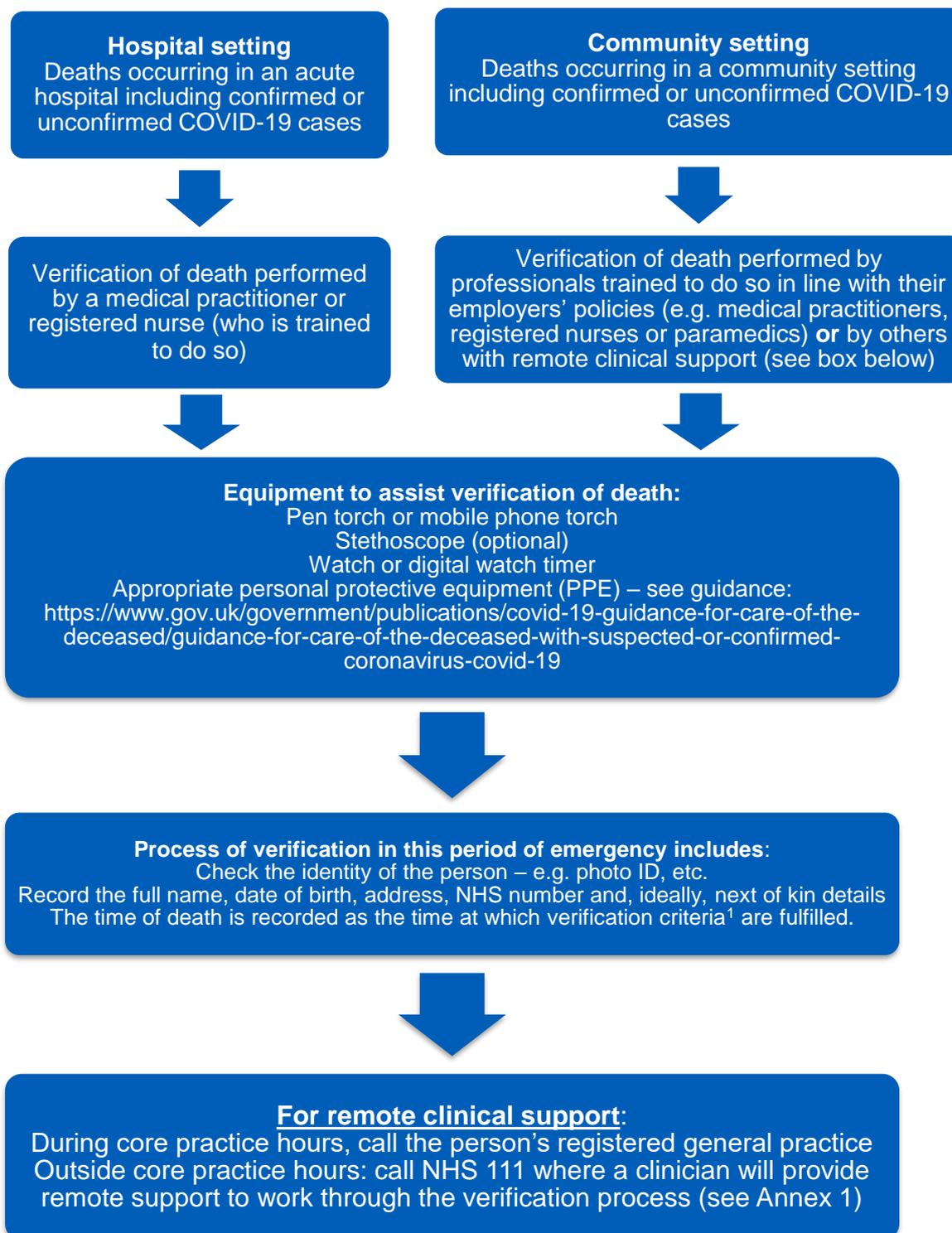


# Flowchart to support implementation of [national guidance on verification of death](#) in this period of emergency:



<sup>1</sup> Medical practitioners, registered nurses and paramedics, who are trained and competent to carry out verification of death, must adhere to their profession-specific guidance

# Annex 1: Guidance for remote clinical support for verification of death

This process assumes that resuscitation has already been ruled out.

During core practice hours these actions should be conducted by a clinician from the patient's practice.

Outside core practice hours the below actions should be carried out by a clinician working as part of the NHS 111/IUC CAS (this would include "out of Hours" providers) –

## General Considerations

- It is important that you have enough time to carry out this procedure in a compassionate manner.
- The below steps should be recorded in your organisation's host IT system
- Be aware of any cultural or religious requirements
- Identify the person verifying and their role
- Ensure the verifier has considered privacy and dignity prior to verifying – such as ensuring only essential persons are in attendance/ checking with family whether they wish for only persons of the same sex to verify the body.
- Establish the circumstances immediately prior to the death and any patient history. You, and the verifier, need to be satisfied that there is no reason to refer this death to the police or coroner.

## Key Questions

- Is this an unexpected death? If yes, report to coroner
- Is there any sign of a suspicious death? If yes, report to police
- Have you established the identity of the deceased person, e.g. using photo ID?

## The Verification Process

Ask the Verifier to complete the following checks:	Confirmed?
<b>1. Neurological system</b>	
<ul style="list-style-type: none"><li>• Check pupils are dilated and fixed (unresponsive to light directed into both eyes using a torch)</li></ul>	
<ul style="list-style-type: none"><li>• Check there is no response to painful stimuli - If you squeeze the muscle between the neck and the shoulder (the trapezius), do they respond?</li></ul>	
<b>2. Respiratory System</b>	
<ul style="list-style-type: none"><li>• Check that there is no movement of the chest wall for 3 minutes by observing the chest (you may need to advise removal of clothing to expose the chest/abdomen)</li></ul>	
<b>3. Circulatory System</b>	

<ul style="list-style-type: none"> <li>• Advise verifier to find the site of the carotid pulse and check for one minute that pulse is absent.</li> </ul>	
<b>4. Reassessment</b>	
<ul style="list-style-type: none"> <li>• Wait 10 minutes and repeat the actions above.</li> </ul>	
<b>5. Record that verification has been completed</b>	
<ul style="list-style-type: none"> <li>• Record in line with your organisational policy.</li> </ul> <p>Suggested items to record are:</p> <ol style="list-style-type: none"> <li>1. Full name, date of birth, address and NHS number (if available) of person whose death is being verified</li> <li>2. Name of person verifying</li> <li>3. Role of person verifying</li> <li>4. Who is present</li> <li>5. Circumstances of death (location, who first noted it, anyone present at the time of death)</li> <li>6. Outcome of verification, including time of death</li> <li>7. Any discussions with staff or relatives</li> <li>8. Any concerns from staff or relatives</li> </ol> <p><u>Confirmation of Identity</u></p> <p>For the purpose of confirming the identity of the deceased, it is recommended that an appropriate identity document is provided to the remote verifier e.g. via the video call or separate secure email.</p>	

#### Following Verification

Be clear about removal from the deceased or safe keeping of items such as jewellery. Inform the key person(s) of the next steps in the process and the range of options available to them.