

Death - Extinction of Life and the Certification - Assessment

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Summary Guide to public health organisations for the formulation of policies on the assessment of the extinction of life and the certification of death where patients die in health facilities or where deceased persons are brought to hospitals.

Author Branch Legal and Legislative Services

Branch contact 9391 9616

Applies to Area Health Services/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations, Affiliated Health Organisations, Community Health Centres, NSW Ambulance Service, Private Hospitals and Day Procedure Centres, Private Nursing Homes, Public Hospitals

Distributed to Public Health System, Community Health Centres, Health Associations Unions, NSW Ambulance Service, Public Hospitals, Private Hospitals and Day Procedure Centres, Private Nursing Homes, Tertiary Education Institutes

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Compliance with this policy directive is mandatory.

CIRCULAR

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ASSESSMENT OF THE EXTINCTION OF LIFE AND THE CERTIFICATION OF DEATH

This Circular supersedes Circular 95/57.

This Circular does not apply to the Corrections Health Service.

This Circular is a guide to public health organisations for the formulation of policies on the assessment of the extinction of life, and the certification of death where patients die in health facilities such as hospitals and nursing homes or where deceased persons are brought to hospitals. It is the responsibility of each organisation to develop policies suitable to their situations and facilities that conforms with the legislation and Departmental policy.

ASSESSMENT OF THE EXTINCTION OF LIFE AND CERTIFICATION OF DEATH:

This circular makes a distinction between the procedures for **assessment of the extinction of life**, and **certification of death**.

Assessment of the extinction of life: is a clinical assessment process undertaken to establish that life is extinct. By evaluating cardiac output, neurological signs and respiratory status, using a standard regime of clinical assessment tools, a registered medical practitioner or registered nurse can generally establish that life is extinct.

Certification of death: is a process by which the issuer of the certificate (a medical practitioner) certifies the fact and circumstances of death, pursuant to legislative requirements in the Births Deaths and Marriages Registration Act 1995.

DEVELOPMENT OF HEALTH SERVICE AND FACILITY POLICY

1. It is recommended that policies make a distinction between the **assessment of the extinction of life**, and the **certification of death** and deal with them as two procedures.

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A B C 80 D E
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73 Miller Street North Sydney NSW 2060
Locked Mail Bag 961 North Sydney NSW 2059
Telephone (02) 9391 9000 Facsimile (02) 9391 9101

2. Nothing in this Circular should be taken to detract from the legislative requirement in the Births, Deaths and Marriages Registration Act that a medical practitioner who was responsible for a person's medical care immediately before death, or who examines a body after death, must either sign a death certificate, or a notice of intention to sign a death certificate unless the death is a Coroner's case - see paragraphs 5 and 6). This Circular merely recognises that steps regarding the assessment of the extinction of life and management of the body may have to be taken in the period prior to the attendance of the medical practitioner.
3. In hospitals and health facilities where there is a medical practitioner available on site, policies should require that the medical practitioner has the responsibility for assessment of, or at least confirmation of, the extinction of life (this is usually done at the same time as certifying death).
4. Policies should address the situation where a medical practitioner is not available on site. In these circumstances, unless the need to attend is urgent, or the cause of death is unclear, or there is uncertainty as to whether life is extinct, or medical tests need to be undertaken to pronounce life extinct (eg, brain death) or the registered nurse otherwise considers it necessary for a medical practitioner to attend, a registered nurse may perform the normal nursing role of assessing the extinction of life and managing the body appropriately prior to a medical practitioner certifying death. In some circumstances (eg in hot weather, or where a medical practitioner's attendance involves a long delay) appropriate management of the body may involve: removal of the body to the morgue or holding room; and sometimes, refrigeration of the body. Preservation of the body is important at this time until decisions are made regarding the contacting of relatives, post mortem examination and funeral arrangements. A registered nurse assessing the extinction of life shall make a full report of the assessment (including the time of assessment) in the deceased person's health care record.
5. Policies must clearly outline the responsibilities of both medical and nursing staff under the Coroners Act 1980. The responsibilities of medical staff and the management of the body in these cases are very specific. Medical and nursing staff need to be informed of their responsibilities in this area (see Circular and Patient Matters Manual at 19.8).
6. Where the death is a Coroner's case, and there is no medical practitioner available on site to attend the deceased, local health service policy may allow a nurse to assess the extinction of life and give preliminary notification to the police. The considerations in paragraph 4 above as to whether a registered nurse should undertake the assessment also apply in this situation.

In Coroner's cases, it is usual that a medical practitioner formally pronounce life extinct for the purposes of the inquiry or inquest, confirm that the death is a Coroner's case and ensure that the police have been notified as required by the Births, Deaths and Marriages Registration Act.

7. Policies should address the question of tissue donation and the procedures outlined in the Human Tissue Act in this regard (see Circulars 84/111, 84/207, 89/100, 87/132, 92/17). Certification of brain death for the purposes of organ donation can only be made by two medical practitioners in accordance with the Human Tissue Act 1983.
8. Appropriate education in the necessary clinical assessment skills and the requirements of the legislation in this area should be made available to all relevant clinical staff.

The attached flow charts are designed to assist public health organisations to draft appropriate policies that take into account the local conditions, locations and relationships with medical officers.

