



Patient with serious illness with expected death.

Preparation

In hospital:

- Complete [Physician Orders for Life-Sustaining Treatment \(POLST\)](#) order form. Review with patient and family regularly.
- Review DNR/DNI status at least once an admission. Remember, all decisions regarding end-of-life care may be modified at any time per patient and family wishes.
- Place DNR/DNI order in RAVEN. Update code status on RAVEN banner by going to Ad hoc → Code Status form.
- When discharging home, ensure all support is in place, including family care plan, comfort meds (consider sublingual morphine and lorazepam), incontinence supplies, etc.

In village:

- Discuss and document goals of care, code status, wishes for medevac/hospitalization with patient and family. Update code status in RAVEN as above.
- Complete [Expected Home Death](#) form and send to AST/BPD.
- Place on RAVEN banner by going to AdHoc → Patient Registries and check off “Expected Home Death.”
- Communicate with village health aides.

After a home death has occurred

- Medical providers can pronounce death remotely after speaking with a qualified representative, which includes health aides. Representative must ascertain that there is no heart beat or spontaneous breathing.
- Send [Expected Home Death](#) form to the State Medical Examiner and AST/BPD. If this form was not completed prior to death but would have been indicated, it is acceptable to fill it out after death. This will expedite things for the family.

If this is an expected neonatal death, go to [page 3](#).

Required Notifications

Ensure you have next of kin’s name and phone number prior to making these calls.

In hospital:

- Bethel Police Dept 907-543-3781 Even if Expected Death form has been completed.
- Life Alaska 888 543-3287. Required by CMS for all hospital deaths.
- State Medical Examiner 888 332-3273. Please review page 3 for ME notification requirements.

In village:

- Alaska State Troopers 800 478-9112
- State Medical Examiner 888 332-3273 Please review page 3 for ME notification requirements.
- Optional: Life Alaska 888 543-3287. Deceased individuals in villages may still be candidate for tissue donation.

Documentation

- Death Note in RAVEN should be an Alert Note using autotext “.death” which fulfills all documentation requirements.
- Forward death note to Chief of Staff and designated Medical Records representative.
- Complete highlighted portions of Death Certificate and place in Medical Records basket.
- If death occurred in the hospital, complete [Notification of Death](#) form.

Helpful Forms

Note: Copies of the death packet are also kept on the inpatient unit.

