

Affix Hospital Identification Here DEATH IN HOSPITAL	SURNAME		UMRN
	GIVEN NAMES	DOB	GENDER
	ADDRESS		
	SUBURB		POSTCODE

SECTION 4: NOTIFICATION OF REPORTABLE DEATHS UNDER THE *CORONERS ACT 1996*

On notification you will be asked for information on the circumstances surrounding the death, which should be conveyed to the coronial delegate (e.g. the PCIU/police officer to whom the death is reported). You should also consider the answer to the question “**Was death an inevitable consequence of the deceased person’s primary illness or condition regardless of appropriate resuscitation, anaesthesia, or surgery?**” In cases when the answer is ‘yes’ a post mortem may not be necessary.

PCIU/police officer notified by phone: Date: ____ / ____ / ____ dd/mm/yy Time: ____ : ____ 00:00 hours

Name of PCIU/police officer: (please print) _____

Name of Doctor reporting: (please print) _____

Consultant notified: Yes ☐ No ☐ Contact Number: _____ Sign: _____

If the death is reportable a copy of this Form should also be placed in the deceased person’s Hospital Medical Record as well as the Hospital’s Coronial Investigation File.

Where the death is NOT reportable:

– the original copy of this Form must be filed in the deceased person’s Hospital Medical Record

– you may complete the following Forms:

- | | | |
|---|------------|--|
| 1. Medical Certificate Cause of Death (BDM 202/201) and | Completed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Certificate of Medical Attendant (Form 7 WA Cremation Act) | Completed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

SECTION 5: OTHER REPORTING OBLIGATIONS

5.1 REPORTABLE DEATHS UNDER THE *HEALTH ACT 1911*

Is the death:

- a maternal death (arising from pregnancy or childbirth or associated with complications) _____ ☐ Yes ☐ No
- one involving a child who is stillborn (> than 20 weeks gestation), or under the age of 1 year _____ ☐ Yes ☐ No
- one that occurred within 48 hours of administration of anaesthetic or as a result of complications arising from the same _____ ☐ Yes ☐ No

If you have answered YES to any of the above questions, the death is reportable to the Executive Director Public Health. Information on reporting processes is found on the WA Department of Health Public Health Statutory notifications and authorisations website (http://www.public.health.wa.gov.au/3/287/2/statutory_notifications_and_authorisations.pm).

5.2 DEATHS REPORTABLE TO THE CHIEF PSYCHIATRIST

The Chief Psychiatrist is to be informed of an unexpected death of any patient / resident in a mental health service / facility.

Is this a reportable death to the Chief Psychiatrist? _____ ☐ Yes ☐ No

For further information refer to the Office of the Chief Psychiatrist website: (<http://www.chiefpsychiatrist.health.wa.gov.au/reporting/incidents.cfm>).

5.3 SEVERITY ASSESSMENT CODE (SAC) 1 CLINICAL INCIDENTS

The death may reflect the occurrence of a SAC 1 clinical incident. SAC 1 clinical incidents include all clinical incidents/ near misses where serious harm or death is or could be specifically caused by healthcare rather than the patients underlying condition or illness. In WA SAC 1 clinical incidents include the eight nationally endorsed sentinel event categories. For further information refer to the Clinical Incident Management (CIM) Policy (<http://www.safetyandquality.health.wa.gov.au/home/index.cfm>).

SECTION 6: ADDITIONAL HOSPITAL REQUIREMENTS (as determined by local Policies /Guidelines)

Donor Coordinator Notified	<input type="checkbox"/> Yes <input type="checkbox"/> No	Discharge summary completed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Permission for postmortem	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bereavement support	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nursing home notified	<input type="checkbox"/> Yes <input type="checkbox"/> No	General Practitioner notified	<input type="checkbox"/> Yes <input type="checkbox"/> No
Next of kin notified as designated in the Hospital Medical Record <input type="checkbox"/> Yes <input type="checkbox"/> No			