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Suspected Hanging

Purpose: To provide a guideline in the evaluation and admission of patients presenting with the diagnosis of suspected hanging

Definitions: Hanging is defined as intentional or unintentional asphyxiation by ligature or other manner around the neck

Guidelines:

- A. Any patient presenting with the diagnosis of suspected hanging will initially be evaluated and treated by the ED physician as appropriate
 - a. Activation is not automatically required for intubated patients unless they have an identified injury
- B. Work up should include imaging as indicated by physical examination and history per ED physician discretion
- C. If a traumatic injury is identified, the a “trauma activation” will occur
 - a. Activation should occur as per activation criteria guidelines
- D. If no traumatic injury other than potential anoxic brain injury is identified, the patient will be admitted to the medicine/pediatric service line as appropriate

References:

- Subramanian, Madhu, Hranjec, Tjasa, Liu, Laindy, Hodgman, Erica, Minshall, Christian, Todd MD, PhD, et al. (2016). A case for less workup in near hanging. *Journal of Trauma and Acute Care Surgery*, 81, 925-930. <https://doi.org/10.1097/TA.0000000000001231>