

# **QUINTE HEALTHCARE CORPORATION**

Disclaimer: Any printed copy of this policy is only as accurate as of the date it was printed: it may not reflect subsequent revisions. Refer to the electronic version of the policy on the Intranet under the Policy and Procedure Manual for the most current policy.

# **Deaths – Pronouncement of Expected Death**

Title: Deaths – Pronouncement of Expected		Policy No:	<b>3.4 (previously 3.3)</b>
Death		Original Issue Date:	April 20, 2000
Manual:	Clinical	Last Review/Revision Date:	March 20, 2012
Department:	Corporate	Policy Lead:	
Approved By:	Medical Advisory Committee Nursing Practice Committee	·	

#### 1. POLICY

All nurses (RN's and RPN's) have the authority to pronounce death when patients are expected to die and their plan of treatment does not include resuscitation (College of Nurses of Ontario, 2009).

# 2. **DEFINITIONS**

Expected Death: Refers to when, in the opinion of the health care team, the patient is irreversibly and irreparably terminally ill; that is, there is no available treatment to restore health or the client refuses the treatment that is available (CNO, 2009).

# 3. PURPOSE

Pronouncement of death is the process of assessing a patient's health status, analyzing the data and making a clinical judgement that life has ceased by observing and noting the absence of cardiac and respiratory function. Pronouncement of death is used to formalize the occurrence of death and to make certain that measures are being taken to ensure that individuals are indeed deceased before being treated as such.

#### 4. **PROCEEDURE**

In the case of expected death, the nurse will pronounce death unless otherwise indicated by the physician.

#### Expected death is considered to have occurred when:

- cardiac and respiratory vital signs have ceased (pulseless at the apex and absent respirations) and the pupils are bilaterally fixed and dilated;
- the death of the patient has been anticipated by the patient, family and the health care team; and
- death has been anticipated in a written plan.

## **Unexpected Death:**

• In situations where death is unexpected, the physician is notified to pronounce death, to determine the cause, and to sign the Medical Certificate of Death. The most appropriate person will notify the family.

## **Certifying death:**

- The physician is legally responsible for determining the cause of death, and signing the Medical Certificate of Death. This must be completed as soon as possible and within sixteen (16) hours of death to allow release of the body to a funeral home in a timely fashion.
- Nurse Practitioners (NPs) have the authority to certify an expected death under specific circumstances only. Refer to NP Practice Resources document at <a href="http://www.cno.org/nppr">http://www.cno.org/nppr</a> which complements the NP Practice Standard.

#### **APPENDICES AND REFERENCES**

#### **References:**

College of Nurses of Ontario (2009). Guiding decisions about end-of-life care, 2009. Toronto: Author