## Outline

#### **Assess Medical Traumatic Stress:**

How medical trauma differs from other types of trauma

How to get the full story:

- trauma interview
- health-related anxiety
- distress thermometer
- · comprehensive health history

Recognize clinical disorders and biopsychospiritual crises

## The Layered Narrative of Medical Trauma:

Case conceptualization and treatment preparation

Experience with initial injury/illness treatment experiences

Issues in short- and long-term recovery "Disenfranchised" nature of medical trauma: how to have conversations with clients about the mind-body connection Recalibrate relationships: naming stigma, ableism, and toxic positivity Ecological model of medical trauma

#### **Treatment of Medical Trauma:**

beliefs and cognitions

Integrative approach to treat clients' unique needs
Identify medical trauma-related core

Engage behavioral strategies Address social constraints and systemic invalidation Integrate health and rehabilitation psychology principles

- Illness/injury psychoeducation
- Meaning making
- Coping with somatic trauma cues
- Strategies for managing insomnia and chronic pain
- Adjustment to illness or injury
- Expectation management
- Cognitive rehabilitation
- Support medical advocacy and avoiding retraumatization

Limitations of the research and potential risks

#### **Case Studies:**

- PTSD and COVID-19: 36-year-old woman
- Social anxiety and irritable bowel disease: 20-year-old man
- Dependent personality disorder and congenital heart condition: 45-yearold woman

## Live Webinar Schedule

(Times listed in Eastern,

**8:00** Program begins

11:50-1:00 Lunch Break

4:00 Program ends

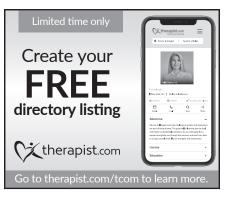
There will be two 15-min breaks (mid-morning & mid-afternoon).

Actual lunch and break start times are at the discretion of the speaker.

A more detailed schedule is available upon request.

## **Objectives**

- 1. Employ evidence-based assessments to identify mental health symptoms stemming from traumatic medical events to inform clinical treatment interventions.
- 2. Utilize the ecological model of medical trauma to develop a trauma-informed case formulation.
- 3. Practice at least two strategies for communicating effectively with clients about the mind-body connection for the purposes of improving treatment engagement.
- 4. Utilize cognitive restructuring on clients' unhelpful core beliefs and automatic thoughts centered on worth, ability, or control.
- 5. Construct behavioral experiments designed to assist clients with decreasing reactivity to medical-trauma related cues.
- Integrate at least two health and rehabilitation psychology strategies into trauma treatment.



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## Medical Trauma

Clinical Tools for Treating PTSD, Anxiety, and Depression Following a Health Crisis

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# Medical Trauma

Clinical Tools for Treating PTSD, Anxiety, and Depression Following a Health Crisis

- No one is immune from health crises restore a sense of safety after medical emergencies and lifealtering diagnoses, including COVID-19
- Discover how medical trauma and its health consequences contribute to many clinical problems
- Respond to the unique ways PTSD manifests after medical trauma

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## **Medical Trauma**

Clinical Tools for Treating PTSD, Anxiety, and Depression Following a Health Crisis

Your clients with medical trauma know that a health crisis can upend life at any moment.

And they know that crisis doesn't end when the physical body is stabilized.

The impacts of medical trauma are as broad as they are misunderstood. Many mental health problems can arise from experiences like heart attack, stroke, intubation and mechanical ventilation, emergency Caesarean section, allergic reaction, seizure, accidentrelated amputation, cancer diagnosis, and more.

While some clients may have entered your practice with the unique presentation of PTSD that results from medical trauma, many more have likely come to you for help with other clinical issues that could be fueled by a past health crisis. Think of the client with depression who also has a history of heart failure. Or the client with social anxiety whose irritable bowel disease is listed on your intake form but never gets discussed. Or the client with dependency issues in their relationships who harbors a deeply entrenched sense of fragility related to a congenital illness.

Join medical trauma expert Dr. Sacha McBain for this one-day training that will help you understand the interconnectedness of the mind and body. You will learn to:

- conduct assessments that elucidate the mental health impacts of your clients' health histories
- develop trauma-informed case formulations that integrate health and rehabilitation psychology principles into evidence-based treatments
- support your clients' mental and physical health by giving them the skills they need to maintain treatment adherence and engage in effective medical self-advocacy

Your clients with medical trauma have associated treatment with danger. Register today to provide them with a trauma-informed approach to promote physical and psychological recovery!



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## **Meet Your Speaker**



**Sacha McBain, PhD,** is a clinical psychologist and assistant professor at the University of Arkansas for Medical Sciences (UAMS) in Little Rock, AR, where she serves as the associate director of the Center for Trauma Prevention, Recovery and Innovation and leads the Trauma Psychology Consult Service. Dr. McBain provides training and consultation to medical services regarding implementation of trauma-informed care practices and health care worker wellness initiatives designed to prevent posttraumatic

stress disorder. She has trained in community health and prevention research and implementation science in order to identify and put into place organizational practices within healthcare systems designed to increase access to mental health care following a traumatic event. She serves as an expert panel member on the American College of Surgeons Mental Health and Substance Use Disorder Best Practice Guidelines Work Group and is an active member of the International Society for Traumatic Stress Studies.

Financial: Sacha McBain has employment relationships with the University of Arkansas for Medical Sciences, the University of Texas Houston, the University of Colorado, the University of Montana, and the VA San Diego. She receives grants from UAMS Interprofessional Small Grant and UAMS Translational Research Institute Biomedical Informatics Pilot Grant. Sacha McBain receives a speaking honorarium and recording royalties from PESI, Inc. She has no relevant financial relationships with ineligible organizations.

Non-financial: Sacha McBain is a member of the International Society for Traumatic Stress Studies.

## **Target Audience:**

Counselors • Social Workers • Psychologists • Psychiatrists • Marriage & Family Therapists Addiction Counselors • Other Mental Health Professionals • Physicians Physician Assistants • Nurse Practitioners • Nurses

#### **CE CREDITS AVAILABLE FOR LIVE WEBINAR**

This continuing education activity is designed to meet state board requirements for the following professionals: **Addiction** Counselors, Counselors, Marriage and Family Therapists, Nurses, Physicians, Physician Assistants, Psychologists, and Social Workers.

For specific credit approvals, details, and planning committee disclosures please see the "credit approvals and details" URL below. For speaker disclosures, please see speaker bios.

#### National CE Credit Approvals For Live Webinar

Credits listed are for full attendance at the live webinar only. The CF certificate can be downloaded/printed after completing the webinar, passing the online post-test (80% passing score), and completing the evaluation. Please see schedule for full attendance start and end times. NOTE: Boards do not allow credit for breaks or lunch.



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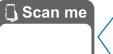
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