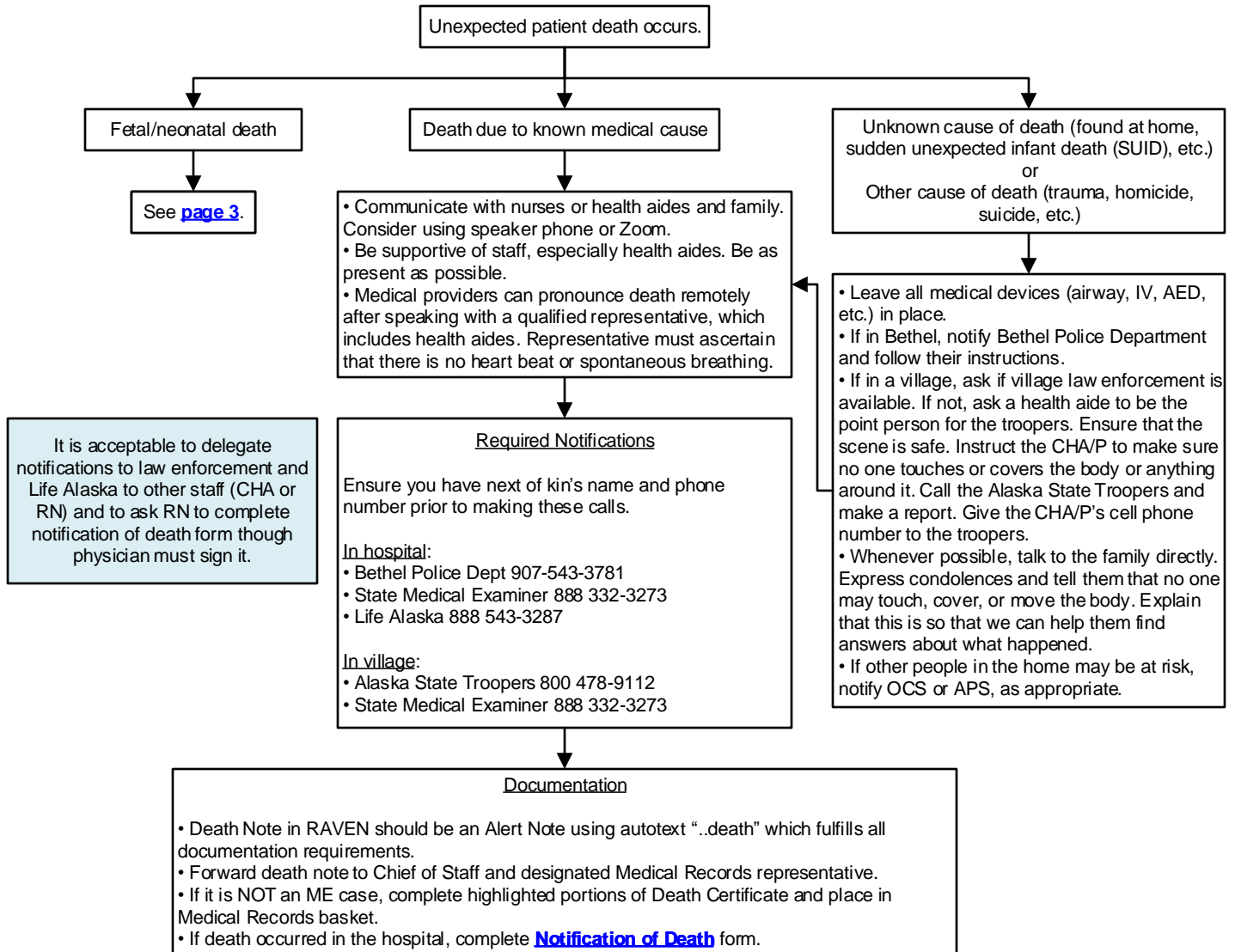
- [Physician Orders for Life-Sustaining Treatment \(POLST\)](#)
- [Expected Home Death](#)
- [Death Certificate Worksheet](#)
- [Notification of Death](#)

This guideline is designed for the general use of most patients but may need to be adapted to meet the special needs of a specific patient as determined by the medical practitioner.

Approved by Clinical Guideline Committee 7/14/23.

Click [here](#) to see the supplemental resources for this guideline.

If comments about this guideline, please contact clinical_guidelines@ykhc.org.



