emotions, and body sensations.

Therapist: "Think about the event we've chosen to work on."

- Target Image:

"When you think about that memory what image represents the worst or significant moment for you? Can you describe what you see in your mind?"

- Negative Cognition:

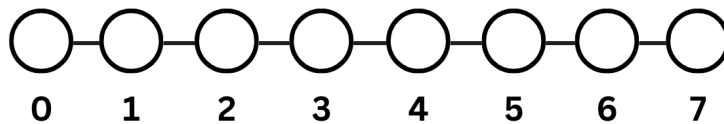
"Thinking about this image, what negative belief comes to mind about yourself? Please phrase it as an 'I am' statement."

- Positive Cognition:

"Thinking about this image, what positive belief would you prefer to hold about yourself? This should be a belief that counters the negative one."

- Measuring Validity of Positive Cognition:

- "Reflecting on the positive belief, how true does it feel on a scale from 1 to 7, where 1 is completely false and 7 is entirely true?"



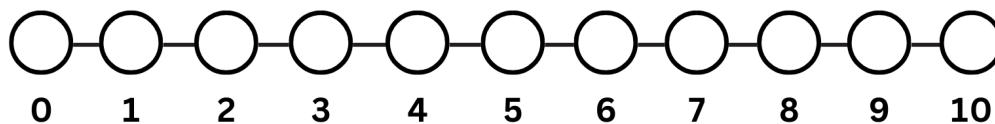
- Emotions:

- "When you think about this incident and the negative belief, what emotions do you feel right now?"

- Assessing SUDs Level:

The SUD Scale is a self-assessment tool that measures the intensity of distress on a scale from 0 to 10, where 0 represents no distress or complete calmness, and 10 represents the highest level of distress imaginable.

- "On a scale from 0 to 10, where 0 means no disturbance and 10 is the highest level of disturbance, how distressed do you feel currently?"



- Locating Body Sensations:

- "Can you identify where in your body you feel this disturbance?"

Phase 4: Desensitization

- **Objectives:** Process the target memory with bilateral stimulation until the distress level decreases.

Therapist: "Focus on that image and belief while we start the eye movements. Just notice whatever comes up for you without judgment."

- After a set of bilateral stimulation (BLS), encourage the client to "let it go" and take a deep breath.

- Ask what they notice, and based on their response, guide them to "Go with that," ensuring to focus on the experience or shift attention as needed. Continue BLS, adjusting based on the client's feedback.

- Techniques: Eye movements, auditory tones, or tactile taps.

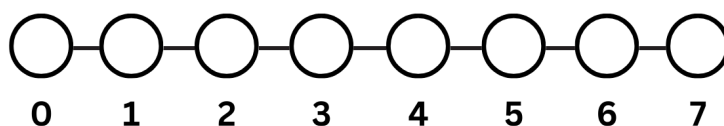
Check the SUD. Continue to Desensitize until the SUD = 0 or much less than the initial SUD then go to the Installation.

Phase 5: Installation

- **Objectives:** Strengthen the positive belief associated with the memory until it feels completely true.

Therapist: "Now, let's focus on strengthening the positive belief you identified: 'I am capable of protecting myself.' Remember the eye movements as you hold this belief in mind."

- Rate how true the positive belief feels post-installation.



Phase 6: Body Scan

- **Objectives:** Identify and process any residual physical sensations linked to the target memory.

Therapist: "As you think about the event and the positive belief now, do a scan of your body. Let me know if you notice any tension or discomfort."

- Note any discomfort or tension in the body.

Phase 7: Closure

- **Objectives:** Ensure the client leaves each session feeling better than at the start, reestablishing equilibrium.

Therapist: "Let's take a few moments to ground you back in the present before we end today's session. Remember the breathing techniques we practiced?"

- Discuss any remaining feelings or thoughts and how to manage them between sessions.

Phase 8: Reevaluation

- **Objectives:** Review the progress made and determine if further processing is needed.

Therapist: "At the start of our next session, we'll check in on how you've been feeling since today's work and decide if we need to revisit this memory or if there are new areas to address."

- Evaluate changes in symptoms, behaviors, and beliefs.

- Identify any new targets or areas for further EMDR work.

List of Generic Negative and Positive Beliefs

Self-worth / I am "not enough"	
Negative	Positive
I am invisible.	I am seen and acknowledged.
I am uninteresting.	I am fascinating in my uniqueness.
I don't matter.	I matter.
I am a failure.	I am successful in my journey.
I am replaceable.	I am irreplaceable.
I am not smart enough.	I am intelligent in many ways.
I am not attractive.	I am attractive in my authenticity.
I am not worthy of attention.	I am worthy of attention and respect.

