WHAT TO DO

• Take the risk factors and signals seriously. If you think someone is considering suicide, ASK HIM OR HER “Are you suicidal?” or “Do you want to kill yourself?” If the answer is “yes,” GET HELP.

• Show interest in the person and be supportive.

• Offer hope that there are alternatives to suicide. DO NOT LEAVE THE PERSON ALONE.

• Take action. Remove methods he or she might use to kill him or herself.

• Seek help from his or her family, friends, physician, clergy, etc.

• IMMEDIATELY contact a person or organization that specializes in crisis intervention or suicide prevention for help. (See the back of this brochure).

WHERE TO GET HELP

If you or someone you know is thinking about suicide, call 1-800-273-TALK (8255). The National Suicide Prevention Lifeline will automatically connect you with a certified local crisis center 24 hours a day, 7 days a week.

Get the TSPN App:
Available on Apple and Android

Send “TN” to 741 741
Suicide Prevention TEXT LINE
www.crisistextline.org

615-297-1077 • www.tspn.org

CLINICAL CARE

TN Veterans Administration Medical Centers
Nashville Campus: 1-800-228-4973
Murfreesboro: 1-800-876-7093
Memphis: 1-800-636-8262
For outpatient clinics, Community Based Outpatient Clinics, and Vet Centers, see the US Department of Veteran Affairs website: www.va.gov

Returning Service Members (OEF/OIF/OND)
Clarksville / Ft. Campbell / Hopkinsville:
(615) 815-5226 or (270) 956-0458
Chattanooga: (423) 893-6500, ext. 27060
Memphis: 1-800-636-8262, ext. 7319
Johnson City/Mountain Home: (423) 926-1171, ext. 2231
Murfreesboro/Nashville: (615) 873-8638
Tullahoma: (615) 225-3937

Also see:
Centerstone Military Services (counseling): (866) 781-8010
Wounded Warrior Project (Nashville office): (615) 782-7226

VA Returning Combat Veteran Site
www.oefoif.va.gov

Funding for this brochure was provided under grant numbers IHS07SM061744-01 from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). The views, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.
POST-TRAUMATIC STRESS DISORDER

PTSD is an anxiety disorder that can occur after a traumatic event. Some of those include:

- Explosions, such as bomb blasts or improvised explosive device (IED) detonations
- Sniper attacks
- Terrorist attacks
- “Friendly fire” incidents
- Exposure to civilian or military casualties

Common symptoms:

- Reliving the event
- Avoiding situations that remind you of the event
- Feeling numb
- Feeling “keyed up”, always on alert and expecting danger

TRAUMATIC BRAIN INJURY

Traumatic brain injury (TBI) is caused by an external physical force resulting in total or partial disability. TBI is common in active war zones as a result of explosions. Symptoms can include:

- Problems with judgment, memory, and decision making
- Headaches
- Seizures
- Failure of motor skills
- Mood swings
- Sexual difficulties

After a traumatic event, it is normal to feel frightened, angry, or disoriented. If these feelings continue for an extended period of time or becomes disruptive to everyday activities, seek professional help.