Triage Tool

The Triage Questions below originated from research with abused women and interviews with Emergency Department staff at a major city hospital and emergency workers in community mental health. (Hoff & Rosenbaum, 1994)

TRIAGE QUESTIONS
1) Have you been troubled or injured by any kind of abuse or violence? (e.g., hit by partner, forced sex)
   __ Yes  __No  __Refused
   If yes: By someone in your family? By an acquaintance or stranger? Describe.

2) If yes: Has something like this ever happened before?
   __ Yes  __No
   If yes, when? Describe.

3) Do you have anyone you can turn to or rely on now to protect you from possible further injury?
   __ Yes  __No
   If yes, who?

4) Do you feel so badly now that you have thought of hurting yourself/suicide?
   __ Yes  __No
   If yes, what have you thought about doing?

5) Are you so angry about what’s happened that you have considered hurting someone else?
   __ Yes  __No
   If yes, have you ever threatened or hurt someone in the past?

These five basic questions will help ascertain the needs of an individual patient, but to be meaningful an interviewer needs to follow up beyond simple 'yes/no' responses. This can be an opportunity to talk someone down.

The intent of the triage questions is to reveal:

- A history of victimization, suicide attempts, and assault increases current risk. Past violence is a major indicator of potential violence.
- If a victimized person is isolated without available social support, suicide risk is increased.
- If a person with violent fantasies or plans of assault also considers suicide, the risk of assault and homicide increases.
- Level of support or conflict with significant other.

A triage tool is essential for patient safety as well as for nursing personnel. Spillover from domestic violence, for example, can lead to violence in the workplace.