

18

TO REPORT A DEATH — PHONE (323) 343-0711 FAX (323) 222-7041
COMPLETE ALL LINES, USE INK. IF UNKNOWN OR NOT APPLICABLE, SO STATE.

ME CASE # _____

NAME OF FACILITY _____

ADDRESS _____ HOSPITAL PHONE # _____

NAME OF DECEDENT _____

SOURCE OF IDENTIFICATION _____ DOB _____ AGE _____ SEX _____ RACE _____

DATE OF DEATH _____ TIME _____

PRONOUNCED BY _____ MEDICAL RECORD OR PATIENT FILE # _____

**ALL ADMISSION BLOOD SAMPLES/SPECIMENS NEED TO BE HELD FOR
THE MEDICAL EXAMINER OR ACCOMPANY DECEDENT/DO NOT DISCARD**

DATE ENTERED HOSPITAL _____ TIME _____

SELF AMBULANCE (Name or R.A.#) _____ ER DEATH? IN PATIENT DEATH?

FROM _____
(STATE WHETHER HOME, HOSPITAL OR OTHER) GIVE ADDRESS _____ (IF HOSPITAL ATTACH THEIR HISTORY)

ADMITTED BY: _____ M.D. PRIMARY ATTENDING PHYSICIAN _____ M.D.

OFFICE PHONE # _____ OFFICE PHONE # _____

INJURIES _____ PLACE _____ CAUSE _____
DATE TIME (TRAFFIC, FALL, ETC.)

DESCRIBE INJURIES:

CLINICAL HISTORY:

SURGICAL PROCEDURES: STATE TYPE, DATE, TIME AND RESULTS OF ANY OPERATION OR AMPUTATION PERFORMED

WAS A BULLET OR OTHER FOREIGN OBJECTS RECOVERED? SPECIFY _____

LABORATORY: REPORT ON PATHOLOGY SPECIMENS TAKEN _____ DATE & TIME _____

LABORATORY PHONE NUMBER _____

MICROBIOLOGY CULTURE RESULTS: _____ NO _____ YES (ATTACH REPORT)

TOXICOLOGY SCREEN: _____ NO _____ YES (ATTACH RESULTS)

RADIOLOGICAL STUDIES: _____ NO _____ YES (ATTACH RESULTS)

REMARKS: ESPECIALLY SYMPTOMS PRECEDING AND DURING TERMINAL EPISODE

IN MY OPINION, THE CAUSE OF DEATH IS: _____

BY _____ M.D. -OR- _____

NURSE/HOSPITAL ADMINISTRATOR

OFFICE PHONE # _____

OFFICE PHONE # _____

Section 102850. A physician and surgeon, physician assistant, funeral director, or other person shall immediately notify the medical examiner when he or she has knowledge of a death that occurred or has charge of a body in which death occurred under any of the following circumstances:

- (a) Without medical attendance.
 - (b) During the continued absence of the attending physician and surgeon.
 - (c) Where the attending physician and surgeon or the physician assistant is unable to state the cause of death.
 - (d) Where suicide is suspected.
 - (e) Following an injury or an accident.
 - (f) Under circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another.
- Any person who does not notify the medical examiner as required by this section is guilty of a misdemeanor.

Section 27491 of the Government Code, State of California

It shall be the duty of the medical examiner to inquire into and determine the circumstances, manner, and cause of all violent, sudden or unusual deaths; unattended deaths; deaths wherein the deceased has not been attended by a physician in the 20 days before death; deaths related to or following known or suspected self-induced or criminal abortion; known or suspected homicide, suicide, or accidental poisoning; deaths known or suspected as resulting in whole or in part from or related to accident or injury either old or recent; deaths due to drowning, fire, hanging, gunshot, stabbing, cutting, exposure, starvation, acute alcoholism, drug addiction, strangulation, aspiration, or where the suspected cause of death is sudden infant death syndrome; death in whole or in part occasioned by criminal means; deaths associated with a known or alleged rape or crime against nature; deaths in prison or while under sentence; deaths known or suspected as due to contagious disease and constituting a public hazard; deaths from occupational diseases or occupational hazards; deaths of patients in state mental hospitals serving the mentally disabled and operated by the State Department of Mental Health; deaths of patients in state hospitals serving the developmentally disabled and operated by the State Department of Developmental Services; deaths under such circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another, or any deaths reported by physicians or other persons having knowledge of death for inquiry by medical examiner. Inquiry in this section does not include those investigative functions usually performed by other law enforcement agencies.

In any case in which the medical examiner conducts an inquiry pursuant to this section, the medical examiner or a deputy shall personally sign the certificate of death. If the death occurred in a state hospital, the medical examiner shall forward a copy of his report to the state agency responsible for the state hospital.

The medical examiner shall have discretion to determine the extent of inquiry to be made into any death occurring under natural circumstances and falling within the provisions of this section, and if inquiry determines that the physician of record has sufficient knowledge to reasonably state the cause of a death occurring under natural circumstances, the medical examiner may authorize that physician to sign the certificate of death.

Any funeral director, physician, or other person who has charge of a deceased person's body, when death occurred as a result of any of the causes or circumstances described in this section, shall immediately notify the medical examiner. Any person who does not notify the medical examiner as required by this section is guilty of a misdemeanor.

Listed below are types of deaths which have been difficult to evaluate and **should be referred** to the Medical Examiner for decision:

- Aspiration – refer to Medical Examiner
- Suffocation – refer to Medical Examiner
- Drug addiction – refer to Medical Examiner
- Exposure – refer to Medical Examiner
- Pneumoconiosis – refer to Medical Examiner

Gastroenteritis

a. Do not use as cause of death. If death a result of "Acute Hemorrhagic Enteritis of undetermined natural causes," it is not a case for the Medical Examiner.

b. Refer all others to the Medical Examiner because of possibility of poisoning.

Gastrointestinal hemorrhage.

a. Do not use alone as cause of death. If death a result of "Gastrointestinal hemorrhage of undetermined natural causes," it is not a case for the Medical Examiner.

b. Refer all others to the Medical Examiner.

Heat prostration – refer to Medical Examiner.

Diarrhea – should not be used as immediate cause of death.

Fractures

a. All fractures should be evaluated by the Medical Examiner except **SPONTANEOUS PATHOLOGICAL** fractures. Therapeutic misadventure – refer to Medical Examiner.

Operative Deaths (result of surgery or anesthesia) – refer to Medical Examiner.

CONTAGIOUS DISEASES

A Medical Examiner's referral will not be necessary for diagnosed cases of contagious diseases since local procedures and the action by the Health Department after notification will be the defense against any public hazard.

Cases of possible but not diagnosed contagious disease, such as, possible meningitis or possible pulmonary tuberculosis when an autopsy is not contemplated, shall be referred to the medical examiner for diagnosis following which notification of proper authorities will be made.