Self-efficacy / I can't "do it"	
Negative	Positive
I can't make a difference.	I can make a positive impact.
I can't change my situation.	I can change my circumstances.
I can't learn new things.	I am always learning and growing.
I can't achieve my goals.	I can achieve anything I set my mind to.
I can't be loved.	I am lovable and deserving of love.
I can't find happiness.	I can create my happiness.
I can't face my fears.	I can face and overcome my fears.
I can't speak up for myself.	I can assertively express my needs.
I can't find peace.	I can find inner peace.

Connection / I am "alone"	
Negative	Positive
I am always left out.	I am included and valued.
No one understands me.	There are people who understand me deeply.
I don't fit in anywhere.	I belong in many places.
People always leave me.	I am surrounded by people who stay.
I am destined to be alone.	I am meant to be surrounded by love.
I am too different to be loved.	My differences make me uniquely lovable.
I am not meant for friendships.	I am destined for meaningful friendships.
I am not interesting to others.	I am fascinating to the right people.

Empowerment / I lack "power"	
Negative	Positive
I have no influence.	I have a significant influence.
I am always a victim.	I am a survivor, not a victim.
I have no voice.	My voice is strong and heard.
My opinions don't matter.	My opinions are valuable.
I am overlooked.	I am recognized and appreciated.
I have no presence.	I have a commanding presence.
I am not a priority to anyone.	I am a priority to myself and others.

EMDR Session Reflection

Date of Session: _____

1. Overview of the Session

Briefly describe the main focus or target memory of the session, including any specific images, thoughts, or emotions that were addressed.

2. Experiences During the Session

Note any significant emotional or physical sensations experienced during the session. How did these change throughout the process?

3. Insights and Realizations

Reflect on any insights, realizations, or shifts in perspective that emerged during the session. How have these affected your understanding of the target memory or issue?

4. Thoughts and Beliefs

Identify the negative cognition associated with the target memory at the start and the positive cognition you worked towards. Note any progress made in strengthening the positive cognition.

- Negative Cognition:

- Positive Cognition:

- Progress on Positive Cognition:

5. Unfinished Business

Were there any moments or aspects that felt unresolved or require further exploration in future sessions?

6. Coping Strategies

List any coping strategies or grounding techniques you used after the session to manage residual emotions or sensations.

7. Self-Care Plans

Outline your self-care plan for the days following the session. Include activities, support systems, and any self-soothing techniques you plan to utilize.

Tracking Progress

The following statements are designed to help you recognize and acknowledge the positive changes and progress you've made during your EMDR therapy journey. Check off the ones you relate to:

- ☐ "I noticed a decrease in the intensity of my emotional reactions to triggers that used to overwhelm me."
- ☐ "Memories of traumatic events no longer feel as vivid or distressing as they did before starting EMDR therapy."
- ☐ "I'm experiencing fewer intrusive thoughts and flashbacks related to my trauma."
- ☐ "I find myself reacting more calmly in situations that would have previously caused me significant stress or anxiety."
- ☐ "I've begun to develop a more positive outlook on my life and future, feeling more hopeful than before."
- ☐ "My sleep quality has improved, and I'm having fewer nightmares related to my past experiences."
- ☐ "Physical symptoms associated with my trauma, such as tension, headaches, or stomach issues, have lessened."
- ☐ "I feel more connected to my body and am better able to manage physical responses to stress."

Trigger Tracking Sheet

1. Daily Trigger Log

For a week, note down any specific triggers you encounter, the emotions and physical sensations they evoke, and how you responded or coped. This will help you and your therapist recognize patterns and tailor your EMDR sessions more effectively.

Day	Trigger Description	Emotional Response	Physical Sensation	Coping Response
<i>e.g., Monday</i>	<i>Loud noise outside</i>	<i>Anxiety</i>	<i>Tight chest</i>	<i>Deep breathing</i>

2. Weekly Summary and Reflection

Identify any triggers that occurred multiple times or had a particularly strong impact.

Note any recurring emotional or physical responses to triggers.

Reflect on the coping strategies you used. Which were effective? Are there any new strategies you want to try?

- Effective Strategy:

- Strategy to Try:

The following are some examples:

- ☐ **Deep Breathing:** Practice slow, deep breaths to help calm your nervous system.
- ☐ **Use a Support Network:** Reach out to trusted friends or family members.
- ☐ **Journaling:** Write about your feelings and experiences.

- **Positive Affirmations:** Counteract negative thoughts with positive ones.
- **Safe Space Visualization:** Imagine a place where you feel completely safe.
- **5-4-3-2-1 Technique:** Identify 5 things you can see, 4 things you can touch, 3 things you can hear, 2 things you can smell, and 1 thing you can taste.
- **Hold Something Cold:** Holding something cold like an ice cube can sharply bring your attention to the present.
- **Name Your Surroundings:** Verbally list things around you to refocus your attention on your environment.
- **Use a Stress Ball:** Squeeze and release a stress ball to focus on the sensation in your hand.
- **Touch Different Textures:** Touch objects with various textures and focus on how each feels.
- **Grounding with Colors:** Pick a color and find objects around you that match it.
- **Count Backwards:** Count down from 100 by 7s or another challenging number to engage your mind.
- **Stretching:** Do gentle stretches and pay attention to how your body feels.
- **Draw or Color:** Focus on the act of drawing or coloring detailed pictures.
- **Make a List:** Create a list about anything (e.g., books you want to read) to focus your thoughts.

