Supplemental Information

Supplemental Methods and Materials

Participant Exclusion Criteria

Participants were also excluded for urine toxicology that was positive for cocaine and hearing impairment as measured with an audiometer (Grason-Stadler, Model GS1710). All subjects were able to detect tones at 30 dB (A) SPL at frequencies ranging from 250-4000 Hz.

Medication Use

Participants were not excluded from the study for medication use; however, given that the recruitment occurred in primary care rather than mental heath clinics, the frequency of psychotropic medication use was not high. Specifically, 8 participants used antipsychotic medication (4 in PTSD+ group and 4 in PTSD- group, $\chi^2 = 0.44$, ns), 4 participants used benzodiazepines (2 in each group, $\chi^2 = 0.22$, ns), and 6 participants were on antidepressants, primarily SSRIs (4 in the PTSD+ group and 2 in the PTSD- group, $\chi^2 = 2.05$, ns).

Conditioned (CSs) and Unconditioned Stimuli (US)

CSs were colored shapes presented on a computer monitor for 6 sec. The airblast US was a 140 p.s.i. puff emitted by a compressed air tank attached to polyethylene tubing and controlled by a solenoid switch.

Acoustic Startle Probes

The startle probe was a 108-dB (A) SPL, 40-ms burst of broadband noise with near instantaneous rise time, delivered binaurally through headphones.

Electromyography (EMG) Data Collection

The eyeblink component of the acoustic startle response was measured by EMG recordings of the right *orbicularis oculi* muscle with two 5-mm Ag/AgCl electrodes filled with electrolyte gel. One electrode was positioned 1 cm below the pupil of the right eye and the other was placed 1 cm below the lateral canthus. Impedance levels were less than 6 kilo-ohms for each participant.

EMG Signal Processing

The acquired data were filtered, rectified, and smoothed using the MindWare software suite (MindWare Technologies, Ltd., Gahanna, OH) and exported for statistical analyses. The EMG signal was sampled at a frequency of 1 kHz and filtered with low- and high-frequency cutoffs at 28 and 500 Hz, respectively. The maximum amplitude of the eyeblink muscle contraction 20-200 ms after presentation of the startle probe was used as a measure of the acoustic startle response.