

# Miami-Dade County Domestic Violence Fatality Review Team

## DATA COLLECTION INSTRUMENT

Review # \_\_\_\_\_

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### A. GENERAL CASE INFORMATION

#### DECEDENT

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Gender:  Male  Female
4. Age: \_\_\_\_\_ 5. Race: \_\_\_\_\_
6. DOB: \_\_\_\_\_ 7. DOD: \_\_\_\_\_
8. Religion: \_\_\_\_\_
9. Ethnicity: \_\_\_\_\_
10. Immigration status: \_\_\_\_\_
11. Marital status:  single  married  
 separated  divorced  widowed
12. Education level:  unknown  
 less than high school  some college  
 some high school  graduated college  
 graduated high school  other \_\_\_\_\_
13. Employed?  yes  no  unknown
14. Occupation: \_\_\_\_\_
15. Occupational category:  N/A  
 professional  technician  clerical  
 skilled worker  laborer  service worker
16. Has been in military?  yes  no  unknown
17. How discharged?  honorable  medical  
 dishonorable  unknown  N/A
18. Decedent had living children?  
 yes  no  unknown
19. If so, names, ages, and sex of children:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
20. Was the Perpetrator the natural parent of any of the children?:  yes  no  unknown  N/A  
If yes, place an asterisk (\*) next to each child
21. Diagnosis or treatment for mental health?  
 yes  no  unknown
22. Substance abuse (alcohol/drugs) history?  
 yes (type: \_\_\_\_\_)  no  unknown

#### PERPETRATOR

23. Name: \_\_\_\_\_
24. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
25. Gender:  Male  Female
26. Age: \_\_\_\_\_ 27. Race: \_\_\_\_\_
28. DOB: \_\_\_\_\_ 29. DOD: \_\_\_\_\_
30. Religion: \_\_\_\_\_
31. Ethnicity: \_\_\_\_\_
32. Immigration status: \_\_\_\_\_
33. Marital status:  single  married  
 separated  divorced  widowed
34. Education level:  unknown  
 less than high school  some college  
 some high school  graduated college  
 graduated high school  other \_\_\_\_\_
35. Employed?  yes  no  unknown
36. Occupation: \_\_\_\_\_
37. Occupational category:  N/A  
 professional  technician  clerical  
 skilled worker  laborer  service worker
38. Has been in military?  yes  no  unknown
39. How discharged?  honorable  medical  
 dishonorable  unknown  N/A
40. Disabled?  yes (nature of disability: \_\_\_\_\_)  
 no  unknown
41. Has been married other than to the Decedent?  
 yes  no  unknown  N/A
42. Had child(ren) in his/her custody?  
 yes  no  unknown
43. If so, names, ages, and sex of children:  N/A  
\_\_\_\_\_  
\_\_\_\_\_
44. Diagnosis or treatment for mental health?  
 yes  no  unknown
45. Substance abuse (alcohol/drugs) history?  
 yes (type: \_\_\_\_\_)  no  unknown

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88. HIV/AIDS?  yes  no  unknown
89. History of other illness?  yes  no  unknown
90. Toxicology investigation?  yes  no
91. Toxicology findings:  N/A  
 alcohol  drugs (type: \_\_\_\_\_)  
 both  none
92. Pregnant at time of death?  N/A  
 yes (week gestation: \_\_\_\_\_)  no  unknown
93. Rape kit performed/smears and swabs taken?  
 yes  no
94. Evidence of recent sexual activity?  
 yes  no  unknown
95. Evidence of recent sexual trauma?  
 yes  no  unknown
96. Type of weapon used (check all that apply):
- |   |  |
|---|--|
| <u>Firearm</u>                                  | <u>Non-firearm</u>                           |
| <input type="checkbox"/> semi-automatic handgun | <input type="checkbox"/> knife               |
| <input type="checkbox"/> automatic handgun      | <input type="checkbox"/> fists/hands or feet |
| <input type="checkbox"/> nonautomatic/revolver  | <input type="checkbox"/> poison              |
| <input type="checkbox"/> shotgun                | <input type="checkbox"/> fire                |
| <input type="checkbox"/> rifle                  | <input type="checkbox"/> belt/strangulation  |
| <input type="checkbox"/> unknown gun type       | <input type="checkbox"/> hanging/suffocation |
| <input type="checkbox"/> other _____            | <input type="checkbox"/> jumping             |
|   | <input type="checkbox"/> moving vehicle      |
|   | <input type="checkbox"/> electrocution       |
|   | <input type="checkbox"/> drowning            |
|   | <input type="checkbox"/> poison by gas       |
|   | <input type="checkbox"/> other _____         |
97. Body part affected:  head  trunk  
 extremities  neck