Regarding Life Alaska

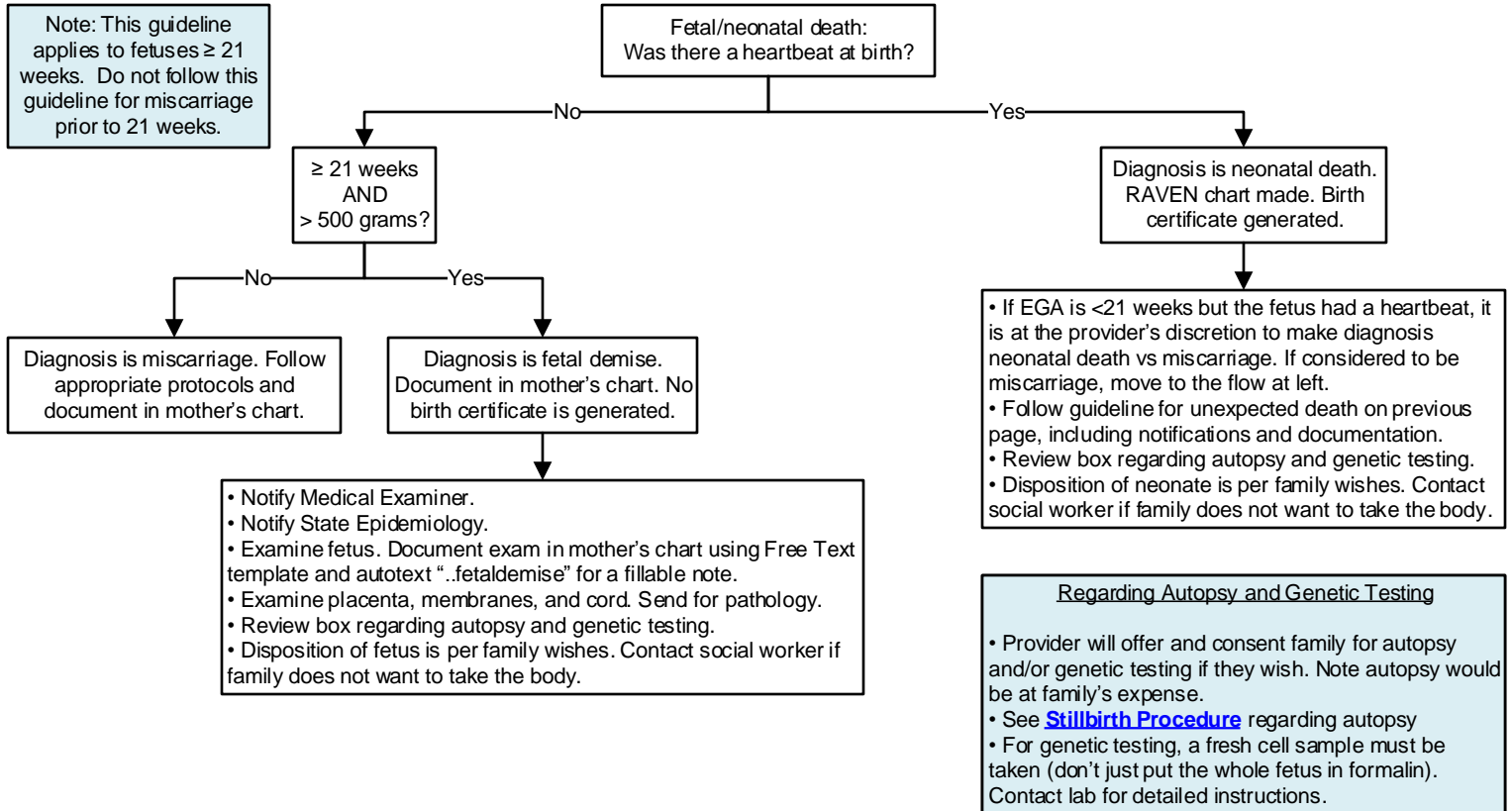
It is a CMS and TJC requirement to notify designated organ donation organization (Life Alaska) for all in hospital deaths. We are not mandated to contact Life Alaska for village deaths; however, individuals who die in villages may still be candidates for tissue donation. Additionally, if the death will become an ME case, Life Alaska must be notified.

- Helpful Phone Numbers**
- Alaska State Medical Examiner: 888 332-3273
 - Life Alaska: 907 562-5433
 - Alaska State Troopers (AST): 800 478-9112
 - Bethel Police Department (BPD): 543-3781
 - State Epidemiology: 907 269-8000
 - OCS Intake (for reports): 800 478-4444
 - APS Intake (for reports): 800 478-9996

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Note: This guideline applies to fetuses ≥ 21 weeks. Do not follow this guideline for miscarriage prior to 21 weeks.



Medical Examiner Notification

Per YKHC and State of AK policy, the Medical Examiner must be notified when the death appears to have:

1. Been caused by unknown or criminal means, during the commission of a crime, or by suicide, accident, or poisoning.
2. Occurred under suspicious or unusual circumstances or occurred suddenly when the decedent was in apparent good health.
3. Been unattended by a practicing physician or occurred less than 24 hours after the deceased was admitted to a medical facility.
4. Been associated with a diagnostic or therapeutic procedure.
5. Resulted from a disease that constitutes a threat to public health.
6. Been caused by a disease, injury, or toxic agent resulting from employment.
7. Occurred in a jail or corrections facility owned or operated by the state or a political subdivision of the state or in a facility for the placement of persons in the custody or under the supervision of the state.
8. Occurred in a foster home.
9. Occurred in a mental institution or mental health treatment facility.
10. Occurred while the deceased was in the custody of, or was being taken into the custody of, the state or a political subdivision of the state or a public officer or agent of the state or a political subdivision of the state
11. Been of a child under 18 years of age or under the legal custody of the Department of Health and Human Services, unless the child's death resulted from a natural disease process and was medically expected and the child was under supervised medical care during the 24 hours before the death.

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