

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	2033.15
	PROGRAM DOCUMENT: Determination of Death	Initial Date:	09/01/92
		Last Approved Date:	05/01/17
		Effective Date:	07/01/21
		Next Review Date:	03/01/23

EMS Medical Director

EMS Administrator

Purpose:

- A. To ~~outline the~~ **establish** procedures to be utilized in the field by Sacramento County Emergency Medical Services Agency (SCEMSA) Paramedics, Emergency Medical Technicians (EMT), **Emergency Medical Responders (EMR) and Public Safety** for the determination of death. ~~of emergency patients.~~

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Definitions:

- A. ~~Visual examination: of the remains is the v~~ **Viewing** of the body with sufficient proximity and lighting to assure existence of the death determining condition.
- B. ~~Physical examination: is the touching~~ **Palpation** of the body and exposing the area ~~to sight~~ as necessary to determine the existence of the condition.
- C. ~~Absence of palpable pulses: is the a~~ **Absence** of pulses after palpating for carotid pulses for at least ten (10) seconds.
- D. ~~Asystole by monitor: is the attachment of leads and the running of at least six (6) second strips in two (2) different leads. Asystole is the absence of ALL cardiac electrical activity~~ **Cardiac monitor shows asystole in tow (2) leads.**
- E. ~~Rigor Mortis - Rigor mortis begins with the muscles of mastication and progresses from the head down the body affecting legs and feet last (Tabor's). Generally manifested in one (1) - six (6) hours and maximum six (6) - twenty four (24) hours.~~ **Physical examination with rigidity in jaw and one limb. The stiffness seen in corpses.**
- F. ~~Livor Mortis - Cutaneous, dark spot on dependent portion of a cadaver. (Tabor's). Generally manifested within one half (1/2) to two (2) hours. Reaches maximum in eight (8) - twelve (12) hours.~~ **Discoloration appearing on dependent parts of the body after death as a result of cessation of circulation, stagnation of blood and settling of blood by gravity.**

Protocol:

- A. Paramedics, EMTs, **EMRs, and Public Safety** ~~need~~ **will** not initiate nor continue cardiopulmonary resuscitation (CPR) when death has been determined, respective to the individual's scope of practice, using the criteria outlined below.

Criteria:

Conditions with minimal confirming examination and assessment necessary to determine death without a physician's order.

- A. Where more than one criterion is listed, all (elements) must be present to confirm death in the identified setting. These apply only to the initial assessment and will determine whether or not cardiopulmonary resuscitation efforts will be initiated. In all cases when determination is considered, it is assumed that there is no breathing, no pulse and no response to stimuli. If there is any doubt, initiate cardiopulmonary resuscitation. Assessment for confirming conditions shall take thirty (30) seconds or less.

Obvious Death confirmed with visual exam- EMT, EMR, Public Safety, or Paramedic:

- A. Decapitation: ~~visual examination of remains.~~
- B. Incineration **of the torso and/or head**: ~~visual examination of remains.~~
- C. Decomposition: ~~visual examination of remains.~~
- D. Separation **or destruction** of brain and/or heart from the body: ~~visual examination of remains.~~
- E. Rigor Mortis : ~~physical examination of jaw and one limb with findings of rigor.~~
- F. **Liver Mortis**

Determination of Death- Paramedic only:

- A. ~~Physical examination of the body (to include palpation and visualization of the dependent parts) indicate Rigor or Livor Mortis with~~ asystole by monitor in two (2) leads.
- B. ~~The patient has no life signs and Rigor Mortis and/or Livor Mortis cannot be assessed or is difficult to assess.~~
 - 1. ~~Skin temperature is the same as the ambient temperature.~~
 - 2. ~~Asystole in two (2) leads.~~
- C. Traumatic injuries (if appropriate; respect the possibility of a crime scene):
 - 1. Absence of all pulses, and
 - 2. Asystole by monitor in two (2) leads, or
 - 3. Pulseless electrical activity (PEA) at a rate of less than or equal to 40 beats per minute.
- D. Documented submersion \geq 60 minutes.
- E. In all other circumstances (except Do Not Resuscitate cases) full resuscitation **must will** be initiated.
- F. In all cases when death has been determined, **notify notification of** the Coroner's office or law enforcement **shall be done**. Follow the direction of the Coroner's office/law enforcement as to who has custody of the body. Evidence of a hospice patient receiving care from a physician or registered nurse who is a member of a hospice care interdisciplinary team, within twenty (20) days before death does not require coroner notification. When the investigating agency releases prehospital personnel, **only then may they may** depart the scene. In all cases, if requested by the Coroners Office, documentation will be forwarded ~~to the Coroner's office~~ within 72 hours or sooner. **if requested by the Coroner's office.**

Cross Reference: PD# 2085 - Do Not Resuscitate,
PD# 8031 - Cardiac Arrest