**C. LAW ENFORCEMENT**

98. Police Case # (for homicide): \_\_\_\_\_  
 Police Department: \_\_\_\_\_
99. Perpetrator/suspected Perpetrator identified?  
 yes  no
100. Number of Perpetrators: \_\_\_\_\_
101. Perpetrator arrested for homicide of Decedent?  
 yes (Case #: \_\_\_\_\_ date: \_\_\_\_\_)  
 no  investigation pending  N/A

102. Other victims/persons injured, excluding the Perpetrator?  
 yes (who: \_\_\_\_\_)  
 no  unknown
103. Who owned weapon?  
 Decedent  Perpetrator  unknown  
 other \_\_\_\_\_
104. If gun:  legal  illegal  unknown  N/A
105. Was Perpetrator known to carry or possess a weapon?  yes (what kind: \_\_\_\_\_)  
 no  unknown
106. Did child(ren) witness homicide?  
 yes how: \_\_\_\_\_  
 no  unknown
107. If Perpetrator committed suicide, did child(ren) witness it?  yes (how: \_\_\_\_\_)  
 no  unknown  N/A

**D. HISTORY OF DOMESTIC VIOLENCE BETWEEN DECEDENT AND PERPETRATOR**

***ALLEGATIONS BY DECEDENT***

108. Prior reports to the police (including 911 calls) by Decedent alleging domestic violence by the Perpetrator?  yes (how many: \_\_\_\_\_)  
 no  unknown
109. Other reports to family, friends, coworkers, or community by Decedent alleging domestic violence by Perpetrator?  
 yes (who: \_\_\_\_\_)  
 no  unknown
110. Did Decedent ever experience domestic violence-related injuries received from the Perpetrator?  yes  no  unknown
111. If yes, what type of injuries?  N/A  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
112. Was there any known history of the Perpetrator being abusive to animals?  
 yes  no  unknown
113. Were there any known allegations of stalking by the Perpetrator?  yes  no  unknown

114. Did the Decedent ever allege that the Perpetrator made death threats against the Decedent prior to the event?  
 yes  no  unknown
115. Were there any known death threats by the Perpetrator against any of his/her child(ren)?  
 yes  no  unknown  N/A
116. Were there any known prior suicide threats by the Perpetrator?  
 yes  no  unknown

**ALLEGATIONS BY PERPETRATOR**

117. Prior reports to the police (including 911 calls) by the Perpetrator alleging domestic violence by the Decedent?  yes (how many: \_\_\_\_\_)  no  unknown
118. Other reports to family, friends, coworkers, or community by Perpetrator alleging domestic violence by Decedent?  
 yes (who: \_\_\_\_\_)  no  unknown
119. Did Perpetrator ever experience domestic violence-related injuries received from the Decedent?  yes  no  unknown
120. If yes, what type of injuries?  N/A

**E. COURT HISTORY**

**CRIMINAL CASES (STATE ATTORNEY=S OFFICE)**

**PERPETRATOR'S CRIMINAL RECORD**

121. At time of the event, prior domestic violence-related criminal history of Perpetrator:  
 [Place an asterisk (\*) next to all cases where victim is same person as Decedent]
- | Case No. | Charge | Outcome |
|----------|--------|---------|
|          |        |         |
|          |        |         |
|          |        |         |
|          |        |         |
- no criminal history on record

122. Were any Stay Away Orders entered in any of the above-listed domestic violence-related cases?  yes (list Case #s below)  no  N/A

123. At time of the event, prior criminal history of Perpetrator for non-domestic violence-related crimes:
- | Case No. | Charge | Outcome |
|----------|--------|---------|
|          |        |         |
|          |        |         |
|          |        |         |
|          |        |         |
|          |        |         |
- no criminal history on record

