**NHS**
Lothian

# Documentation and procedures following a death in critical care

Before the patient leaves the unit:

- Death verification must be completed (use TRAK short code \icudeathver).

- Patients who are organ donors on the donation after circulatory death pathway will need the confirmation of death paperwork completed in addition to this as per DCD guidance.

- If death has been confirmed using neurological criteria then further verification of death is not required.

- Notification form "care of deceased patients" must be completed.

- The next of kin must be aware that death has occurred.

Within 24 hours:

- The referring team should be informed of the death.

- A decision should be made by the responsible consultant whether the patient requires referral to the Procurator Fiscal (PF) service as per the following guidance:
- http://www.copfs.gov.uk/images/Documents/Deaths/Reporting%20Deaths%20to%20the%20Procurator%20Fiscal%202015.pdf

- If the patient does not require referral to the procurator fiscal service then a medical certificate of the cause of death should be issued (MCCD). Consideration should be given in conjunction with the patient's known wishes, their relatives and referring specialty as to whether a hospital post mortem should be requested. Guidance on issuing a MCCD can be found here:
- https://www.sehd.scot.nhs.uk/cmo/CMO(2018)11.pdf

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| | **Authors:**  N Young and G McNeill |
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The death certificate must:

- Be discussed with the responsible consultant.

- Be checked by another member of medical team (ideally a consultant).

- Contain diagnosis codable using ICD 10.

- Have time of death recorded as time observed by nursing staff/relatives, NOT time of verification.

- Have the contents discussed with the patients relatives.

- Have time intervals filled in (not x's or √'s).

- Have the counterfoil completed.

Following completion of a death certificate/conclusion of PF discussions:

- A TRAK \deathcert note should be made in the correspondence section of TRAK and authorised – if the patient is within NHS Lothian this will inform the GP.

- If the patient is from out-with NHS Lothian, or there are particular issues to discuss, then the GP should be contacted by telephone.

- The patient should be discharged from WardWatcher – with particular attention to checking of diagnostic codes and severity data – this will be done by the responsible consultant.

- All Critical Care deaths should be discussed at the next scheduled Critical Care M&M. A TRAK M&M should be completed and the patient details added to the M&M agenda.

- If the PF is going to investigate a death then this should be communicated in the /deathcert note.

- If we are awaiting a PF decision on whether we are to issue a certificate then the /deathcert note should be delayed until this information is known. If it is anticipated this will be greater than 24 hours then the GP should be informed of the death by phone.

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