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February 1, 2024

The Honorable Will Smith Chair, Senate Judiciary Committee Miller Senate Office Building

## RE: Support - SB398 - Criminal Injuries Compensation Board - Victims of Nonfatal Strangulation

Dear Chair Smith and Committee Members,

Nonfatal strangulation (NFS) is a serious mechanism of injury causing Marylanders to seek emergency medical care. NFS is compression of the neck that results in decreased or complete blockage of blood flow to/from the brain or airflow to/from the lungs that can result in traumatic brain injury, stroke, and death (Patch, et al., 2018). NFS occurs in abusive intimate partner relationships (domestic violence), sexual assault, and child abuse (Monahan, et al., 2022; Cannon, et al., 2020; Bird, et al., 1987). The State of Maryland reimburses hospitals for care provided during medical forensic examinations for individuals who have been sexually assaulted (or abused) within 15 days of the assault. People who have been strangled and not sexually assaulted face payment barriers to accessing expert forensic nursing care.

Forensic programs throughout the State of Maryland have nurses specially trained to conduct NFS examinations on patients, regardless of the co-occurrence of sexual assault. The Forensic Medical Unit at Adventist HealthCare Shady Grove Medical Center provides phone consultations to several patients per month who cite no ability to pay as the primary reason for not accessing medical care after an NFS event. Access to medical care is critical for people who have experienced NFS because the effects including cognitive difficulties, difficulty swallowing, frequent headaches, and memory loss can be debilitating and last for weeks, months, or years (Valera, et al., 2022; Smith, et al., 2001).

35% of people who have been strangled have no visible injury, sometimes because of darker skin tone (Strack, et al., 2001, Brady et al., 2023). Carotid artery dissection, soft tissue swelling resulting in airway obstruction, brain hemorrhage, thyroid complications, and stroke occur even without visible injury. Many forensic nurse examiners are trained in utilizing alternate light sources to photo document injuries that would otherwise be unobserved, especially in people with darker skin tones.

SB398 gives patients who have been strangled access to life-saving medical care, treatment, and documentation of injuries including photography by forensic nurse examiners without basing their decision to access care on their financial means to pay.

We recommend a favorable report on SB398 bill.

Respectfully,

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## References

Bird, C. R., McMahan, J. R., Gilles, F. H., Senac, M. O., & Apthorp, J. S. (1987). Strangulation in child abuse: CT diagnosis. *Radiology*, *163*(2), 373-375. https://doi.org/10.1148/radiology.163.2.3562816

Brady, P.Q., Zedaker, S.B., Mckay, K., Scott, D. (2023). The darker the skin, the greater the disparity? Why a reliance on visible injuries fosters health, legal, and racial disparities in domestic violence complaints involving strangulation. *Journal of Interpersonal Violence*. 38 (11-12): 7602-7629. Doi: 10.1177/08862605221145726

Cannon, L. M., Bailey, J. M., Ernst, S. D., St. Ivany, A., Bevilacqua, K. G., Scheiman, L., & Munro-Kramer, M. L. (2020). Examining trends in non-fatal strangulation among sexual assault survivors seeking Sexual Assault Nurse Examiner care from 2002 to 2017. *International Journal of Gynecology and Obstetrics*, 149(1), 106-107. https://doi.org/10.1002/ijgo.13058

Monahan, K., Bannon, S., & Dams-O'Connor, K. (2022). Nonfatal strangulation (NFS) and intimate partner violence: A brief overview. *Journal of Family Violence*, *37*(1), 75-86. https://doi.org/10.1007/s10896-020-00208-7

Patch, M., Anderson, J.C., Campbell, J.C. (2018). Injuries of women surviving intimate partner strangulation and subsequent emergency health care seeking: An integrative evidence review. *Journal of Emergency Nursing*. 44 (4): 384-393. Doi: 10.1016/j.jen.2017.12.001

Smith, D. J., Mills, T., & Taliaferro, E. H. (2001). Frequency and relationship of reported symptomology in victims of intimate partner violence: the effect of multiple strangulation attacks. *The Journal of Emergency Medicine*, *21*(3), 323-329. https://doi.org/10.1016/S0736-4679(01)00402-4

Strack, G. B., McClane, G. E., & Hawley, D. (2001). A review of 300 attempted strangulation cases part I: Criminal legal issues. *The Journal of Emergency Medicine*, *21*(3), 303-309. https://doi.org/https://doi.org/10.1016/S0736-4679(01)00399-7

Valera, E., Daugherty, J., Scott, O. & Berenbaum, H. (2022). Strangulation as an acquired brain injury in intimate–partner violence and its relationship to cognitive and psychological functioning: A preliminary study. *Journal of Head Trauma Rehabilitation*, *37* (1), 15-23. doi: 10.1097/HTR.00000000000755.

