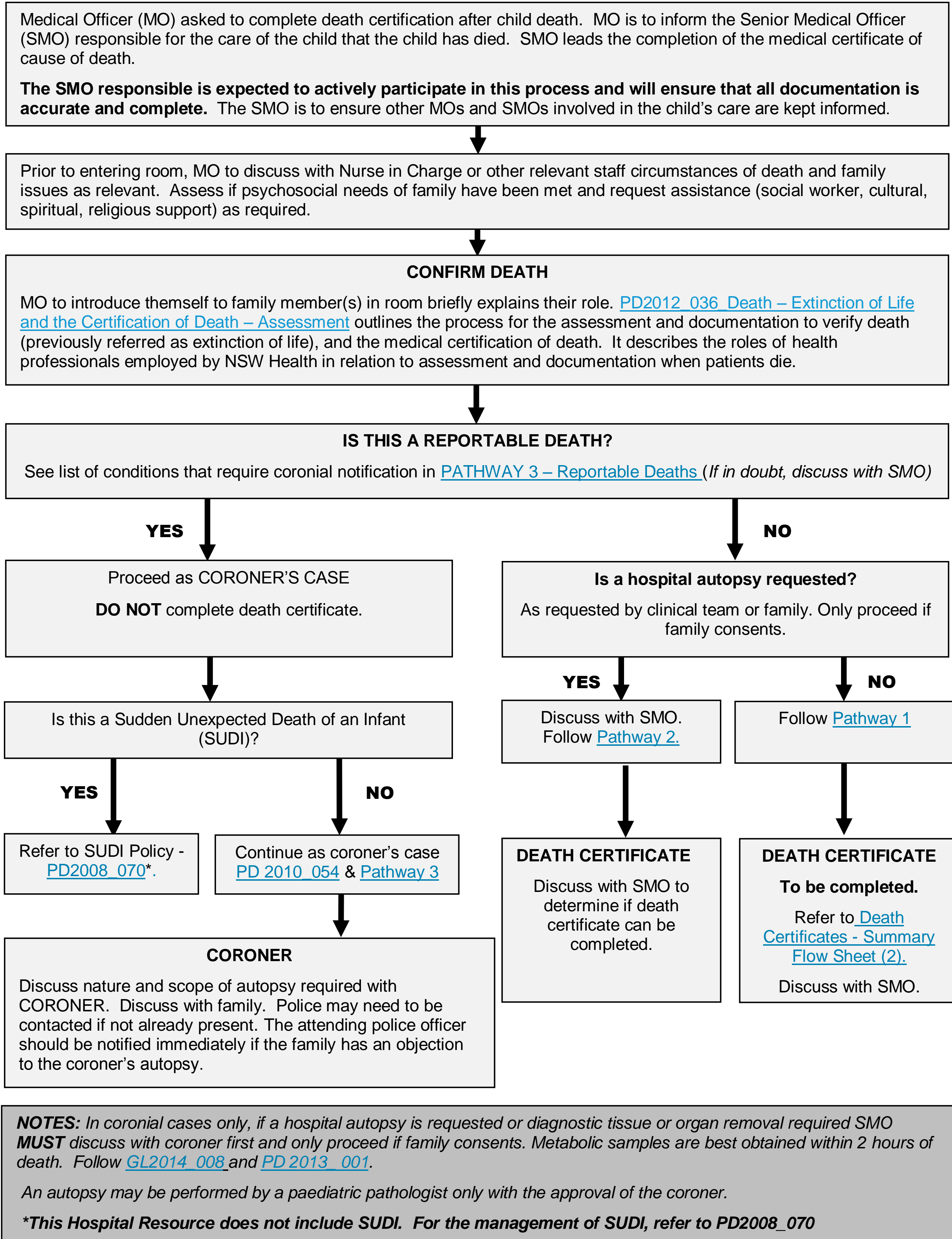
NSW KIDS + FAMILIES

MANAGEMENT OF THE DEATH OF A CHILD IN HOSPITAL – FLOW SHEETS AND CHECKLISTS

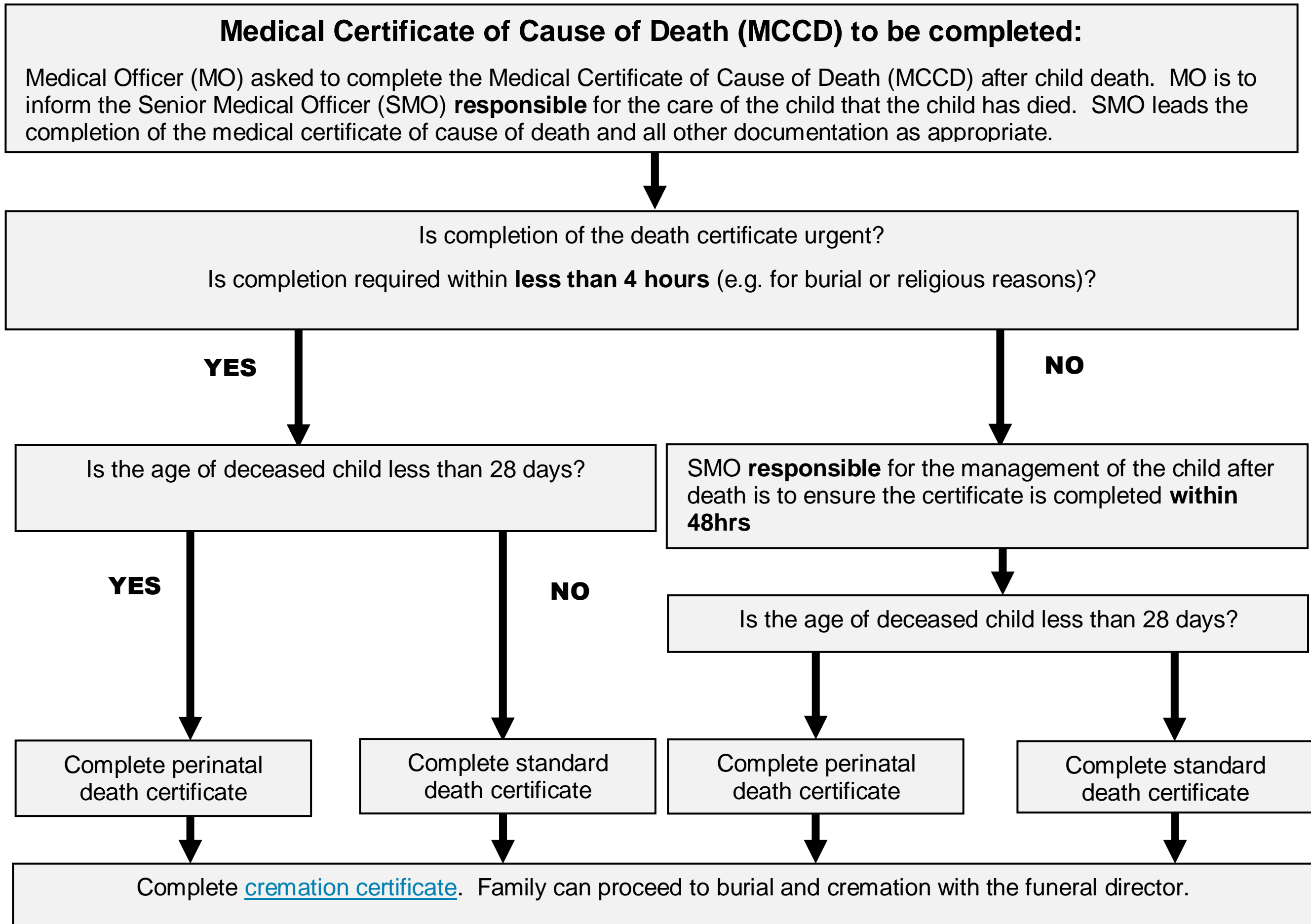
NSW GOVERNMENT | Health

healthy, safe and well

CONFIRMATION OF DEATH & REPORTABLE DEATHS: FLOW SHEET (1)



CONFIRMATION OF DEATH & REPORTABLE DEATHS: FLOW SHEET (2)



KEY POINTS TO CONSIDER WHEN COMPLETING DEATH CERTIFICATE

- The Senior Medical Officer (SMO) is responsible for the accurate completion of the death certificate.
- Cause of death is not 'cardiopulmonary arrest'. This is a process not a cause of death.
- Line (a) is the direct cause of death. There must always be an entry in line (a). The senior doctor responsible must be consulted with regard to documenting the underlying cause of death.
- Lines (b)-(e) are underlying causes that have contributed to death.
- If (a) is not a consequence of other conditions then (b) – (e) can be left blank.
- Do not forget to complete the 'Duration' column on the right hand side of the form.
- Complete 'Part 2 Other Significant Conditions'.

For further information and guidance on how to complete a Cause of Death Certificate please refer to 'Information Paper. Cause of Death Certification' 2004 [1205. 0. 55. 001] produced by the Australian Bureau of Statistics (ABS).

