Affix hospital identification here

Death in hospital

Surname	UMRN	
Given names	DoB	Gender
Address		
Suburb	Postcode	

Section 1: Extinction of life

Death occurred in: ..... ED ☐ Ward ☐ Theatre ☐ Other ☐ While on leave from hospital ☐

Doctor certifying life extinct: Name: ..... Position: .....

Signature: ..... Date: .....

Date of Death: ..... / ..... / ..... dd/mm/yy Time of Death: ..... : ..... 00:00 hours

Section 2: Is the death reportable to the Coroner?

1. Is the cause of death unknown or uncertified by a medical practitioner? ..... ☐ Yes ☐ No
2. Has the death or does the death appear to have occurred in suspicious circumstances?
   i.e. Has the death possibly resulted from a criminal act? ..... ☐ Yes ☐ No
3. Was the death or does the death appear to have been unexpected or unnatural?
   e.g. Complication following administration of a medication, diagnostic, medical or surgical procedure ..... ☐ Yes ☐ No
4. Has the death or does the death appear to have occurred, in or following violent circumstances?
   e.g. Physical or sexual assault, domestic dispute ..... ☐ Yes ☐ No
5. Has the death or does the death appear to have resulted, directly or indirectly from injury?
   e.g. Fall prior to or during admission resulting in significant injury including, but not limited to a fractured neck of femur or head strike, motor vehicle, self-harm, suicide ..... ☐ Yes ☐ No
6. Has the death occurred during anaesthesia? e.g. General anaesthesia ..... ☐ Yes ☐ No
7. Did the death possibly occur as a result of, or does it appear to have resulted from, anaesthesia? ..... ☐ Yes ☐ No
8. Immediately prior to the death was the deceased a person:
   - under the control, care or custody of the WA police force, Prison Service or Child Protection and Family Support ..... ☐ Yes ☐ No
   - admitted to a centre under the *Alcohol and Other Drugs Act 1974* ..... ☐ Yes ☐ No
   - an involuntary patient, apprehended, detained or absent without leave under the *Mental Health Act 2014* ..... ☐ Yes ☐ No
9. Is the deceased person's identity unknown? ..... ☐ Yes ☐ No
10. To your knowledge has any one expressed any concerns regarding the cause of the deceased person's death or medical treatment? ..... ☐ Yes ☐ No

If you have answered **YES** to **any** of the above questions, the death is **REPORTABLE** to the Coroner, and the most recent medical records leading up to the person's death must be provided to the police immediately or, in any case, to the State Mortuary not more than 24 hours following death. This is to ensure that the post mortem examination can be conducted in a timely manner.

Where records are paper-based, the originals are to be provided with copies retained by the health service for any ongoing purposes. Should further medical information be requested by the police/coroner these records should then be provided as soon as practicable.

Section 3: How to report a death to the Coroner

To report a death to the Coroner, or to seek guidance about reportable deaths:

Metropolitan Perth:
Contact the WA Police Coronial Investigation Squad (CIS) on 9267 5700 (24 hours-a-day, 7 days-a-week).
Scan and email this form to: Coronial.Investigation.Squad@police.wa.gov.au

Country WA settings:
Contact the local police. If further guidance or assistance is required, contact the CIS on 08 9267 5700.
Where medical practitioners wish to escalate their call to a coronial delegate, please raise this with the CIS.

Affix hospital identification here

Death in hospital

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Section 4: Notification of reportable deaths under the *Coroners Act 1996*

On notification you will be asked for information on the circumstances surrounding the death, which should be conveyed to the coronial delegate (e.g. the CIS / police officer to whom the death is reported). You should also consider the answer to the question "**Was death an inevitable consequence of the deceased person's primary illness or condition regardless of appropriate resuscitation, anaesthesia, or surgery?**" In cases when the answer is 'yes' a post mortem may not be necessary.

CIS / police officer notified by phone: Date: ...../...../..... dd/mm/yy Time: ..... : ..... 00:00 hours

Name of CIS/police officer: (please print) .....

Name of Doctor reporting: (please print) .....

Consultant notified: Yes ☐ No ☐ Contact number: ..... Sign: .....

If the **death is reportable** a copy of this Form should also be placed in the deceased person's Hospital Medical Record as well as the Hospital's Coronial Investigation File.

Where the death is **not** reportable:

- the original copy of this Form must be filed in the deceased person's Hospital Medical Record
- you may complete the following Forms:
  1. Medical Certificate Cause of Death (BDM 202/201) and Completed? ..... ☐ Yes ☐ No
  2. Certificate of Medical Attendant (Form 7 WA Cremation Act) Completed? ..... ☐ Yes ☐ No

Section 5: Other reporting obligations

5.1 Reportable deaths under the *Health (Miscellaneous Provisions) Act 1911*

Is the death:

- a maternal death (arising from pregnancy or childbirth or associated with complications) ..... ☐ Yes ☐ No
- one involving a child who is stillborn (greater than 20 weeks gestation), or under the age of one year ..... ☐ Yes ☐ No
- one that occurred within 48 hours of administration of anaesthetic or as a result of complications arising from the same ..... ☐ Yes ☐ No

If you have answered **YES** to any of the above questions, the death is reportable to the Chief Health Officer.
Information on reporting processes is found on the WA Department of Health Statutory medical notifications website:
www.health.wa.gov.au/Articles/A_E/About-statutory-medical-notifications-in-Western-Australia

5.2 Deaths reportable to the Chief Psychiatrist

The Chief Psychiatrist is to be informed of any death of a mental health patient while under the care of any mental health or other health service, and deaths that occurred within 28 days of discharge or deactivation from mental health services.

Is this a reportable death to the Chief Psychiatrist? ..... ☐ Yes ☐ No

For further information refer to the Office of the Chief Psychiatrist website:
www.chiefpsychiatrist.wa.gov.au/monitoring-reporting/notifiable-incidents/

5.3 Severity Assessment Code (SAC) 1 clinical incidents

The death may reflect the occurrence of a SAC 1 clinical incident. SAC 1 clinical incidents include all clinical incidents/ near misses where serious harm or death is or could be specifically caused by healthcare rather than the patients underlying condition or illness. For further information refer to the Clinical Incident Management (CIM) Policy:
www.health.wa.gov.au/Articles/A_E/Clinical-incident-management

Section 6: Additional hospital requirements (as determined by local policies / guidelines)

Donor coordinator notified ..... ☐ Yes ☐ No
Permission for postmortem ..... ☐ Yes ☐ No
Nursing home notified ..... ☐ Yes ☐ No
Discharge summary completed ..... ☐ Yes ☐ No
Bereavement support ..... ☐ Yes ☐ No
General Practitioner notified ..... ☐ Yes ☐ No
Next of kin notified as designated in the Hospital Medical Record ..... ☐ Yes ☐ No

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