BOX F: Discharge planning

1. Safeguarding

a. Is the patient safe to go home?

b. Have all relevant safeguarding referrals been made?

2. Safety netting

a. Provide patient/carer with information regarding strangulation including signs and symptoms to watch out for that would need urgent medical assessment: Patient-Information.pdf

3. Imaging

a. For those not seen within 4 weeks of the strangulation and who were not currently symptomatic and have therefore not been scanned, they may still be at risk of vascular problems such as carotid artery dissection due to the blunt neck trauma for up to 12 months post event. Those who screen positive for any Red Flag (see Box B) may require outpatient imaging. Local arrangements will be required to cover such referrals and follow-up etc.

b. Consider antiplatelet treatment for those being referred for outpatient imaging.

4. Acquired brain injury assessment

Strangulation may result in acquired brain injury[14] (hypoxic-ischaemic), and this may lead to neuropsychological difficulties such as:

- Cognitive deficits (attention, memory, executive dysfunction etc)
- Speech and language difficulties
- Emotional dysregulation, personality changes and behaviour disturbance including aggression.

An assessment by a clinical neuropsychologist, or similar, should be undertaken 3 months post the strangulation, with the referral organized by the GP or direct referral dependent upon local arrangement.

5. GP letter

Following standard local consent to share information processes, include details of strangulation and requested GP actions such as any required referrals in a clear timely fashion, remembering that victims of strangulation are likely to require psychological support. Consider confidentiality/risk issues regarding access to information in patient records.

Glossary of terms

CT	Computerised tomography
DASH	The domestic abuse, stalking and honour based violence risk identification tool
GCS	Glasgow Coma Scale
GP	General Practice/General Practitioner
Hep B	Hepatitis B
HIV	Human Immunodeficiency Virus
IDVA	Independent Domestic Violence Advisor/Advocate
ISVA	Independent Sexual Violence Advisor/Advocate
MARAC	Multi Agency Risk Assessment Conference
NFS	Non-fatal strangulation
SARC	Sexual Assault Referral Centre
STI	Sexually Transmitted Infection
UK	United Kingdom