



WESTCHESTER REGIONAL EMERGENCY MEDICAL ADVISORY COMMITTEE

POLICY STATEMENT

Supersedes/Updates: New

No. 01-01

Date: 17 December 2001

Re: EMS Guide for Field
Pronouncement of Death

Pages: 2

EMS Guide for Field Pronouncement of Death

DEFINITIONS

Pronouncement of Death is the process of recognition and documentation of the physical signs of death. It is the basis of the decision not to engage in resuscitation efforts.

Certification of Death is the legal documentation required at the end of a life. A concise and complete statement of the terminal event and its causes, it is witnessed by the signature of a physician as per NYS Public Health Law.

ASSESSMENT

Patients may be pronounced dead and unable to be resuscitated when pre-hospital providers have found, in addition to apnea and pulselessness, that one or more of following conditions exists:

- Tissue decomposition
- Rigor mortis
- Extreme dependent lividity
- Obvious mortal injury (decapitation, exsanguination, etc.)
- A Valid Do Not Resuscitate (DNR) order

In addition to these conditions, pre-hospital providers should also attempt to determine:

- Confirmation with an AED that "No Shock Advised" or presence of asystole in more than one ECG lead
- Any significant medical history or traumatic event
- Time lapse since patient was last seen alive

As with any patient, EMS can contact Medical Control for consultation if there are questions regarding the patient's presentation and the decision not to attempt resuscitation.

DOCUMENTATION

As per NYS DOH policy, a PCR for the call must be generated. The disposition code 010 (Other) should be used with the description "obvious death" entered in the disposition box. A PCR for a pre-hospital pronouncement of death should include:

- A description of the body's physical location and presentation
- Any significant medical history or traumatic events
- Existing physical conditions which precluded performance of resuscitation efforts
- Any EMS contact with Medical Control
- In whose custody the body was left

Since the body will not be transported to a hospital, a copy of the PCR could be left with the law enforcement or medical examiner representative on scene as part of the official record.

REPORTING AND REMOVAL

As per the "Guide to Reporting Deaths to the Medical Examiner"¹, all unlawful, violent, unattended, sudden or suspicious deaths, either known or suspected, must be immediately reported to the ME's office. If a death appears to meet these criteria, EMS should contact local police, if not already on scene, and take care not to move the body or disturb the area unnecessarily. The police will notify the ME's office and preserve any evidence.

For all other deaths, the Medical Examiner still must be notified. The deceased's attending physician will be contacted by police or the Medical Examiner's Office regarding the completion of the Death Certificate. Based on all the information provided, the Medical Examiner's Office will decide to authorize removal or not. If the Medical Examiner's Office does not authorize the removal, they will assume control of the body from the police.

It is possible that in some special situations the police may order EMS to transport a body to the closest hospital if, in their judgment, expedient removal of the corpse is necessary.

Issued and Authorized by:



Dr. Nicholas DeRobertis, MD, FACEP
Chair, Westchester Regional Emergency Medical Advisory Committee

¹ Attachment - Guide to Reporting Deaths to the Medical Examiner, Westchester County, Millard J. Hyland, MD, ME. 1/29/99