



Managing Death in the ED

The BIG items to resolve are:

- Do we need to call the Medical Examiner (ME)?
- If it is an ME case what to do?
- If it's not an ME case and the NOK wants an autopsy, what to do?
- If it's NOT ME case, and the family doesn't want an autopsy, complete a Death Certificate

Medical Examiner Cases (e.g., "Is this an ME case?")

- In general, the ME wants cases when:
 - there is suspicion of foul play
 - the deceased is a young, otherwise healthy person - if the family wants an autopsy in these cases, call the ME anyway and let them know that the NOK would agree to an autopsy at MSH. The ME can then decide if they want the case or if they are OK leaving the autopsy at MSH.
 - patients have recently had a non-emergent procedure (e.g. outpatient endoscopy)
 - traumatic deaths
 - vulnerable populations (NYPD custody patients, prisoners, etc.)
- For elderly pts with comorbidities and out of hospital arrest you do not have to call the ME
- If you are unsure, err on the side of discussing with the ME

If it is an ME case, what needs to be done?

- If the ME accepts the case you must complete the ME Clinical Summary Worksheet:
<https://drive.google.com/open?id=0B2VOFZUecZ0UOFctZU4zWmxHcUE>
- This is also available in Epic under Documents. Please note that when you go to print it click the print icon on the pdf page, in the grey box for printing that pops up **you must UNCHECK the box marked** "Choose paper source by PDF page size." If you do not, it defaults to 8.5 x 14 inches which we don't have and the formatting will be messed up.
- When the ME Clinical Summary Worksheet is complete to the best of your ability, sign it and print 2 copies. Give one to the specimen BA to scan, and give the other one to the Assistant Nurse Manager in the ED, or to the ADN covering the ED (call operator.)

If it is NOT an ME case, ask the family about autopsy. If they want one, get the consent signed.

- Within the first 48 hours after death the consent must be signed in person. It cannot be done over the phone. We do not want to make the grieving family return just to sign the consent.
- The form is in Epic under documents

Documentation

1. **Write a death note.** The note type is Event or Progress Note. Type "death" into the smart text box and choose "MS IP MD Standardized Death Note" and fill out to the best of your ability.
2. **Write discharge orders.** Go to the Orders screen. Enter "deceased" and select the order set "Discharge Deceased ED Patients". Fill out the appropriate information and sign.
3. **Fill out the post mortem navigator.** On the upper right of your EPIC screen, you will click on the down arrow, and then find the post mortem navigator. It may be under "rarely used". Fill out all the MD sections (next of kin, time of death, etc).

Death Certificate **ideally complete steps 1&2 prior to your shifts*

1. Register with eVital.
2. Perform your facial enrollment.
3. Follow the instructions in this manual. If you get confused or stuck, call admitting and ask them for help. [Residents: since you don't have license numbers, use the Mount Sinai one, 243509.]

Important: Be sure your causes of death are acceptable!

From the CDC handbook on this topic: "The cause-of-death section is designed to elicit the **opinion** of the medical certifier. Causes of death on the death certificate represent a medical opinion that might vary among individual physicians.

"The immediate cause does not mean the mechanism of death or terminal event (for example, cardiac arrest or respiratory arrest). The mechanism of death (for example, cardiac or respiratory arrest) should not be reported as the immediate cause of death as it is a statement not specifically related to the disease process, and it merely attests to the fact of death."

https://www.cdc.gov/nchs/data/misc/hb_cod.pdf

In plain language, putting "Cardiac Arrest" as the immediate cause of death doesn't work because it's like saying, "This man died because his heart stopped." That's rather obvious. But why did his heart stop? If he was elderly and had any risks for cardiac disease his heart probably stopped due to an acute MI or an arrhythmia which was probably from an MI anyway so go ahead and write down "acute myocardial infarction" as the immediate cause of death. This cannot stand alone and will need an further explanation as to what caused the MI which could be "atherosclerotic heart disease."

If an organ system failure such as congestive heart failure, hepatic failure, renal failure, or respiratory failure is listed as a cause of death, always report its etiology on the line(s) beneath it (for example, renal failure due to Type I diabetes mellitus).