124. If Perpetrator was arrested for homicide of Decedent, outcome of court case:  N/A

**DECEDENT'S CRIMINAL RECORD**

125. At time of the event, prior domestic violence-related criminal history of Decedent:  
 [Place an asterisk (\*) next to all cases where victim is same person as Perpetrator]
- | Case No. | Charge | Outcome |
|----------|--------|---------|
|          |        |         |
|          |        |         |
- no criminal history on record

126. Were any Stay Away Orders entered in any of the above-listed domestic violence-related cases?  yes (list Case #s below)  no  N/A

127. At time of the event, prior criminal history of Decedent for non-domestic violence-related crimes:
- | Case No. | Charge | Outcome |
|----------|--------|---------|
|          |        |         |
|          |        |         |
- no criminal history on record

**PROBATION DEPARTMENT**

128. Status of any cases on record:

**INJUNCTION ACTIONS**

***INITIATED BY DECEDENT***

- 129. Did Decedent ever file for an injunction against the Perpetrator?  
 yes (Case # \_\_\_\_\_)  no
- 130. If yes, was a Temporary Injunction granted?  
 yes (issue date: \_\_\_\_\_ /  
expiration date: \_\_\_\_\_)  
 no  N/A
- 131. If yes, was a Permanent Injunction granted?  
 yes (issue date: \_\_\_\_\_ /  
expiration date: \_\_\_\_\_)  
 no  N/A
- 132. Were there any allegations that the injunction was violated?  yes  no  N/A
- 133. If there were allegations of an injunction violation, was there an arrest?  N/A  
 yes (see Criminal History section)  no
- 134. Did the Decedent allege the Perpetrator possessed weapons?  yes  no  N/A
- 135. Was the Perpetrator ordered to surrender any weapons?  yes  no  N/A
- 136. Final outcome of injunction case:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 137. Did anyone other than the Decedent ever file for an injunction against the Perpetrator?  
 yes (Case # \_\_\_\_\_)  no
- 138. If yes, relationship to Perpetrator:  N/A  
\_\_\_\_\_
- 139. If yes, final outcome of injunction case:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 140. Did Decedent ever file for an injunction against someone other than the Perpetrator?  
 yes (Case # \_\_\_\_\_)  no
- 141. If yes, relationship to Respondent:  N/A  
\_\_\_\_\_
- 142. If yes, final outcome of injunction case:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***INITIATED BY PERPETRATOR***

- 143. Did Perpetrator ever file for an injunction against the Decedent?  
 yes (Case # \_\_\_\_\_)  no
- 144. If yes, was a Temporary Injunction granted?  
 yes (issue date: \_\_\_\_\_ /  
expiration date: \_\_\_\_\_)  
 no  N/A
- 145. If yes, was a Permanent Injunction granted?  
 yes (issue date: \_\_\_\_\_ /  
expiration date: \_\_\_\_\_)  
 no  N/A
- 146. Were there any allegations that the injunction was violated?  yes  no  N/A
- 147. If there were allegations of an injunction violation, was there an arrest?  N/A  
 yes (see Criminal History section)  no
- 148. Did the Perpetrator allege the Decedent possessed weapons?  yes  no  N/A
- 149. Was the Decedent ordered to surrender any weapons?  yes  no  N/A
- 150. Final outcome of injunction case:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 151. Did anyone other than the Perpetrator ever file for an injunction against the Decedent?  
 yes (Case # \_\_\_\_\_)  no
- 152. If yes, relationship to Decedent:  N/A  
\_\_\_\_\_
- 153. If yes, final outcome of injunction case  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 154. Did Perpetrator ever file for an injunction against someone other than the Decedent?  
 yes (Case # \_\_\_\_\_)  no
- 155. If yes, relationship to Respondent:  N/A  
\_\_\_\_\_
- 156. Final outcome of injunction case:  N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISSOLUTION OF MARRIAGE ACTIONS**

- 157. Was a dissolution of marriage action involving the Decedent and Perpetrator ever filed?



