

# Death Certification & Reporting to the Coroner

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## Death Certification

- Need to be done by the deceased's regular medical attendant (GP) or by one of the team looking after an inpatient
- Needs to be done by a Dr who has seen the patient in the last 14 days
- May be done after discussion with the Coroner (tick appropriate box on certificate)

## Death Certification

- **Certificates of cause of death.**
- (1) In the case of the death of any person who has been attended during his last illness by a registered medical practitioner, that practitioner shall sign a certificate in the prescribed form stating to the best of his knowledge and belief the cause of death and shall forthwith deliver that certificate to the registrar.
- (2) On signing a certificate of the cause of death under the foregoing subsection the medical practitioner shall give in the prescribed form to some qualified informant of the death notice in writing of the signing of the certificate, and that person shall, except where an inquest is held . . . **F1** touching the death of the deceased person, deliver the said notice to the registrar.
- (3) [**F2** Except where an inquest is held into the death of the deceased person or a post-mortem examination of his body is made under section 19 of the Coroners Act 1988], a registrar to whom a certificate of cause of death is delivered under subsection (1) of this section shall enter in the register the cause of death as stated in the certificate, together with the name of the certifying medical practitioner.
- (4) The Registrar General shall from time to time furnish to every registrar printed forms of the certificates required to be signed by registered medical practitioners under subsection (1) of this section, and every registrar shall furnish such forms free of charge to any registered medical practitioner residing or practising in that registrar's sub-district.
- <http://www.legislation.gov.uk/ukpga/Eliz2/1-2/20/section/22>

## Death Certification

- Should not be done without discussion with the Coroner if the death falls into one of the categories listed
- The Dr filling out the MCCD is usually (but does not have to be) the person who fills out the 1<sup>st</sup> part of the cremation paperwork
- The 2<sup>nd</sup> part of the cremation paperwork needs to be filled out by a Dr NOT involved in the patients care or related to the Dr filling out the first part

## Death Certification

- Use a logical sequence for CoD
- 1a is caused by 1b is caused by 1c
- 2 is conditions relating to but not directly causing death (eg DM in heart disease)
- Can have two (or more) causes in any part of the certificate

## Death Certification

- If unsure, talk to your seniors.
- The RSOs may warn you about local Coroner's preferences (eg don't say CVA but CVI) BUT they are not there to give you advice on filling out the MCCD
- Please remember this is the last service you are performing for your patient and complete MCCDs/referral to the Coroner in a timely manner

## When do we discuss cases with the coroner?

- Industrial diseases
- Alcohol/drugs/poison
- Sudden unexpected death or suspicious circumstances
- Death in custody or shortly after release (including those detained under the MHA and DOLS)
- If the deceased is in receipt of an armed forces or industrial disability pension
- Deaths of foster children or persons in mental institutions
- Deaths within 24h of admission, even if CoD is known
  
- These latter two aren't strict rules but should be considered

## Does referral to the Coroner automatically mean a post mortem?

- No
- The Coroner can allow the referring Dr to issue a MCCD
- The Coroner can issue a death certificate without a PM
- The Coroner can go to inquest without a PM if there is histologically proven disease pre mortem

## When do we discuss cases with the coroner?

- There is a document on the trust web site written by the Ashford area Coroner (Mrs Redman) regarding when to refer cases
- A paper copy of this should be available in the Relatives Support Office

## When do we discuss cases with the coroner?

- Please don't forget that certain occupations are associated with industrial disease – if your patient has a relevant previous occupation, please discuss the case with the Coroner so you can discuss whether their occupation was relevant.
- Occupation comes up when the death is registered so if this hasn't been discussed, the registrar may refer the case to the Coroner themselves.

## What information should be provided?

- Basic details required when reporting a death to HM Coroner
  - Reason for reporting
  - Name of deceased
  - Date of Birth
  - Address of Deceased
  - Date & Time of Death
  - Concise summary of PMHx and recent I/P episode
  - Occupational history
  - Family/Contact telephone numbers
  - Hospital Number
  - Consultant's Name
  - GP Details

## Reason for Reporting

- If you are going to report a death to the Coroner, please ensure you know why you are reporting it
- If unsure, please check with your reg/consultant
- Just because you are reporting a death, it doesn't mean that the MCCD can't be issued. If you know the CoD and are happy to issue the MCCD, tell the COs this.
- Just because you are reporting a death, doesn't mean the CoD needs to be 'unknown' – it just means it falls under the guidance above
- Again, if in doubt, ask your seniors!