DEATH ATTENDANCE

POLICY STATEMENT: Members of the hospice’s interdisciplinary team are available to attend patient deaths 24 hours a day, 7 days a week, in order to provide appropriate care to the patient and caregivers.

PROCEDURES:

1. The RN Case Manager, designated RN or On-call RN visits the residence of a patient when notified that the patient has, or is suspected to have, died. All deaths are attended unless a visit is actively declined by family/caregivers. The Social Worker, Chaplain, or Bereavement staff may accompany the RN as appropriate.

2. The RN assesses the patient for the absence of an apical pulse and respirations.

3. The RN determines, to the best of their knowledge, the time of death. In making this determination the RN considers:
   a. if applicable, an existing pronouncement by facility staff or other credentialed provider
   b. direct physical assessment
   c. in cases of significant travel or other delay, the dependable reporting of knowledgeable family members and caregivers

   If there is any uncertainty, the time of death is when the RN directly observes the lack of vital activity.

4. The RN communicates and documents the death and care activities according to agency standards.

5. Hospice staff members attending the death respects the cultural, religious and spiritual traditions of the patient’s family and caregivers and provides support as needed and appropriate.

6. The RN ascertains whether any anatomical donations have been planned and notifies the proper gift registry. (See policy HC.A Anatomical Gifts)

7. The hospice nurse clamps and removes all tubing that enters the body, empties all drainage bags, turns off IV pumps and oxygen. In the case where an autopsy may be required, or desired by the family, the hospice nurse ties off, cuts and secures all tubing, as appropriate, as close to the entrance of the body as possible.
8. The body is placed in as natural a position as is possible and is handled with respect and dignity. Physical care of the body (i.e. washing and dressing) is completed in accord with the family's wishes, by the hospice staff, family members or members of the patient's community as appropriate.

9. If funeral arrangements have not been made, hospice staff provides guidance and appropriate assistance. Hospice staff may not choose a funeral home or contract with the funeral home on the family's behalf. The hospice staff member notifies the selected funeral home of the patient's death, unless the family declines assistance.

10. The RN will dispose of controlled medications and any of the patient's unused prescription medications and document the disposal according to agency standard. The disposal should be witnessed by family or other caregiver. (See Policy HC.C Controlled Drug Management)

11. The RN notifies the patient's attending physician of the date and time of death. A message is left with the physician's answering service for deaths occurring after normal business hours.

12. Unless the family requests otherwise, the hospice staff member remains at the residence to provide assistance until the body has been removed and the bereaved are appropriately supported.

13. The RN notifies the pharmacy, DME providers, contract aides and other vendors or providers. If death occurs after hours, the equipment company is notified the next morning.

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