Department of Health, We Human BUREAU FOR PUBLIC HEALTH

Special Operational Policies and Treatment Protocols

DEATH IN THE FIELD

This protocol is designed to be used when EMS personnel encounter patients who are dead at the time of arrival in which resuscitation is medically inappropriate **or** for use immediately after the **Cease-Effort Protocol 9102** has been performed.

- A. Perform initial assessment as per any patient.
- B. Determine history.
- C. **Criteria:** The decision to not begin resuscitation may occur under the following circumstances if ordered in **consultation with MCP**.
 - 1. When there are changes to the body which indicate a prolonged postmortem interval (i.e. decomposition, rigor in normo-thermic body).
 - 2. Injuries incompatible with life such as decapitation or transection of torso.
 - 3. Pulseless, apneic patients in multiple casualty situations where resources are required to maintain living patients and those resources are unavailable.
 - 4. Proper "Do Not Resuscitate" documentation has been discovered or clarified by family, **Medical Command Electronic Registry (End of Life Registry)**, or power of attorney.
 - 5. Resuscitation efforts pose a danger to the health and/or safety of the rescuers and/or the scene is judged unsafe for rescuers to continue providing care.
- D. **Criteria:** The decision to not begin resuscitation may occur under the following circumstances by **order of MCP**.
 - 1. Victims of trauma who are pulseless and apneic at the time of arrival of first responders or EMS personnel.
 - 2. Blunt trauma patients, who become pulseless and apneic, cannot be extricated quickly, and the entrapment precludes medically effective resuscitation efforts.
 - 3. Circumstances where beginning or continuing resuscitation is not medically appropriate as determined by EMS personnel and direct contact with the **Medical Command Physician.**
 - 4. Proper "Do Not Resuscitate" documentation has been discovered or clarified by family, **Medical Command Electronic Registry (End of Life Registry)**, or power of attorney.

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- E. Procedure:
 - 1. Contact **Medical Command** immediately and **consult with MCP** as required in "C" and "D" above. Discuss situation and **obtain confirmation that no resuscitation is indicated.**
 - 2. Protect and preserve the scene until jurisdictional authority has been determined as in #4 below.
 - 3. Notify the Medical Examiner Authority (County or State) on all out-of-hospital deaths **including** those registered with and receiving hospice care.
 - 4. If the county authority is unavailable or does not call back within 10 minutes, then contact the State Medical Examiner's Office at 1-877-563-0426
 - 5. Check with your county dispatch to ensure that Law Enforcement has been notified.
 - 6. EMS personnel are not required to transport the body, but may do so if instructed and this is standard practice as a courtesy to the local community.
 - 7. EMS personnel should document carefully the signs, symptoms, and vital signs which confirmed and allowed the declaration of death. These facts should be recorded in the patient care record.
 - 8. For Medical Examiner cases, the hospital copy of the patient care record should be completed and given to the Medical Examiner Authority (County or State) if they are on-scene or left with the body at the morgue if transport is made.

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