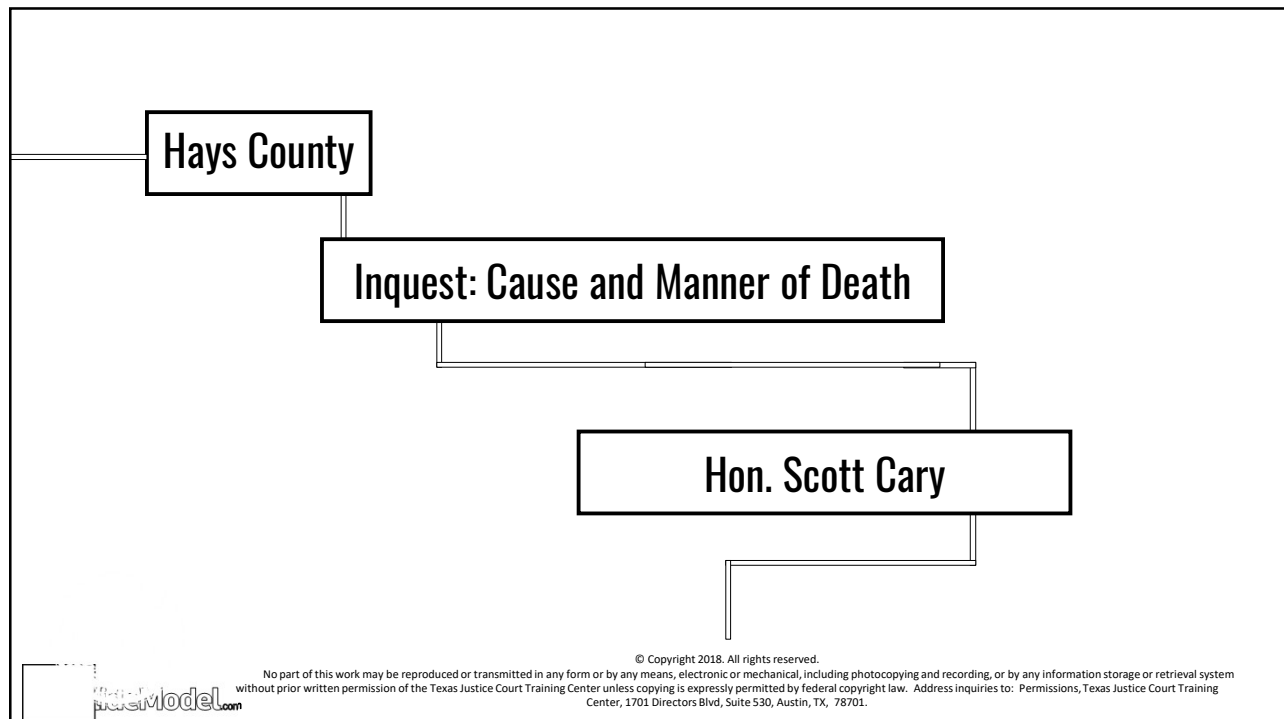


**“No greater honor will ever be bestowed on a Justice of the Peace or a more profound duty imposed on him or her than when he or she is entrusted with the investigation of the death of a human being. It is his or her duty to find the facts, regardless of color or creed, without prejudices and to let no power on earth deter him or her from documenting these facts without regard to personality ...”**

1



2

# The History

---

- Medical investigations of death have been happening from ancient Greece to ancient China.
- Over 800 years ago, England established the practice of an 'inquest' that could be ordered by the court.

## **FUN FACT**

---

There is record of a coroner's inquest in Plymouth in 1635.

3

# Why Are Inquest Performed?

---

- Legal Requirements
- Checks on Other Agencies
- To Determine What Happened
- Records Keeping Purposes
- The Voice of the Deceased

4

# When are inquests required?

- 
- Homicide/unlawful means
  - Unnatural death
  - Children under 6
  - Suicide
  - Body parts
  - Jail or prison death
  - No attending physician/physician unable to certify

5

## Subchapter B. Duties Performed By Medical Examiners: Art. 49.25. Medical Examiners

- 
- Sec. 6. DEATH INVESTIGATIONS. (a) Any medical examiner, or his duly authorized deputy, shall be authorized, and it shall be his duty, to hold inquests with or without a jury within his county, in the following cases: 1. When a person shall die within twenty-four hours after admission to a hospital;
  - The 24 hours does NOT apply to you

*There is no requirement to perform an inquest within 24 hours of admission just because a person dies at a hospital*

6

# Why do we use the death certificate and TxEver system that we do?

7

## Why Do We Use the Death Certificate That We Do?

- The certificate is similar to an international standard set in the 1940s.
- The CDC updates and reviews the US version every 10-15 years

### **FUN FACT**

Unlike laws that change, the body works the same when you cross a county or country line.

8

EDR: 00000000182 Filing Deadline: 10 Days Unresolved Work Queue Filter: --Select a value-- MEDICAL DATA ENTRY Unresolved Work Queue: PERSON, ANY, 2018/04/27

Please enter Enter the chain of events - that caused the death A

**CAUSE OF DEATH - PART I**

Enter the chain of events - diseases, injuries, or complications that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the cause. DO NOT ABBREVIATE. Enter only one cause on a line.

IMMEDIATE CAUSE (Final disease or condition resulting in death.)

a. PRIMARY IMMEDIATE CAUSE OF DEATH Approximate Interval: Onset to Death

DUE TO (or as a consequence of.) MINUTES

b. SUPPORTING CAUSE OF DEATH DAYS

DUE TO (or as a consequence of.) MONTHS

c. ADDITIONAL CONTRIBUTING CAUSES OF DEATH YEARS

DUE TO (or as a consequence of.)

d.

**CAUSE OF DEATH - PART II**

Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I:

LIST ANY SIGNIFICANT ADDITIONAL REASONS LEADING TO THE DEATH

**AUTOPSY INFORMATION**

Were Autopsy Findings Available to Complete Cause of Death: --Select a value--

**MANNER OF DEATH**

Manner Of Death: NATURAL

**DID TOBACCO USE CONTRIBUTE TO DEATH** **IF FEMALE (AGED 10-54) PREGNANT**

Tobacco use contribute to death: NO Pregnant: NOT APPLICABLE

Previous Save Next

9

## Why Is Completing the Death Certificate So Important

---

- Community health concerns
- Pensions and life insurance calculations
- Track health spending

- Track infant and maternal mortality rates
- Settling estates
- Preventing fraud
- Health research

This is a sample Text.

*The Center for Disease Control and Prevention*

10

# What are we looking for when completing the death certificate?

11

**Manner of Death**

Category of Death

(Natural, accident, suicide, homicide, and undetermined)

*Why* Someone Died

**Cause of Death**

12

## *Cause of Death*

The chain of events that  
killed someone

13

## **Part 1 (a) – (d) Death Certificate**

14

**CAUSE OF DEATH (See instructions and examples)**

32. **PART I.** Enter the chain of events—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death) a. \_\_\_\_\_  
Due to (or as a consequence of):

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the **UNDERLYING CAUSE** (disease or injury that initiated the events resulting in death) **LAST**

**PART II.** Enter other significant conditions contributing

35. DID TOBACCO USE CONTRIBUTE TO DEATH?  
 Yes  Probably  
 No  Unknown

Not pregnant within past year  
 Pregnant at time of death  
 Not pregnant, but pregnant within 42 days of death  
 Not pregnant, but pregnant 43 days to 1 year before death  
 Unknown if pregnant within the past year

Natural  Homicide  
 Accident  Pending Investigation  
 Suicide  Could not be determined

Approximate interval: Onset to death

15

# Line (a): Immediate Cause

The specific disease or condition that happened right before patient's death

---

*Examples*

This is a sample Text.  
This is a sample Text.

16



## Lines (b)-(d): The Steps That Lead to Line (a)

- *Don't have to use all lines, only MUST use (a)*
- The chain of events in reverse chronological order - It should read like a story
- Each condition listed should have caused the condition listed on the line above

17

## Tell The Story

32. **PART I.** Enter the chain of events—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death) ----->

a. \_\_\_\_\_  
Due to (or as a consequence of):

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the **UNDERLYING CAUSE** (disease or injury that initiated the events resulting in death) **LAST**

b. \_\_\_\_\_  
Due to (or as a consequence of):

c. \_\_\_\_\_  
Due to (or as a consequence of):

d. \_\_\_\_\_

*Finish*



*Start*

18

# Tell The Story : Example

32. **PART I.** Enter the chain of events--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death)

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the **UNDERLYING CAUSE** (disease or injury that initiated the events resulting in death) **LAST**

a. Has heart failure  
Due to (or as a consequence of): \_\_\_\_\_

b. The cancer spreads (metastases)  
Due to (or as a consequence of): \_\_\_\_\_

c. Decedent had breast cancer  
Due to (or as a consequence of): \_\_\_\_\_

d. \_\_\_\_\_

19

## Line (d): Underlying Cause of Death

- Might not exist in every case
- The underlying cause is NOT the result of another condition This is a sample Text.
- This is the condition that started the chain of events leading to death
  - Underlying cause drives mortality statistics for leading cause of death

*Examples*

Diabetes

Fall

Alcoholism

20

# Is this properly completed?

A. Yes

B. No

32. **PART I.** Enter the chain of events--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death) ----->

a. \_\_\_\_\_  
Due to (or as a consequence of):

Hypertension (low blood pressure)

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the **UNDERLYING CAUSE** (disease or injury that initiated the events resulting in death) **LAST**

b. \_\_\_\_\_  
Due to (or as a consequence of):

Cardiopulmonary Arrest (Heart Stops)

c. \_\_\_\_\_  
Due to (or as a consequence of):

d. \_\_\_\_\_

21

# NO!

- Low blood pressure should not be the last condition reported because something must cause it - like a heart attack from cardiovascular disease.

22

# The Way Someone Died

(Heart Failure or Respiratory Failure)

Needs to have information on the other lines explaining why the heart stopped

*World Health Organization ICD-10 Training*

23

**How can we improve death  
certificate reporting?**

24

## Theme of This Class

---

- We want to do the best and most helpful job we can filling out the death certificate.
- This is because what we choose to write has a lasting impact on research and data.
- What is wanted from us by state and national agencies is to pick the best words/descriptions and give enough information.
- It's not just us JP's. Some of the examples we're using come from education directed at doctors and medical examiners. We can all keep trying to improve.

25

## A word about physicians

---

- 80% of death certificates are signed by medical doctors
- Physicians get NO training in medical school regarding death certificates
- They do not like to complete death certificates, because:
  - They blame it on lack of staff and training
  - They do not have the time
  - They are not actually "attending" at the time of death
  - They are not at the scene of the death
- Once a person is a dead:
  - The decedent is no longer the doctor's patient!
  - Their job ends at the time of death!

26

# How Can We Improve Death Certificate Reporting?

- o Better ways to state causes of death
  - VIEWS system
- o What not to include
- o Try to be as specific as possible about a disease
  - More specific disease names
  - Include other helpful information
- o Make sure to include injury information

27

**“VIEWS” System**

**Validations and Interactive Edits Web Service**

**VIEWS Message** [x]

**Field:** Cause Of Death Line A. **Validation Type:** IllDefined

**Term:** INGESTION

**Message:**  
Ill Defined term "INGESTION" found on Line1a. Please verify entries.

Select 'Ok' to continue or 'Cancel' to correct.

Ok Cancel

28

## **“VIEWS” System**

- An online service from National Center for Health Statistics and Centers for Disease Control
- Suggest better quality data during use of electronic death registration systems
- Can call your attention to spelling errors or be suggesting to use a more descriptive term

29

## **You Can Hit “OK” Through It But...**

- ...VIEWS it is meant to make you stop and think about the word/s you are choosing
- VIEWS not telling you are ‘wrong’
- VIEWS telling you that there might be a better word to describe the events
- VIEWS telling you make sure you explain the term further

30

## The National Group That Monitors Causes of Death Pull Data By A “Search Term”

- What you are entering goes directly into a data base HOW you entered it – it only enters the terms you use

- That’s why using descriptive and specific terms is so important

Example: If they are searching the flu or specific illness, your death certificate needs to state that illness

31

## This is on the “Blue Form” of the Death Certificate

It’s Really The Same As “VIEWS”

**additional information about the etiology should be reported:**

32



## Examples From the Blue Form

---

- Some should never be used: Old age – obviously not a medical condition; sometimes people use failure to thrive – these terms should not be used anywhere on the death certificate
- Some would be great to include on part Part II (we'll talk about that in a bit)
  - Bed ridden – that is a situations that may have cause or worsened a medical condition; like getting a bedsore that gets infected and the person has sepsis
  - Anorexia or Dementia – may contribute to another medical condition& could go onto line (d)
- If you are going to say “sepsis” or “renal failure” it should only be if you are going to include WHY they happened

33

**If you are going to use a term like “cardiac arrest”, “myocardial infarct” or “respiratory arrest” ...**

- You MUST include the underlying cause in the chain of events.
- These terms are mechanisms of death and need further information.

○ A cancer patient and a drug addict might both die of a heart attack. These are very different deaths and the underlying information needs to be recorded.

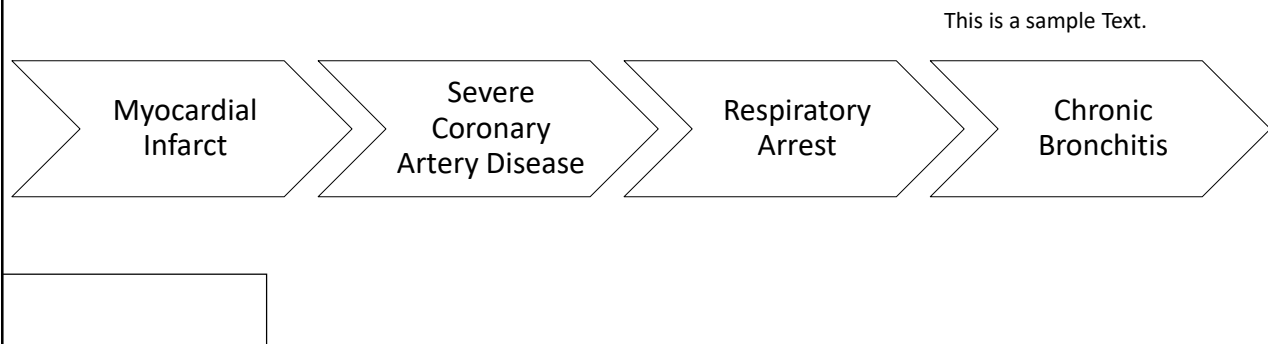
**Example**

---

34

# What Kinds of Terms Would You Need to Include?

---



35

# Try To Be As Specific As Possible

---

## ○ Cancer example:


- Instead of “cancer”
  - Or “cancer of the glands”
- Write: “Adenocarcinoma of the right upper lung with metastases to the brain”
- This let’s the data record the KIND of cancer (lung) and that it ultimately spread (metastases) to the brain

## ○ Abbreviation example:

- Instead of STD
- pneumocystis carinii pneumonia & acquired immunodeficiency syndrome (this

36

YES – You  
Need A  
Medical  
Terminology  
Resource!



