SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Policy Reference No.: 4050 Effective Date: February 1, 2009 Review Date: February 1, 2011 Supersedes: September 1, 2006

DEATH IN THE FIELD

I. PURPOSE

To determine the role of the ALS and BLS provider for patient's in cardiac arrest and identify conditions where Cardiopulmonary Resuscitation (CPR) is withheld or discontinued.

II. AUTHORITY

- A. California Health and Safety Code, Division 2.5, Sections 1798 1798.6
- B. California Code of Regulations, Title 22, Sections 100147 and 100175

III.POLICY

A patient may be determined dead if the following conditions exist:

A. Obvious Deaths

- Decapitation
- Total incineration
- Decomposition
- Separation from the body of either the brain, liver, or heart
- Rigor mortis (NOTE: Must apply EKG leads and confirm Asystole in 2 leads).

B. Medical

- Un-witnessed arrest with a reasonable suspicion of down time of 15 minutes or greater **and** the patient is pulseless and apneic [no shock indicated on AED for BLS: Asystole in 2 leads for ALS] **and** no evidence of hypothermia, drug ingestion or poisoning.
- Patient has at least 25 minutes of ALS intervention, initial resuscitation efforts have been unsuccessful and treatment protocols have been exhausted.
- Presence of a valid Do Not Resuscitate (DNR) Card.

C. Trauma

- MCI incident where triage principles preclude initiation of CPR
- Blunt, penetrating or profound multi-system trauma with a wide- complex PEA rhythm and a rate of 40 or less.

D. Environmental

• Drowning victims where it is reasonably determined that submersion has been 15 minutes or greater.

NOTE: If CPR was initiated by non-EMS personnel for the above mentioned conditions, DISCONTINUE CPR.

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Contact Base Hospital Physician to determine death in the field when the followings conditions apply:

- CPR is started on a patient and there is NO VALID DNR Card and /or family or guardians present are requesting to stop resuscitation.
- Any situation in which the paramedics discretion warrants clarification or direction.

IV. PROCEDURE

- Maintain the integrity of the death scene.
- The deceased patient may be removed immediately from the scene in the following situations:
 - A life threatening or hazardous situation exists
 - The death occurs in public view and it appears to be from natural causes
- The Medical Examiner and the SFPD shall be notified by the highest medical authority at the scene through the ECD or private dispatch.
- Provide grief support for bystanders and family members as appropriate.
- Complete a Pre-hospital Care Record with the following minimum information:
 - Position of patient on arrival,
 - Description of environment patient found in,
 - Known or reported circumstances surrounding death,
 - Actions taken by responding personnel,
 - Identity of all personnel on scene,
 - Identity of Base Physician consulted, and
 - Time of death.
- Obtain EKG strip.
- Complete early defibrillation documentation if appropriate.
- Documents if valid DNR directive present.
- EMS personnel may leave the scene if SFPD, building security and/ or family members are present to preserve the scene and documentation is completed and left for the Medical Examiner.