



SYNTHETIC EXAMPLE

PTSD Checklist for DSM-5

PCL-5 - presentation preview

CLIENT

John Doe

ADMINISTERED

Example date

RESPONSE MODE

Self-report

INSTRUMENT

PCL-5

SOURCE

VA National Center for
PTSD

CLINICAL ROLE

PTSD symptom support
for clinician review

What this report lays out

- Named instrument, version, and provenance
- Item-level response pattern without source wording
- Methodology, references, and clinical boundary
- Responsible clinician review rather than automated conclusions

CLINICIAN REVIEW REQUIRED

This document demonstrates Lirena's report design using fictional data. It does not represent a scored PCL-5 result, cannot establish a diagnosis, and must not be placed in a clinical record.

PCL-5 does not diagnose PTSD. It cannot establish exposure, duration, functional impact, or differential diagnosis. Safety, dissociation, and comorbidity still require clinician review.



A report designed for clinical review

Clear structure, visible provenance, and an explicit boundary help a clinician review recorded evidence without mistaking a questionnaire for a conclusion.

REVIEW

Respondents rate past-month symptom intensity. Clinics should pair the measure with trauma-context assessment, safety review, and clinician-led differential diagnosis. This page does not collect trauma narratives.

CONTEXT

Official materials describe totals, cluster scoring, and possible screening uses. This page does not independently verify a cutoff or production scoring rule. Use the National Center resources for the form you intend to use.

SOURCE

Check the official VA/NCPTSD materials and any local governance for trauma measures. This catalogue entry does not assign PCL-5 from the public site.

REPORT PRINCIPLE

Show the evidence, the version, and the boundary. Leave diagnosis and formulation with the clinician.



Item-level layout without source wording

This marketing sample uses invented item numbers and response labels only. It does not reproduce PCL-5 item wording, and the pattern below is not a real result.

ITEM	ILLUSTRATIVE SCALE POINT	FICTIONAL RESPONSE
1	1 of 5	Not at all
2	2 of 5	A little
3	1 of 5	Not at all
4	4 of 5	Often
5	4 of 5	Often
6	2 of 5	A little
7	4 of 5	Often
8	1 of 5	Not at all
9	4 of 5	Often
10	4 of 5	Often
11	4 of 5	Often
12	1 of 5	Not at all
13	1 of 5	Not at all
14	5 of 5	Most days

Item numbers, scale points, and responses on this page are invented for layout demonstration. They are not this instrument's item set, scoring structure, or thresholds.



Source-led by design

Lirena separates published methodology, product implementation, and clinical approval. A citation does not by itself authorize administration or prove a software scoring rule.

INSTRUMENT

The PTSD Checklist for DSM-5 is maintained by the U.S. Department of Veterans Affairs National Center for PTSD. It asks about past-month symptom intensity corresponding to DSM-5 PTSD clusters. It is a structured symptom account, not a diagnostic interview.

ADMINISTRATION

Respondents rate past-month symptom intensity. Clinics should pair the measure with trauma-context assessment, safety review, and clinician-led differential diagnosis. This page does not collect trauma narratives.

CLINICAL BOUNDARY

PCL-5 does not diagnose PTSD. It cannot establish exposure, duration, functional impact, or differential diagnosis. Safety, dissociation, and comorbidity still require clinician review.

GOVERNANCE

Check the official VA/NCPTSD materials and any local governance for trauma measures. This catalogue entry does not assign PCL-5 from the public site.

SELECTED REFERENCES

1. Official PCL-5 information

National Center for PTSD. PTSD Checklist for DSM-5 (PCL-5).

2. Psychometric paper

Blevins CA et al. The Posttraumatic Stress Disorder Checklist for DSM-5. J Trauma Stress. 2015;28(6):489-498.

SOURCE AND VERIFICATION Confirm the official form with the source before any live workflow.