

1 **OSAC 2025-N-0018**
2 **Standard for Educating**
3 **Healthcare Providers**
4 **Performing Medical Forensic**
5 **Examinations of Adult and**
6 **Adolescent Patients with Non-**
7 **fatal Strangulation,**
8 **Suffocation, and Other**
9 **Asphyxial Injuries**

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12 Forensic Nursing Subcommittee
13 Medicine Scientific Area Committee (SAC)
14 Organization of Scientific Area Committees (OSAC) for Forensic Science



OSAC Proposed Standard

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**Standard for Educating Healthcare
Providers Performing Medical Forensic
Examinations of Adult and Adolescent
Patients with Non-fatal Strangulation,
Suffocation, and Other Asphyxial
Injuries**

Prepared by
Forensic Nursing Subcommittee
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Disclaimer:

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47 **Foreword**

48 This document provides standards for the education of healthcare providers who conduct
49 medical forensic examinations on adult and adolescent patients following non-fatal
50 strangulation, suffocation, or other forms of asphyxia. Additional specialized education on the
51 evaluation and management of patients following strangulation, suffocation, or asphyxia is
52 required to ensure high-quality care following best practice recommendations. This standard
53 provides educational guidance but is not exhaustive.

54 This document should be used in conjunction with the educational requirements set forth by
55 relevant healthcare provider curricula, licensing, regulation, and accreditation.

56 All hyperlinks and web addresses shown in this document are current as of the publication
57 date of this standard.

58 This document has been drafted by the Forensic Nursing Subcommittee of the
59 Organization of Scientific Area Committees (OSAC) for Forensic Science through a
60 consensus process.

61
62 **Keywords:** choking, asphyxiation, strangulation, suffocation, mechanical/positional asphyxiation

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DRAFT

**Standard for Educating Healthcare Providers Performing Medical Forensic Examinations
of Adults and Adolescent Patients with Non-fatal Strangulation, Suffocation,
and other Asphyxial Injuries**

1 Scope

This document provides educational requirements for healthcare providers performing medical forensic examinations on patients who have reported or are suspected of experiencing strangulation, suffocation, or other forms of asphyxia.

2 Normative References

Standard Conduct for the Medical Forensic Exam

3 Terms and Definitions

3.1 asphyxiation

The state or process of being deprived of oxygen that can result in unconsciousness or death. The following are the four main types of asphyxiation:

3.1.1 Choking—internal obstruction of the upper airway that impedes airflow

3.1.2 Mechanical/Positional Asphyxiation—a form of asphyxia resulting from pressure applied to the chest or torso that impedes blood flow or oxygenation

3.1.3 Strangulation—a form of asphyxia caused by external pressure applied to the neck resulting in compression of the airway impedance of blood flow

3.1.4 Suffocation—a form of asphyxia that impedes airflow to the nose, mouth, or airway

3.2

trauma-informed care

The program or organization providing the medical forensic examination shall use a trauma-informed approach to care. Such an organization “realizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization.” (SAMHSA, 2014, p.9).

4 Requirements

The didactic content below shall be part of the baseline/initial education including, but not limited to, the following:

- 105 • Overview: Mechanical/Positional Asphyxia, Strangulation, Suffocation, and Choking
- 106 • Trauma-Informed Care
- 107 • Anatomy and Physiology
- 108 • Pathophysiology
- 109 • Medical History
- 110 • History of Chief Complaint
- 111 • Signs and Symptoms
- 112 • Physical Assessment
- 113 • Documentation
- 114 • Photography
- 115 • Collection of Specimens with Potential Evidentiary Value
- 116 • Medical Management (including radiographic evaluation)
- 117 • Patient Education
- 118 • Discharge Planning
- 119 • Follow-up Care and Services
- 120 • Health Sequelae (including asphyxiation-related brain injury)
- 121 • Testimony Training

122 **5 Recommended Continuing Education**

- 123 **5.1** Additional didactic training—webinars, conferences, seminars, coursework
- 124 **5.2** Clinical training
- 125 **5.3** Preceptorship

126 **6 Competency**

- 127 **6.1** Competency is determined at the local practice level and shall be documented.
- 128 **6.2** It is the responsibility of the employing entity to evaluate the clinical competence of the
- 129 Medical Forensic Examiner.

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Annex A
(informative)

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