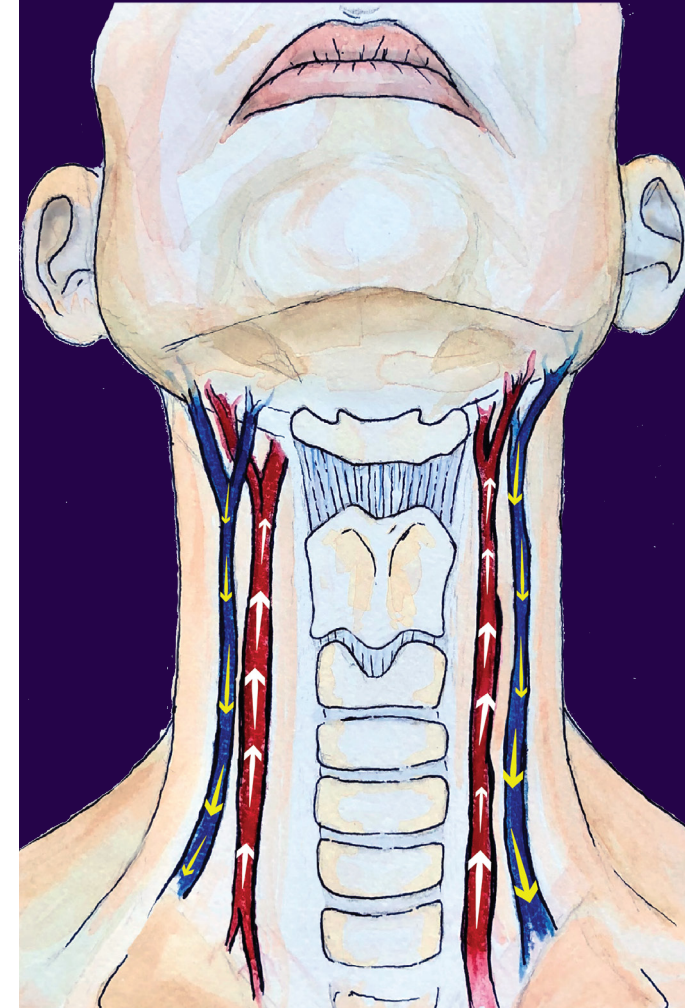


QUESTIONS AT A STRANGULATION SCENE

1. How do you feel now?
2. Are you having any difficulty breathing?
3. At any time did they place their hands or other object on your neck?
4. Do you think you lost consciousness?
5. What is the last thing you remember while the pressure was on your neck? What did you remember immediately next. (LOC)
6. Did you vomit, urinate or defecate during this incident? Were you aware of when this happened or did you realize later?
7. Were you held against a wall, floor or any other surface?
8. Can you describe how you were strangled? Could you demonstrate on this wig head? Did your feet ever leave the ground while you were being strangled?
9. Did they shake you by the neck?
10. Was the strangling brief or lengthy? Could you estimate how long? How much pressure was used? Describe it on a scale of 1-10. Was it continuous?
11. Can you tell me about any vision changes?
12. Did you or do you currently have any change with your hearing?
13. Does your voice sound any different?
14. How does your throat feel now? Describe.
15. Are you having any trouble swallowing?
16. Do you recall what were you thinking about while there was pressure on your neck?
17. Describe how you felt while being strangled.
18. Were you able to try and stop them?
19. What did they say to you if anything?
Before - During - Afterwards
20. What caused the person to stop?
21. Was the person wearing any rings?
22. Do you notice anything different about your complexion now that is different than before the strangling? (Petechiae)
23. How many times were you strangled in this event?
24. Have they ever put pressure on your neck in the past? When, where and what happened?
25. Any object used? Document where the object came from. Photograph, process and book the item as evidence.
26. Encourage medical treatment.



STRANGULATION A Quick Reference Guide



Information in this brochure provided courtesy of
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Dr. Bill Smock, Dr. William Green and Gael Strack JD

STRANGULATION Is A High-Lethality Crime

A study in *The Journal of Emergency Medicine*
in 2008 showed that when a man strangles
his partner one time, it increases the odds
he will kill her by **750%**

This project is supported all or in part by Grant No. 15JOVW-23-GK-05151-MUMU awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

Strangulation is a form of asphyxia (lack of oxygen) characterized by closure of the blood vessels and/or air passages of the neck as a result of external pressure on the neck. Absence of a visible injury is common while symptoms of internal injuries may be present.

SYMPTOMS OF STRANGULATION

- **Loss of consciousness**
- **Vision changes:** "spots," "tunnel vision"
- **Altered mental status:** "dizzy," "confused," "lightheaded"
- **Breathing difficulty**
- **Incontinence** (bladder or bowel)
- **Changes to hearing**
- **Neurologic symptoms:**
- seizure-like activity, stroke-like symptoms, headache, tinnitus, amnesia
- **Neck tenderness** or pain/sore throat/pain with swallowing
- **Changes in voice:** unable to speak, hoarse or raspy voice

SIGNS OF STRANGULATION

- **Redness of the neck** - may be fleeting
- **Scratch marks or abrasions**
- **Ligature marks or bruises** - may not immediately appear
- **Tiny red spots (Petechiae)** - ruptured capillaries. Found anywhere above the area of constriction. (Jugular restriction)
- **Fingertip bruises** - circular and oval and often faint.
- **Blood red eyes** - due to capillary rupture in the white portion of the eyes
- **Swelling of the neck** - may be caused by any one or combination of the following: internal bleeding, or an injury of any of the underlying neck structures

INDICATORS OF LOSS OF CONSCIOUSNESS

- | | |
|---|--------------------------------------|
| Loss of memory | A witness to the LOC |
| Gap in memory | Bowel or bladder incontinence |
| Unexplained injury | Neurologic seizures |
| Standing, then waking up elsewhere | |

STAGES OF STRANGULATION

Disbelief (Pain)	Can't believe they are being strangled. Very short duration.
Primal (Panic)	Fights with whatever means to stop the strangling. Ask the victim if they were able to get away/stop the attack. This may explain injuries.
Resignation	Gives up, feeling they can do nothing and go limp. Ask the victim what they were thinking about. What did they think was going to happen?

VICTIMS WHO DECLINE MEDICAL CARE

- | | |
|---|--|
| Discuss warning signs | Do they have someone at home to monitor them? |
| Encourage victim to seek medical attention | Advise victim to log later symptoms |
| Next 24-48 hours are critical | |

INTERVIEWING TRAUMA VICTIMS

Trauma physically changes the brain and memory. The Hippocampus, where memory is stored is very sensitive to a lack of oxygen.

Trauma Can Cause:

- Immediate triggering of chemicals.
- Chemicals influence perception, reaction and memory.
- Memory becomes fragmented and is stored differently.

Pro Tips:

1. Ask the victim what they can remember.
2. They will remember more days later.
3. Let them tell their story without interruption.

FOLLOW-UP QUESTIONS

1. Tell me how you feel now
2. Have any new injuries appeared?
3. Do you feel pain anywhere? Describe.
4. Does your voice sound the same?
5. Is there any different feelings when you eat? Describe.
6. Does it feel any different when you swallow? Describe.
7. What is different now than before the assault? Describe.
8. Have you heard from the suspect?
9. Tell me what you remember about the assault. (Looking for more details)
10. Have they tried to/put pressure on your neck in the past?
11. How can I contact you if you change your phone or address?
12. Is there anything you want to talk about that we have not discussed?