Building Internal Strengths

1. Identifying Internal Strengths

Think about qualities or skills that you consider to be your strengths. These could be emotional, cognitive, physical, or spiritual qualities that have helped you in challenging times.

2. Strengths in Action

Recall specific instances where your strengths helped you overcome a challenge, made a positive impact, or were particularly noticeable.

3. Developing Internal Strengths

For each strength listed, think of ways you can further develop or utilize these strengths in your daily life or in challenging situations.

4. Visualization of Strengths

Engage in a visualization exercise where you imagine yourself utilizing your strengths in a future situation. Visualize the outcome and how it feels to draw upon these internal resources.

- Situation Visualized:

- Strengths Utilized:

- Outcome and Feelings:

5. Creating Affirmations

Create positive affirmations that reinforce your internal strengths. Repeat these affirmations daily to embed these strengths in your self-perception.

2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

Classification status

- DSM-5-TR: No standalone DSM-5-TR diagnosis under the workbook title · educational/contextual topic unless a separately assessed disorder applies
- ICD-11 CDDR: No dedicated ICD-11 CDDR mental-disorder code under the workbook title · educational/contextual topic unless another coded condition is established
- This workbook is non-diagnostic. A title, checklist, or completed activity never establishes a diagnosis.

Pages requiring the updated interpretation

- The audit identified source pages 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35. The statements below supersede incompatible diagnostic, scoring, safety, or resource wording on those pages.

Diagnostic and differential limits

- Use EMDR Therapy material to support assessment or intervention planning, not to assign a diagnosis. Evaluate duration, severity, clinically significant distress or impairment, developmental and cultural context, medical/substance causes, exclusions, and relevant differentials.

Document-specific corrections

- Keep EMDR Therapy explicitly non-diagnostic; its exercises organize experience and goals but do not establish a mental disorder or causal explanation.
- Supersede diagnostic-sounding scoring on pages [1, 2, 3, 4, 20, 21]: disclose whether each tool is validated or author-created, remove unsupported thresholds, and separate symptom monitoring from diagnosis.
- Revise trauma/protocol material on pages [1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35]: distinguish stabilization and reflection from trauma processing, state training/scope requirements, and add dissociation, acute-risk, and destabilization safeguards.
- Replace crisis wording on pages [2] with the current U.S. 988 call/text/chat pathway, 911 or nearest emergency department for immediate danger/medical emergency, and a direction to use verified local services outside the United States.

Measures, scoring, and permissions

- Pages [1, 2, 3, 4, 20, 21] contain named, implied, or author-created screening/rating content; extracted candidate names include: Trauma Inventory, SUD Scale . These scores are not diagnostic unless the exact instrument, version, validation population, administration, and interpretation are established. Identify provenance for every item set and scoring rule. Obtain publisher permission/license when required; otherwise remove cutoffs and label it as a nonvalidated reflection checklist, or replace it with a properly licensed measure without altering its wording/scoring.

Intervention scope and contraindications

- Limit self-directed material to preparation, resourcing, symptom monitoring, and aftercare. Memory targeting, bilateral stimulation, and reprocessing require an appropriately trained clinician; screen for dissociation, instability, acute risk, substance effects, psychosis/mania, and medical concerns.
- Trauma processing, exposure, and EMDR require appropriate competence, informed consent, stabilization/readiness assessment, dissociation screening, pacing, and a plan for worsening symptoms.

Crisis and current resources

- For EMDR Therapy, use: ·If there is immediate danger or a medical emergency, call 911 or go to the nearest emergency department. In the U.S., call or text 988 or use 988lifeline.org for 24/7 crisis support. Outside the U.S., use verified local emergency and crisis services.· Verify all topic-specific agencies and links at publication.

Authoritative references

- <https://www.psychiatry.org/psychiatrists/practice/dsm/updates-to-dsm/updates-to-dsm-5-tr-criteria-text>

2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

- <https://www.psychiatry.org/getmedia/b68a5776-f88c-45c7-9535-fd219d7aa5cb/APA-DSM5TR-Update-September-2025.pdf>
- <https://icd.who.int/browse/2026-01/mms/en>
- <https://www.who.int/publications/i/item/9789240077263>
- <https://www.samhsa.gov/mental-health/988>
- <https://www.samhsa.gov/mental-health/national-behavioral-health-crisis-care>
- <https://www.healthquality.va.gov/guidelines/MH/ptsd/>
- <https://988lifeline.org/>
- <https://www.healthquality.va.gov/HEALTHQUALITY/guidelines/MH/ptsd/index.asp>