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PATHWAY 1 CHECKLIST: NON-CORONER'S CASE WITHOUT A HOSPITAL AUTOPSY

PD2012_036_Death – Extinction of Life and the Certification of Death – Assessment

- [ ] **Decisions regarding non-coroner's case and no hospital autopsy Discussed with senior doctor in charge of the patient's care**

  Print senior doctor's name: ______________________________
- [ ] **Locally required mortuary documentation**
  Completed, signed and placed in medical record
  (original accompanies patient's body to the morgue, copy remains in medical record)
- [ ] **Identifiication (ID) labels are correctly on child's body**
- [ ] **Medical Certificate of Cause of Death (MCCD)**
  (Perinatal OR normal death certificate)
  Completed, signed and placed in medical record
- [ ] **Cremation Certificate**
  Completed, signed and placed in medical record
- [ ] **Medical record documentation**
  Completed, signed and sent to Clinical Governance Unit
- [ ] **All forms put into envelope and placed in medical record**

PATHWAY 2 CHECKLIST: NON-CORONER'S CASE WITH HOSPITAL AUTOPSY

PD2012_036_Death – Extinction of Life and the Certification of Death – Assessment,
PD2013_051 Non-Coronial Post Mortems,
PD 2013_001 Deceased Organ and Tissue Donation-Consent and Other Procedural Requirements,
PD2005_341 Human Tissue-Use/Retention Including Organ Donation, Post-Mortem Examination and Coronial Matters
GL2014_008 Organ Donation After Circulatory Death: NSW Guidelines.

☐ **Decisions regarding non-coroner's case with hospital autopsy**
Discussed with senior doctor in charge of the patient's care
Print senior doctor's name: ____________________________

☐ Discussed with histopathologist (prior to obtaining consent)
(to allow informed discussion with the parents about the extent and details of the post-mortem examination, e.g., retention of tissue or organs)

☐ **Consent for hospital autopsy**
Information for Parents about Hospital Autopsy brochure - given to parents/next-of-kin
Consent form completed and enclosed (parents / next-of-kin signed, witness signed, designated officer signed)
Copy of consent form given to parents / next-of-kin (legal requirement)

☐ **Locally required mortuary documentation**
Completed, signed and placed in medical record
(original accompanies the patient's body to the morgue, copy remains in medical record)

☐ **Identifiication (ID) labels are correctly on child's body**

☐ **Medical Certificate of Cause of Death (MCCD)**
(Perinatal OR normal death certificate)
Completed, signed and placed in medical record

☐ **Cremation Certificate**
Completed, signed and placed in medical record

☐ **Medical record documentation**
Completed, signed and sent to Clinical Governance Unit

☐ **All forms put into envelope and placed in medical record**

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PATHWAY 3 CHECKLIST: REPORTABLE DEATHS - CORONER'S CASE

PD2012_036_Death – Extinction of Life and the Certification of Death – Assessment,
PD 2010_054 Coroner's Cases and the Coroners Act 2009),
PD2013_051 Non-Coronial Post Mortems,
PD 2013__001 Deceased Organ and Tissue Donation-Consent and Other Procedural Requirements,
GL2014_008 Organ Donation After Circulatory Death: NSW Guidelines,
PD 2010_054 Coroner's Cases and the Coroners Act 2009,
PD2005_341 Human Tissue-Use/Retention including Organ Donation, Post-Mortem Examination & Coronial Matters,
IB2010_058_ NSW Health Information Bulletin Coronial Checklist & Coroners Act 2009 No 41

Coroners Amendment Act 2012 No 24

DO NOT DISTURB THE BODY

A death certificate is not issued if the death is reportable to the coroner.

DO NOT remove any IV lines, drains, dressings or tubes, DO NOT clean any part of the body, DO NOT perform hand or foot prints.

- [ ] **Decisions regarding coroner's case**
  Discussed with senior doctor in charge of the patient's care
  Print senior doctor's name: ___________________________
- [ ] **Local police notified**
- [ ] **Relevant information provided to parents / next-of-kin**
  (including NSW Coroner's Court: A guide to services brochure)
- [ ] **Locally required mortuary documentation**
  Completed, signed and placed in medical record
  (original accompanies the patient's body to the morgue, copy remains in medical record)
- [ ] **Identifiication (ID) labels are correctly on child's body**
- [ ] **Report of Death of a Patient to the Coroner (Form A)**
  Completed, signed and given to police. Copy placed in medical record
- [ ] **Report of death associated with anaesthesia/sedation**
  Completed, signed and given to police. Copy placed in medical record.
- [ ] **Medical record documentation**
  Completed, signed and sent to Clinical Governance Unit
- [ ] **All forms put into envelope and placed in medical record**