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The American College of Emergency Physicians (ACEP) recognizes that strangulation, the act of neck compression in any context, can cause serious injuries and significant morbidity and mortality, especially to victims of intimate partner and sexual violence, child and elder abuse, and interpersonal, non-malicious martial arts and policing tactics as well as intentional hanging and self-strangulation.

ACEP recommends that:

- Emergency physicians and emergency departments assess all victims of intimate partner and sexual violence, child and elder maltreatment and neglect for strangulation injuries.

- Emergency physicians and emergency departments maintain familiarity with the signs and symptoms of strangulation and have evidence-informed guidelines for the evaluation and management of patients who experience these signs and symptoms in this context.

- Emergency medical services, medical schools, and emergency medicine residency curricula should include education and training in the recognition, assessment, and interventions for strangulation injuries.

- Hospitals and emergency departments are encouraged to participate in collaborative interdisciplinary approaches for the assessment, safety planning, and interventions for patients assaulted by strangulation, especially those who are victims of intimate partner and sexual violence, child and elder abuse, and interpersonal violence. These approaches include the development of policies, protocols, and relationships with outside agencies that oversee the management and investigation of these types of violence.

- Emergency physicians and emergency departments are encouraged to better understand the partially hidden epidemiology of strangulation, as well as evidence-based approaches to accurate assessment, appropriate radiographic imaging, and effective intervention for victims.