Brief Strangulation Protocol$^1,^2$

If the victim reported being choked/strangled (item 10a on DA or item 4a on DA-5), follow this strangulation protocol for further assessment and/or referral.

- **If the strangulation was less than a week ago:**
  - Examine the inside of the throat, neck, face, and scalp for physical signs of strangulation.
  - Refer to the strangulation assessment and radiographic evaluation information at www.strangulationtraininginstitute.com
  - Proceed with emergency medical care for strangulation, especially if loss of consciousness or possible loss of consciousness (victims are commonly unsure about loss of consciousness. If the victim lost consciousness, s/he will have become incontinent - ask if the victim “wet her/himself”).

- **If the victim reports more than one strangulation:**
  - Conduct a neurological exam for brain injury or refer for examination;
  - Inform her/him of increased risk for homicide.

- **Notify police and/or prosecutors** if the victim wants this action.
  - Know state/local law on strangulation and mandatory reporting so that the victim can be informed.

- For more information on homicide risk, please visit [www.dangerassessment.org](http://www.dangerassessment.org)
- For more information on strangulation, please visit [https://www.strangulationtraininginstitute.com](https://www.strangulationtraininginstitute.com)

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$^1$ This protocol came from the Practitioners Guide for the DA-5, which is a brief adaptation of the Danger Assessment (2003). It is designed for use by a health care provider following a positive screen for intimate partner violence.