

Section I: Veteran's Identification Information

1. Veteran/Service member's name

First: Laura
Middle Initial: J
Last: Rodriguez-Wittgenstein

7. Email address

testy.testerson_thisisasuperreallylongemailaddressthatshouldoverflow@gmail.com

Section II: Traumatic Event(s) Information

9. Traumatic event(s) information

Event 1

Description: Corpsman on medical ship in Da Nang harbor, Vietnam
Location: Stationed on U.S.S. XYZ
Date: Summer of '70

Event 2

Description: Mugged
Location: Back alley in Big Town, USA
Date: June 2007

Event 3

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.
Location: Fort Belvoir, VA
Date: June 2007

Event 4

Description: Lorem ipsum dolor sit amet.
More lorem ipsum dolor sit amet.
Location: abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Date: Autumn of 1995

Event 5

Description: Lorem ipsum dolor sit amet.
Location: abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Date: Winter of '68

Event 6

Description: Lorem ipsum dolor sit amet.
Location: abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Date: Spring of '72

Event 7

Description: Lorem ipsum dolor sit amet.
Location: abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Date: Summer of '69

Section III: Additional Information Associated with the In-service Traumatic Event(s)

10 Behavioral Changes Following In-service Personal Traumatic Event(s)

Behavioral Change 1

Description: Request for a change in occupational series or duty assignment
Additional Information: Following the incident, I sought medical and psychological treatment, which included therapy sessions with a licensed psychologist and regular consultations with my healthcare provider. These professionals have indicated that due to trauma, I am no longer able to perform at my previous work capacity. In particular, I struggle with brain fog, concentration, and fatigue, which were not issues prior to the event.

Behavioral Change 2

Description: Changes in eating habits, such as overeating or under eating or significant changes in weight
Additional Information: no response

Behavioral Change 3

Description: Listed Additional Behavioral Changes
Additional Information: Really long 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 laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum. Really long 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 laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Section IV: Treatment Information

13. Treatment information

Treatment facility 1

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.

Facility name: Walter Reed, Bethesda, MD

Treatment date: 02-2014

Treatment facility 2

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.

Facility name: Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

Treatment date: no response

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

night 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,

Facility name: Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

Treatment date: no response

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.

The traumatic event I experienced during my service has had a profound and lasting impact

on my life, affecting my ability to function and find meaning in my daily life.

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.

Section V: Remarks

14. Remarks