

## Additional Information

1C. Veteran/service member's name. last name:  
Wolfeschlegelsteinhausenbergerdorff

7. E-mail address (optional).:  
testy.testerson\_thisisasuperreallylongemailaddressthatshouldoverflow@gmail.com

9A. Traumatic event(s) information Line 1:  
Event Number: 1

Event Description:

Corpsman on medical ship in Da Nang harbor, Vietnam

Event Location:

Stationed on U.S.S. XYZ

Event Date:

Summer of '70

9A. Traumatic event(s) information Line 2:  
Event Number: 2

Event Description:

Mugged

Event Location:

Back alley in Big Town, USA

Event Date:

June 2007

9A. Traumatic event(s) information Line 3:  
Event Number: 3

Event Description:

I would be minding my own business and this other soldier would use his rank to force me to do push ups and sit ups and other stuff even when we were off duty. If I refused the next day would be worse during work hours and he would like to the chain of command that I had done something wrong. He would harass and belittle me. I tried to tell someone but nobody cared, I would just get in more trouble.

Event Location:

Fort Belvior, VA

Event Date:

June 2007

9A. Traumatic event(s) information Line 4:  
Event Number: 4

Event Description:

Lorem ipsum dolor sit amet.  
More lorem ipsum dolor sit amet.

Event Location:

abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a

Event Date:

Autumn of 1995

9A. Traumatic event(s) information Line 5:  
Event Number: 5

Event Description:

Lorem ipsum dolor sit amet.

Event Location:

abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a

Event Date:

Winter of '68

9A. Traumatic event(s) information Line 6:  
Event Number: 6

Event Description:

Lorem ipsum dolor sit amet.

Event Location:

abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a

Event Date:

Spring of '72

9A. Traumatic event(s) information Line 7:  
Event Number: 7

Event Description:

Lorem ipsum dolor sit amet.

Event Location:

abcdefghijklmn opqrstuvwxyz1234a bqrstuvwxyz1234a

Event Date:

Summer of '69

10A. Description of behavioral change Line 1:

Increased/decreased visits to a healthcare professional, counselor, or treatment facility

10B. Additional information about behavioral changes Line 1:

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10A. Description of behavioral change Line 2:

Request for a change in occupational series or duty assignment

10B. Additional information about behavioral changes Line 2:

Reassignment not long enough to overflow

10.0C. Additional behavioral changes:

Unlisted string 268 characters long enough to overflow the limit of 784 characters. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed loremsd. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed loremsd. This is the end.

11A. Police report location:

SVI, Dalworthington Gardens, TX, USA; Local Police Department, NJ, Lower Alloways Creek Township, USA

12. Other:

Photographic evidence. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua.

13C. Treatment information Line 1:

Treatment Information Number: 1

Treatment Facility Name and Location:

Walter Reed, Bethesda, MD

Treatment Date: 02-2014

13C. Treatment information Line 2:

Treatment Information Number: 2

Treatment Facility Name and Location:

Cedarwood Behavioral Health Center, 4321 Oak Ridge Rd, Maplewood, MN

Treatment Date: XX-2024

13C. Treatment information Line 3:  
Treatment Information Number: 3

Treatment Facility Name and Location:

Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

Treatment Date: Don't have date

13C. Treatment information Line 4:  
Treatment Information Number: 4

Treatment Facility Name and Location:

Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

Treatment Date: Don't have date

#### 14. Remarks:

The traumatic event I experienced during my service has had a profound and lasting impact on my mental health. Since the incident, I have struggled with symptoms of Post-Traumatic Stress Disorder (PTSD), depression, and anxiety, which have significantly affected my daily life and well-being. After the event, I began to notice intense feelings of fear and helplessness whenever I was reminded of the experience. These flashbacks were frequent and uncontrollable, often triggered by loud noises, crowded places, or even certain smells. The emotional distress caused by these flashbacks would leave me feeling overwhelmed, panicked, and unable to function. At times, it felt as though I was reliving the traumatic experience, and I had difficulty distinguishing the past from the present. I also developed chronic insomnia. I found it difficult to fall asleep, and when I did manage to sleep, I was frequently awakened by nightmares of the traumatic event. These disturbed nights left me feeling exhausted and unable to perform basic tasks during the day. The lack of rest contributed to a decline in my physical health, as I struggled with fatigue, headaches, and an overall sense of lethargy. Socially, I became increasingly withdrawn. I avoided interactions with friends, family, and even fellow service members, as I felt disconnected and unable to trust anyone. My relationships suffered as I became irritable, short-tempered, and emotionally distant. I found it hard to experience joy or satisfaction in anything, including activities I once enjoyed, such as hobbies and socializing. I rarely leave my house, even if it's to go get groceries. Since then I've found fewer and fewer reasons to live. I've lost all interest in the things I once loved, and I struggle to find any joy in the present moment. I've become increasingly isolated, and I often feel like I'm just going through the motions of life. I'm not sure how much longer I can keep this up. The traumatic event I experienced during my service has had a profound and lasting impact on my mental health. Since the incident, I have struggled with symptoms of Post-Traumatic Stress Disorder (PTSD), depression, and anxiety, which have significantly affected my daily life and well-being. After the event, I began to notice intense feelings of fear and helplessness whenever I was reminded of the experience. These flashbacks were frequent and uncontrollable, often triggered by loud noises, crowded places, or even certain smells. The emotional distress caused by these flashbacks would leave me feeling overwhelmed, panicked, and unable to function. At times, it felt as though I was reliving the traumatic experience, and I had difficulty distinguishing the past from the present. I also developed chronic insomnia. I found it difficult to fall asleep, and when I did manage to sleep, I was frequently awakened by nightmares of the traumatic event. These disturbed nights left me feeling exhausted and unable to perform basic tasks during the day. The lack of rest contributed to a decline in my physical health, as I struggled with fatigue, headaches, and an overall sense of lethargy.

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16A. Veteran/service member's signature:

/es/ Bartholomew Wolfeschlegelsteinhausenbergerdorff