164. Were there any juvenile records involving any of the minor child(ren) involved?  
 yes (list case info below)  no  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BATTERERS' INTERVENTION PROGRAMS**

***BY DECEDENT***

165. Had the Decedent been ordered to attend a batterers' intervention program as the result of any court case?  yes  no  N/A

166. If yes, case number and type of case:  N/A

\_\_\_\_\_  
\_\_\_\_\_

167. If yes, to what agency was the Decedent referred?  N/A

168. If yes, how many times did the Decedent attend/miss the group sessions?  N/A  
attended \_\_\_\_\_ missed \_\_\_\_\_ sessions

169. Did the Decedent successfully complete the program?  N/A  
 yes  no (was revoked/terminated)  
 still enrolled at time of event

170. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

***BY PERPETRATOR***

171. Had the Perpetrator been ordered to attend a batterers' intervention program as the result of any court case?  yes  no  N/A

172. If yes, case number and type of case:  N/A

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
174. If yes, how many times did the Perpetrator attend/miss the group sessions?  N/A  
attended \_\_\_\_\_ missed \_\_\_\_\_ sessions

175. Did the Perpetrator successfully complete the program?  N/A  
 yes  no (was revoked/terminated)  
 still enrolled at time of event

176. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

**VICTIM SUPPORT SERVICE PROVIDERS**

***BY DECEDENT***

177. Was there any record of the Decedent attending/utilizing any victim support services?  
 yes  no  unknown

178. If yes, which one(s)?  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

179. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

173. If yes, to what agency was the Perpetrator referred?  N/A

***BY PERPETRATOR***

180. Was there any record of the Perpetrator attending/utilizing any victim support services?

yes  no  unknown  N/A

181. If yes, which one(s)?  N/A

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182. Comments from records:  N/A

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- no records obtained
- records reveal no further significant comments

**CHILDREN'S SERVICE PROVIDERS**

183. Was there any record of the child(ren) attending/utilizing any children's services?  
 yes  no  unknown

184. If yes, which one(s)?  N/A

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185. Comments from records:  N/A

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- no records obtained
- records reveal no further significant comments

attending/utilizing any psychological services?  
 yes  no  unknown

187. If yes, which one(s)?  N/A

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188. If yes, was there ever a diagnosis made?  
 yes (what: \_\_\_\_\_)  no  
 unknown  N/A

189. If yes, was medication(s) prescribed?  
 yes (what kind(s): \_\_\_\_\_)  no  
 unknown  N/A

190. If yes, was Decedent known to comply with taking medication(s)?  
 yes  no  unknown  N/A

191. Comments from records:  N/A

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- no records obtained
- records reveal no further significant comments

***BY PERPETRATOR***

192. Was there any record of the Perpetrator attending/utilizing any psychological services?  
 yes  no  unknown

193. If yes, which one(s)?  N/A

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**PSYCHOLOGICAL SERVICE PROVIDERS**

***BY DECEDENT***

186. Was there any record of the Decedent

194. If yes, was there ever a diagnosis made?  
 yes (what: \_\_\_\_\_)  no  
 unknown  N/A

195. If yes, was medication(s) prescribed?  
 yes (what kind(s): \_\_\_\_\_)  no

unknown  N/A

196. If yes, was Decedent known to comply with taking medication(s)?  
 yes  no  unknown  N/A

197. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

**SUBSTANCE ABUSE SERVICE PROVIDERS**

***BY DECEDENT***

198. Was there any record of the Decedent attending/utilizing any substance abuse services?  yes  no  unknown

199. If yes, which one(s)?  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

200. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

***BY PERPETRATOR***

201. Was there any record of the Perpetrator attending/utilizing any substance abuse services?  yes  no  unknown

209. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_

202. If yes, which one(s)?  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

203. Comments from records  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

**DOMESTIC VIOLENCE SHELTER**

***BY DECEDENT***

204. Was there any record of the Decedent at Domestic Violence Shelter?  yes  no

205. If yes, during what time frame?  N/A

\_\_\_\_\_  
\_\_\_\_\_

206. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

***BY PERPETRATOR***

207. Was there any record of the Perpetrator at Domestic Violence Shelter?  
 yes  no  N/A

208. If yes, during what time frame?  N/A

\_\_\_\_\_

- no records obtained  
 records reveal no further significant comments

**SCHOOL SYSTEM RESPONSE**

210. Had the Perpetrator harassed, threatened, or battered the Decedent at school or on the way to school?  yes  no  unknown  N/A
211. Were school officials notified of the existence of domestic violence?  
 yes  no  unknown  N/A
212. Comments from records:  N/A

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- no records obtained  
 records reveal no further significant comments

**HEALTH CARE/MEDICAL FACILITIES**

213. Did Decedent ever seek medical attention for any domestic violence-related injuries received by the Perpetrator?  yes  no  unknown
214. If yes, what type of injuries and when?  N/A
215. If yes, what medical facility did the Decedent go to for medical attention?:  N/A

