DIVISION OF POLICE

ATTEMPTED STRANGULATION WORKSHEET

Name of Victim_____ Case #_____

Date of Interview_____ Date of Incident _____

1. How was the victim strangled?

□ One hand (R or L) □ Two hands □ Forearm (R or L) □ Knee/Foot

□ Object/Ligature (Describe)_____

□ How long? _____seconds _____minutes

□ Pinned or banged against wall? □ Straddled? □ Smothered?

□ Shaken while being strangled? □ Head pounded against wall, floor or ground?

□ From 1 to 10, how hard was suspect's grip? (Low) 1 2 3 4 5 6 7 8 9 10 (High)

□ From 1 to 10, how painful was it? (Low) 1 2 3 4 5 6 7 8 9 10 (High)

□ Multiple attempts_____ □ Multiple methods_____

□ Was pressure continuous?_____

□ Strangulation occurred from **FRONT** or **REAR**

□ Victim rendered unconscious? How ? _____seconds _____minutes

2. Where did the incident take place?_____

3. Did victim try to get free or protect him/herself?_____ Describe_____

_____

4. Was victim pregnant at the time? NO YES # months_____

5. Is suspect RIGHT or LEFT handed? (Circle one) □ Suspect was wearing ring(s)

6. How or why did suspect stop strangling victim?_____

7. What did suspect say during strangulation?_____

8. What did victim think was going to happen?_____

9. What did suspect's face look like during strangulation?_____

Medical Information/Observations

Please identify for each symptom whether the specific symptom appeared at the time of the incident (ATI), since the incident (SI), or currently (C). More than one box may be checked if applicable.

	At Time of Incident	Since Incident	Currently
Breathing Changes:			
☐ Difficulty breathing	☐	☐	☐
☐ Hyperventilating	☐	☐	☐
☐ Unable to breathe	☐	☐	☐
Voice Changes:			
☐ Raspy Voice	☐	☐	☐
☐ Hoarse Voice	☐	☐	☐
☐ Coughing	☐	☐	☐
☐ Unable to speak	☐	☐	☐
Swallowing Changes:			
☐ Trouble swallowing	☐	☐	☐
☐ Painful to swallow	☐	☐	☐
☐ Neck pain	☐	☐	☐
☐ Nausea	☐	☐	☐
☐ Vomiting	☐	☐	☐
Behavioral Changes:			
☐ Amnesia	☐	☐	☐
☐ Agitation	☐	☐	☐
☐ Hallucinations	☐	☐	☐
Other:			
☐ Dizziness	☐	☐	☐
☐ Headaches	☐	☐	☐
☐ Fainting	☐	☐	☐
☐ Involuntary urination	☐	☐	☐
☐ Involuntary defecation	☐	☐	☐

At the time of conducting this interview, did the interviewer observe the following about the victim:

Face:

☐ Red of flushed ☐ Show petechiae ☐ Scratch marks ☐ Bruising

Eyes and Eyelids:

☐ Petechiae to **R** and/or **L** eyeball ☐ Petechiae to **R** and/or **L** eyelid

☐ Bloody **R** and/or **L** eyeball

Nose:

□ Bloody nose □ Broken nose □ Damage to orbital socket □ Petechiae

Ears:

□ Petechiae **R** and/or L □ Bleeding **R** and/or **L**

Mouth:

□ Bruising □ Swollen tongue □ Swollen lips □ Cut/Abrasions □ Tongue bitten

Under chin:

□ Redness □ Scratch marks □ Bruise(s) □ Abrasions

Chest:

□ Redness □ Scratch marks □ Bruise(s) □ Abrasions

Shoulders:

□ Redness □ Scratch marks □ Bruise(s) □ Abrasions

Neck:

□ Redness □ Scratch marks □ Bruise(s) □ Swelling

□ Fingernail impressions □ Ligature mark

Head:

□ Petechiae on scalp □ Hair pulled □ Bump □ Skull fracture □ Concussion

Interview conducted by:_____
First Name Last Name

Department:_____

Notes: