



Maricopa County

Office of the Medical Examiner

701 West Jefferson Street

Phoenix, Arizona 85007

Phone: (602) 506-3322

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Procedures and Criteria to Refer a Death to the Office of the Medical Examiner (O.M.E.) for Review and Possible Acceptance of the Case by the O. M.E.

Maricopa County, Arizona, July, 2010.

A. In the state of Arizona, who can sign a death certificate, in other words, certify the causes, time and place of death, and for what patients and diseases?

- 1. Allopathic, osteopathic or naturopathic physicians, nurse practitioners, and, as of December 31, 2010, physician assistants can sign death certificates after the death of a patient in the state of Arizona.
- 2. They can certify the death of any patient whom they or their practice partners have seen at any time during the patient's lifetime.
- 3. However, they can only certify deaths caused by natural disease processes, not for causes of death that fall under the Medical Examiner's jurisdiction.

B. What are the causes of death that fall under the Medical Examiner's jurisdiction?

- 1. Any death due to the immediate or late effects of external **trauma**, whether the trauma occurred **recently or remotely in time**, even years before. Also, regardless of whether the trauma was **intentional or unintentional**. This includes injuries from accidents such as falls, vehicle accidents, firearm or other injuries caused by weapons, or any type of trauma caused to the body from an external source, including the elements (heat exposure, burns from natural or manmade sources, lightning strikes, drowning, etc). It includes homicides and suicides.

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- Examples of deaths to refer to the OME: Death of a CVA pursuant to an automobile accident. OR, death of sepsis due to a UTI due to chronic routine urinary catheterization due to paraplegia from a fall 20 years before. Death resulting from the immediate effects or complications (such as pneumonia) of a bone fracture due to a fall. Blunt force trauma death from being attacked with a baseball bat.
 - DO NOT REFER TO THE OME deaths due to pathological natural process such as osteoporosis, as long as they were NOT due to a fall or other type of trauma. If the hip broke and the patient fell, there is no need to refer, however, if the patient fell, and then the hip broke, whether in an osteoporotic patient or not, it must be referred to the Office of the Medical Examiner.
- 2. **Unexpected and/or unexplained deaths**, meaning a death to a person whose state of health did not lead the practitioner to expect death as a possible prognosis, and/or deaths for which there are no obvious immediately available explanations. For example, deaths to young healthy persons, without previous disease, or deaths to persons **of any age** whose health status did not lead their health care provider to expect them to die.
 - 3. Deaths **during anesthesia or surgery**, meaning a death occurring during the performance of any anesthetic or surgical procedures. An anesthetic death refers to any death, from the time of a pre-operative medication being administered up to the time that the patient should have responded. A patient who dies never having responded after administration of an anesthetic agent, **regardless of time period elapsed**, even if it is years, is considered a surgical death.
 - 4. Deaths to persons who at the time of death were prisoners, or somehow **in custody of any law enforcement agency, regardless of the place of death**, whether the death occurred in a jail or prison or in any other setting, such as a hospital or infirmary.
 - 5. Deaths to anyone (employee, visitor, etc) **occurring in a prison**.
 - 6. Deaths when the deceased is **not under the current care of a health care provider** for a potentially fatal illness, or when an attending provider is unavailable to sign the death certificate.

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- 7. Deaths occurring in a **suspicious, unusual, or a potentially unnatural manner**. This includes suspected homicides, suicides, **any intentional or unintentional poisoning or intoxication, whether from prescribed, legal or illegal drugs or medications**.
- 8. Death from a disease or accident believed to be related **to the patient's occupation or employment**, for example, asbestosis, any workplace occurrences such as an intoxication, a burn, an infectious disease acquired at work, such as among laboratory workers, or bladder cancer among workers who handle certain chemicals.
- 9. Deaths believed to present a **public health risk or hazard**.

C. What are the procedures to follow when referring a death to the Medical Examiner?

- When the death occurs **outside a health facility**, law enforcement should be notified.
 - If the attending provider is available to sign a death certificate and to the best of the provider's opinion the death was due to a natural disease process, the health care provider can certify the death and no referral is necessary to the M.E.
 - If, however, there is no available health care provider, or the cause of death is unexplained, or the death is unexpected, or the person was not under a provider's care, or the causes are suspected to fall in one of the categories listed under B. above, then law enforcement should contact the Office of the Medical Examiner and refer the case.
- When the death occurs in **a health facility such as a hospital, hospice or nursing home**, and the cause of death is suspected to fall under any of the categories listed in B. above, the Office of the Medical Examiner should be contacted by the hospital/attending physician to ascertain whether the O.M.E. will take the case. This needs to be noted on Human Remains Referral Form that should accompany all human remains when released by the hospital, whether to a funeral home or to the Medical Examiner.

To refer a case, or if you have any further questions, please call the Office of the Medical Examiner at 602-506-1138.