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216. Comments from records:  N/A

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**G. WORKPLACE INVOLVEMENT**

- no records obtained  
 records reveal no further significant comments

**OTHER SOCIAL SERVICE AGENCIES**

217. Is there any record of the Decedent or Perpetrator accessing any other social service agencies?  
Decedent:  yes  no  unknown  
Perpetrator:  yes  no  unknown
218. Comments from records:  N/A

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- no records obtained  
 records reveal no further significant comments

**CHURCHES/SYNAGOGUES (CLERGY)**

219. Is there any record of the Decedent or Perpetrator involving their church/synagogue (clergy) with any incidence of domestic violence?  N/A  
Decedent:  yes  no  unknown  
Perpetrator:  yes  no  unknown
220. If yes, name and location of religious institution:
- unknown  N/A
221. If yes, is there any record of a response by the clergy?  N/A

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222. Had the Perpetrator harassed, threatened, or battered the Decedent at or on the way to the workplace?  yes  no  unknown  N/A

223. Were supervisors aware of the existence of domestic violence?

yes  no  unknown  N/A

224. Name and address of workplace:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

225. Comments from records:  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

no records obtained  
 records reveal no further significant comments

**I. INVOLVEMENT OF FAMILY/FRIENDS**

226. Were family or friends aware of any prior incidents or threats of domestic violence between the Decedent and Perpetrator?  
 yes  no  unknown

227. If yes, who (explain relationship)?  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

228. If yes, what was their involvement?  N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

229. Were family members or friends interviewed as part of this review?  yes  no  
 contact attempted via letter  
 participation refused upon contact

243. Was there any known history of the aggressor being abusive to animals?  N/A  
 yes  no  unknown

**J. HISTORY OF SIGNIFICANT FAMILY MEMBERS/FRIENDS**

**OF DECEDENT**

N/A if this section is not applicable

230. Name: \_\_\_\_\_

231. Relationship: \_\_\_\_\_

232. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

233. Gender:  Male  Female

234. Age: \_\_\_\_\_ 235. Race: \_\_\_\_\_

236. DOB: \_\_\_\_\_

237. Were there any prior reports to the police (including 911 calls) involving the Decedent and this family member or friend alleging domestic violence?

yes (how many: \_\_\_\_\_)  
 no  unknown

238. If yes, who was the aggressor?:  N/A  
 Decedent  the family member or friend  
 both

239. Were there other reports to family, friends, coworkers, or community involving the Decedent and this family member or friend alleging domestic violence?

yes (who: \_\_\_\_\_)  
 no  unknown

240. If yes, who was the aggressor?:  N/A  
 Decedent  the family member or friend  
 both

241. Were any domestic violence-related injuries ever inflicted ?

yes (what type: \_\_\_\_\_)  
 no  unknown

242. If yes, who was the aggressor?:  N/A  
 Decedent  the family member or friend  
 both

244. Were there any known allegations of stalking by the aggressor?  N/A  
 yes  no  unknown



no criminal history on record

265. Were any Stay Away Orders entered in any of the above-listed domestic violence-related cases?  yes (list Case #s below)  no  N/A

266. If the person is a former spouse, provide case number of dissolution of marriage action and status of case at time of event:

N/A

267. Other relevant information:

- history of psychiatric problems
- poor compliance with taking medication
- depression
- economic loss
- loss of family support

**Ownership/Centrality of Victim to Perpetrator**

- obsessiveness about partner or family
- extreme jealousy
- access to victim and/or family members
- rage and/or depression over separation
- perceived betrayal

**Antisocial Behavior**

- history of domestic violence
- history of assaults on others
- history of criminal activity
- history of stalking
- history of substance abuse

**Failure of Community Control**

- violation(s) of restraining order
- violation(s) of probation
- arrest(s) for domestic violence
- failure to complete BIP
- failure to complete substance abuse treatment

**Severity of violence**

- used a weapon
- death threat
- unwanted sexual contact
- strangulation
- hurt pet
- severe injury
- sadistic/terrorist acts

**Other factors**

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**K. LETHALITY INDICATORS**

**Decompensation**

- suicidal
- homicidal
- loss of function (not eating, sleeping, working)

**L. CASE SPECIFIC FINDINGS:**

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