The Palliative Response
Guidelines for Pronouncement

Preparation before Death Pronouncement
Be prepared to answer pertinent questions
Nursing staff can provide wealth of information
Know recent events, family response and dynamics,
and special problems or concerns

Assess Immediate Situation
Death expected or sudden?
Family present or notified?
Attending notified?
Autopsy
   Determine family request
   Consider value of autopsy
Organ Donation
   If family requests, contact organ donation counselor
to discuss details
Faith Tradition
   Consider Pastoral Care contacts
   Honor requirements/procedures/rituals

Entering the Room
Quiet, respectful attitude
Ask nurse to accompany for introductions
Introduce yourself and role: “I am the doctor on call”
Determine relationships of persons present
Inform family of purpose; invite to them to remain
Empathize simply: “I am sorry for your loss; this is a difficult
time”

Pronouncement Procedure Clinical Examination
Check ID bracelet and pulse
Check pupils for position and response to light
Check response to tactile stimuli
   Examine respectfully: No Sternal Rubs or Nipple Pinches
Check for spontaneous respiration
Check for heart sound and pulses
Record time of death

Follow-Up
When You Are Patient’s Physician
Invite family to contact you over the next few days or
months if
   questions arise or problems occur
When You Are Physician on Call
Assure family you will report death to the attending
physician,
   whom they may contact with questions or concerns

Death Note in Chart
   ■ Date and Time
   ■ Name of provider pronouncing death
   ■ Brief statement of cause of death
   ■ Note absence of pulse, respiration, pupil
     response
   ■ Note if family present or informed
   ■ Note family response if indicated
   ■ Note notification of attending, pastoral care,
     social work or others as appropriate

Death Certificate
Locate sample Death Certificate on unit
Complete marked sections. Write neatly in black ink.
Begin again if make an error (cross-outs not allowed)

   Cause of Death - Primary and Secondary
      Example - Primary: Pneumonia
      Secondary: Advanced Alzheimer’s Dementia
   Contributing But Not Primary Section
      List other illnesses possibly linked to patient’s disability
      or
      service-connection (e.g., Agent Orange, Asbestosis)

Documentation assists family to obtain benefits
Families appreciate and respond to a respectful and kind
approach to
   this final medical act

If families should contact you later
Take time
Inquire about family members
Listen carefully
Respond empathically

Death Pronouncement is the Final Medical Act
Handle with Care