



ST. JOSEPH'S CARE GROUP

Pronouncing Death

[Choose: Policy/Procedure] Number: **CL-02-030**

Manual: Global Clinical Manual

Approval Date: January 5, 2023

Section in Manual: Service Provision

Approved by: NQPC, CSPIQ

Cross References: *LRC-20-010*

Purpose

The purpose of this policy/procedure is to clearly indicate who is able to pronounce death and outline the process of pronouncing death; whether the death expected or unexpected.

Policy Statement

When a client/resident death occurs, St. Joseph's Care Group (SJCG) acts in accordance with relevant legislation. There is no legal requirement that death is to be pronounced by a physician. There is a distinction between pronouncing death and certifying death.

While no legal requirement prevents nurses from pronouncing death, they must have the necessary knowledge, skill and judgment to assess cessation of vital signs in order to pronounce death.

Scope

This policy/procedure applies to nurses, including Registered Nurses (RNs) and Registered Practical Nurses (RPNs), and Nurse Practitioners (NPs) at SJCG. Refer to site specific policies/procedures for differences that may vary amongst the organization.

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Definitions

Pronouncing Death

Pronouncing a death means issuing an opinion that life has ceased based on a physical assessment of the client/resident. Contrary to popular belief, there is no legal requirement that death be pronounced by a physician. Another person, such as a nurse who was caring for the deceased, could pronounce a client/resident's death.

If death occurs in a hospital or long-term care home, there may be specific policies and procedures on who may pronounce death in the facility.

Certifying Death

Certifying a death is not the same as pronouncing death. Certifying a death is the legal process of attesting to the fact, cause, and manner of someone's death, in writing, on the form prescribed by the local authority.

Each province and territory has legislation governing who can certify a death.

In general, any physician who was in attendance during the last illness of the deceased person or who has sufficient knowledge of the last illness has a legal obligation to complete the death certificate.

Expected Death

Expected death pertains to a terminal non-reversible condition in which the client/resident does not wish to be resuscitated.

In the opinion of the most responsible practitioner, the client/resident is irreversibly or irreparably terminally ill and there is no available treatment to resolve health.

Death is anticipated by the client/resident, family, and healthcare team.

Procedure

Expected Death

1. When death occurs and the death is expected, anticipated (i.e., Goals of Care do not include resuscitation) and due to natural causes, a nurse may pronounce death
2. To pronounce death, the nurse must assesses the client/resident for:
 - Absence of apical pulse
 - Absence of respirations
 - Dilated and fixed pupils
3. When the nurse pronounces death, the responsible physician shall be informed at once unless there is documentation on the record to the contrary
4. The most appropriate person is to notify the Power of Attorney (POA)/Substitute Decision Maker (SDM)/family of the death, involve them in next steps, and honour the client/resident and family's cultural, religious, and spiritual beliefs about death and the treatment of the body after death
5. The nurse is to document a statement noting that death was pronounced, the time and date of pronouncement and the name of the nurse pronouncing

Unexpected Death

1. When death is unexpected, unexplained, appears to be from unnatural causes, or otherwise falls under *The Coroners Act*:
 - a) The nurse may pronounce death
To pronounce death, the nurse must assesses the client for:
 - Absence of apical pulse
 - Absence of respirations
 - Dilated and fixed pupils
 - b) The most responsible physician informed at once and must attend the deceased

- c) The body must not be moved or interfered with in any way until the most responsible physician has viewed it
 - d) If the physician finds it necessary to inform a coroner, the body must remain undisturbed until the coroner authorizes otherwise
- 2. The most appropriate person is to notify the Power of Attorney (POA)/Substitute Decision Maker (SDM)/family of the death, involve them in next steps, and honour the client/resident and family's cultural, religious, and spiritual beliefs about death and the treatment of the body after death
- 3. The nurse is to document a statement noting that death was pronounced, the time and date of pronouncement and the name of the nurse pronouncing

Related Practices and/or Legislation

Fixing Long-Term Care Act (2021)

Nursing Act (1991)

Public Hospitals Act (1990)

The Coroners Act (1990)

References

- CNO. (2022). Can an RN or RPN pronounce death when death has occurred? *College of Nurses of Ontario*. <https://www.cno.org/fr/exercice-de-la-profession/outils-educatifs/ask-practice/can-an-rn-orpn-pronounce-death-when-death-has-occurred/>
- CMPA. (2019). Completing medical certificates of death: Who's responsible? *Canadian Medical Protective Association*. <https://www.cmpa-acpm.ca/en/advice-publications/browse-articles/2016/completing-medical-certificates-of-death-who-s-responsible>.