ASSESSMENT OF EXTINCTION OF LIFE IN THE HOME

This Circular does not prevent the development of policies by remote health services to allow assessment of the extinction of life in home settings by registered nurses where this is rendered necessary by the scarcity of medical practitioners in the area. Such policies should take into account the guidelines in this Circular insofar as they are applicable to the home setting, and in particular, paragraphs 1, 2, 5, 6 and 8. Policies must give clear guidance to nurses as to the circumstances in which it is not appropriate to assess life extinct in the home setting.

NEW POLICY

This Circular supersedes Circular 95/57 and previous policy in this area. A draft circular (89/130) was issued stating that a registered or provisionally registered medical practitioner should "certify" death in the patient's clinical record. This Circular supersedes that previous policy in that it allows a nurse, in the circumstances outlined above, to make a note of the assessment of the extinction of life in the patient's health care record. That note may, of course, be confirmed by a medical practitioner upon their attendance.

Michael Reid
Director-General

**TABLE 1 ASSESSMENT OF THE EXTINCTION OF LIFE AND CERTIFICATION OF DEATH
IN HEALTH FACILITIES, NURSING HOMES, HOSTELS OR
IN THE HOME SETTING - WHERE A MEDICAL OFFICER IS AVAILABLE**

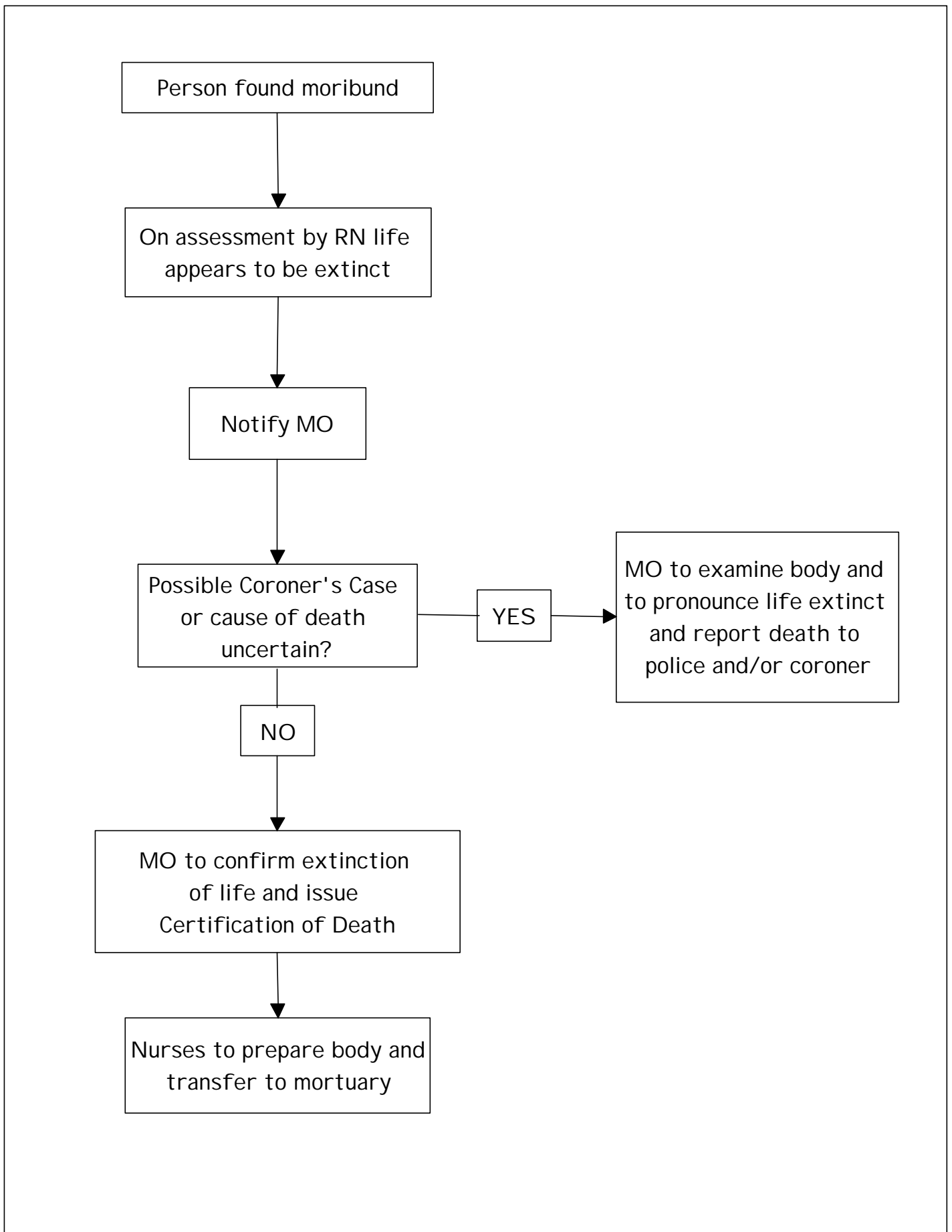


TABLE 2 ASSESSMENT OF THE EXTINCTION OF LIFE AND CERTIFICATION OF DEATH IN HEALTH FACILITIES, NURSING HOMES, HOSTELS OR IN THE HOME SETTING - WHERE A MEDICAL OFFICER IS NOT AVAILABLE

