

JUNE/JULY 2020 E-NEWS: IMAGING TOOLKIT

Dear Friends,

Thank you for joining our recently held webinar on Imaging Recommendations for the Patient who is Strangled. Due to the overwhelming interest in our sold-out Imaging webinar, our E-news on Imaging, and the questions that have poured in, we decided to create this Imaging Toolkit to share with you for our June/July E-News.

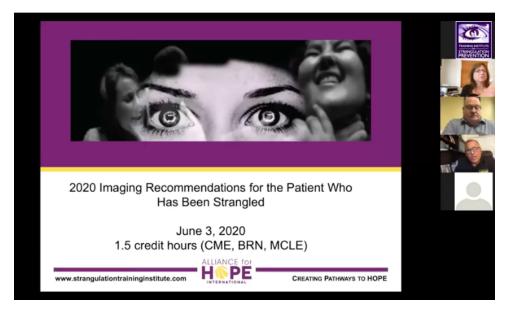
The Training Institute on Strangulation Prevention thanks you for your passion and commitment to promoting victim safety, health and well-being. We are continuously inspired by your determination to **DO MORE** for the patient who has been strangled and how to best implement promising practices in your community. For this E-News, we have included resources and a recording of our webinar so you can watch, share, and continue saving lives!

Always with great HOPE,

Gael, Casey, Karly, and Emma



NEW! 2020 IMAGING WEBINAR



CLICK HERE to watch our webinar "2020 Imaging Recommendations for the Patient who has been Strangled: Saving the Lives of Survivors"

The Training Institute on Strangulation Prevention is excited to host our second webinar on Imaging Recommendations for the Patient who has been Strangled with leading forensic experts in the field. Together, the panelists cover:

- The long journey to Imaging
- How & why the recommendations were developed
- The top 5 FAQs about implementing the imaging recommendations
- Updates and lessons learned since the recommendations that were first published in 2016
- Review of recent imaging articles
- · Recommendations for the patient who has been strangled
- Questions from attendees

Quotes from Panelists:

"Imaging provides peace of mind to patients and professionals. I would rather have an early diagnosis than a missed diagnosis. I would rather have a negative finding than a positive finding. A negative finding is priceless. A misdiagnosis is catastrophic." - Gael Strack, J.D.

"Most victims of strangulation and/or suffocation have internal injuries. An external examination is not enough. The only way to diagnose an internal injury is imaging or an autopsy. Victims of strangulation deserve the right to imaging similar to any other injured patient." - Casey Gwinn, J.D.

"New data involving the complex and controversial question of diagnostic imaging of the strangled patient is finally bringing consensus and clarity to the issue." - Dr. William Green "Strangulation...more common and potentially more lethal than you think; get the facts and guidance you need to know to make a difference." - Dr. Ralph Riviello

"Given the current state of our medical knowledge and the morbidity and mortality associated with a missed arterial injury in the neck, it is malpractice to *not* order a screening CTA in the non-fatal strangled patient." - Dr. William Smock

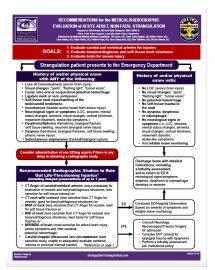
"This webinar will review and critique recently published research on imaging for patients that have been strangled, and discuss unique emergency department considerations for those providing that care." - Dr. Michael Weaver

FAQs FROM THE IMAGING WEBINAR

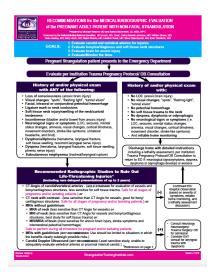




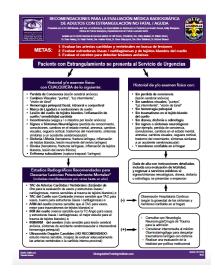
DOWNLOAD IMAGING RECOMMENDATIONS



Adult/English Version



Pregnancy Version



Adult/Spanish Version

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	(Recommendations based upon case reports, case studies, and cited medical literature)
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Imaging Citations

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TOOLS TO HELP ADVOCATE FOR MEDICAL ATTENTION/IMAGING

STRANGULATION ASSESSMENT CARD				
SIGNS	SYMPTOMS	CHECKLIST	TRANSPORT	
Red eyes or spots (Petechae) Neck swelling Nausea or vomiting Unsteady Unsteady Urinated Defecated Possible loss of consciousness Piosis – drcopy	Neck pain Jaw pain Jaw pain Scalp pain (from hair puling) Sore throat Difficulty breathing Difficulty swallowing Vision changes (spots, tunnel vision, fieldshing lights) Hearing changes Light headedness	Victims may look fine and say they are fine, but victims may look fine and say they are fine, but		
velid voopy face sizure ingue injury o injury	Headache Weekness or numbness to arms or legs Voice changes	statements in quotes. Give. Give the victim an advisal about delayed consequences. Loss of Consciousness. Victims may not remember. Lapae of memory? Okange in location? (Initiative? Detection?)	Iaryrgeal Factures, fractured hyoid bore, airway obstruction, stroke or even delayed death from a carotid disaction, biocódcir, bisprátoly complications, or anoxic brain damage. Tailatero, E., Haviey, D., McCane, G.E. & Strack, G. (200), Stranguiaton in Interne Parter Violas: Intel Partero Violas. Intel Parter Strates Parter Violas.	
 Mental status changes Voice changes 		Encourage. Encourage medical attention or transport if life-threatening injuries exist.	This project is supported all or in part by Grant No. 2014;74:AX:4003 awarded by the Office on Violence Agant Women U.S. Dept of Justice The opinion, findings, conclusions, and recommendations expressed in this publication are those of the subtro(ii) and do not necessarily velocit the Department of Lautice, Office on Violence Agant Women.	



Strangulation Assessment Card (English & Spanish) Victim Brochure (English & Spanish) 4-Minute Imaging Video with Dr. Smock 2-Minute PSA Video from the Institute NY Medical Alert on Imaging San Diego Medical Alert on Imaging Letter to the Editor - Response to the KY Article on CTAs Dear Doctor Letter



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