

## RADAR

The acronym “RADAR” summarizes action steps physicians should take in recognizing and treating victims of partner violence.

**R**emember to ask routinely about partner violence in your own practice.

**A**sk directly about violence with such questions as, “At any time, has a partner hit, kicked, or otherwise hurt or frightened you?” Interview your patient in private at all times.

**D**ocument information about “suspected domestic violence” or “partner violence” in the patient’s office.

**A**ssess your patient’s safety. Is it safe for her to return home? Find out if any weapons are kept in the house, if the children are in danger, and if the violence is escalating.

**R**eview options with your patient. Know about the types of referral options (e.g., shelters, support groups, legal advocates).

Note. There is another version of the RADAR screening tool (called RADAR/SA) that also assesses for sexual assault with the following question: “Have you ever been sexually assaulted or involved in sexual acts against your will?”

Reprinted from *Annals of Internal Medicine*, 123, Alpert EJ. Violence in intimate relationships and the practicing internist: New “disease” or new agenda? 774-81 Copyright 1995, with permission from American College of Physicians.

Developer: RADAR was developed by the Massachusetts Medical Society. The sexual assault question was developed by Dr. Wanda Filer.

Publication year: 1992, 1996, 1999, 2004

Administration method: Physician administered.

Scoring procedures: This information is not available.

## Universal Violence Prevention Screening Protocol

### Introduction:

1. These days many people are exposed to violence in some form.
2. Violence is a health risk and can result in physical and emotional problems.
3. It is our routine procedure to ask adult patients about their exposure to violence.
4. If you are a violence victim, we can better help you if we know it.

	Last 12 months		If "yes" to 12 Months, Last 1 Month?	
	Yes	No	Yes	No
1. In the past 12 months...has anyone <b>threatened</b> you with or <b>actually used</b> a knife or gun to <b>scare or hurt</b> you?	Yes	No	Yes	No
2. ... <b>choked, kicked, bit, or punched</b> you?	Yes	No	Yes	No
3. ... <b>slapped, pushed, grabbed, or shoved</b> you?	Yes	No	Yes	No
4. ...forced or coerced you to have sex?	Yes	No	Yes	No
5. ...have you been <b>afraid</b> that a current or former intimate partner would hurt you physically?	Yes	No	Yes	No

6. What is your relationship with the person who has hurt you?

- Current or former intimate partner
- Other family member
- Acquaintance or friend
- Coworker
- Stranger
- Other (specify)

7. Have the **police** been notified within the **last month** about any of these experiences?  
 YES NO

Reprinted with permission from American Medical Women's Association.

Developer: Mary Ann Dutton, Barbara Mitchell, and Yolanda Haywood

Publication year: 1996

Administration method: Nurse administered.

Scoring procedures: This information is not available.

Follow-up Procedures: A positive score for any of the items signals the need for further risk assessment.

### Index Reference:

Dutton MA, Mitchell B, Haywood Y. (1996). The emergency department as a violence prevention center. *Journal of American Medical Women's Association*, 51, 92-6.

## Universal Violence Prevention Screening Protocol - Adapted

Have you been in a relationship with a partner in the past year? (Yes/No)

**If yes, within the past year has a partner:**

(a) Slapped, kicked, pushed, choked, or punched you? (Yes/No)

(b) Forced or coerced you to have sex? (Yes/No)

(c) Threatened you with a knife or gun to scare or hurt you? (Yes/No)

(d) Made you afraid that you could be physically hurt? (Yes/No)

(e) Repeatedly used words, yelled, or screamed in a way that frightened you, threatened you, put you down, or made you feel rejected? (Yes/No)

Reprinted from *Annals of Emergency Medicine*, 42, Heron SL, Thompson MP, Jackson E, Kaslow NJ, Do responses to an intimate partner violence screen predict scores on a comprehensive measure of intimate partner violence in low-income black women? 483-91, Copyright (2003), with permission from American College of Emergency Physicians.

Developer: Sheryl Heron, Martie P. Thompson, Emily Jackson, and Nadine Kaslow

Publication year: 2003

Administration method: Clinician administered or self report.

Scoring procedures: This information is not available.

Follow-up procedures: This information is not available.

Index Reference:

Heron SL, Thompson MP, Jackson E, Kaslow NJ. (2003). Do responses to an intimate partner violence screen predict scores on a comprehensive measure of intimate partner violence in low-income black women? *Annals of Emergency Medicine*, 42, 483-91.