[Medicinenet.com](https://www.medicinenet.com)

[CDC.gov](https://www.cdc.gov)

37

# Was There An Injury Involved?

- State if the injury was related to transportation (including role of decedent)
  - TxDOT reporting requirement!
- Report other injury information (date, time, location, work related)
- Describe how injury occurred
- Helps to effectively report disaster related deaths
- Provides valuable details about circumstances of death

38

## More Best Practices

---

1.

- Don't report multiple conditions per line

2.

- Don't continue the sequence in Part II

3.

- Don't provide a list of every single ailment

39

# Scenario

40

- A man falls from a ladder 10 feet while cleaning his windows at home
- He fractures his skull (occipital fracture)
- Where do you record the fall – Line (a), (b), or (c)?

41

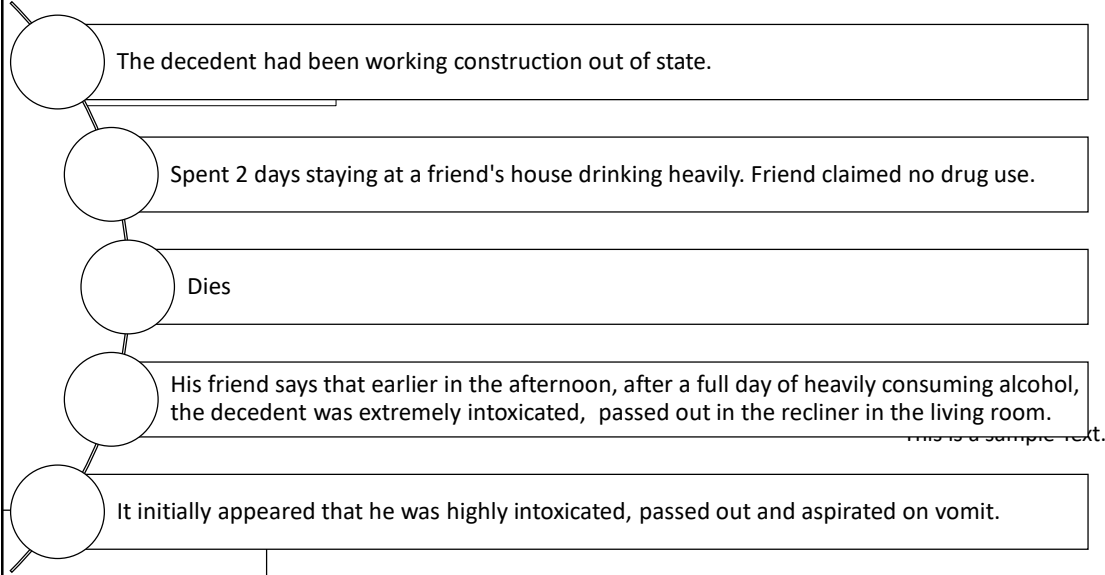
**ANSWER!**

- Part I
- (a) occipital fracture
- (b) fall 10 feet onto ground while cleaning windows at home
- Bonus points! Who wrote the proper terminology instead of skull fracture?

- A man falls from a ladder 10 feet while cleaning his windows at home
- He fractures his skull (occipital fracture)
- Where do you record the fall – Line (a), (b), or (c)?

42

# SCENARIO!



43

## Autopsy Toxicology Report Findings:

oFemoral blood concentration of:

- Ethanol= .114 g/dL
- Morphine (active metabolite of heroin) = 125 ng/mL
- Codeine (active metabolite of heroin) = 14 ng/mL
- Methadone = 471 ng/mL
- EDDP (inactive metabolite of methadone) = 34 ng/mL

oUrine drug screen positive for 6-momacetyl morphine (metabolic of heroin)

44

## Autopsy Report & Death Certificate

33. PART 1. ENTER THE <u>CHAIN OF EVENTS</u> - DISEASES, INJURIES, OR COMPLICATIONS - THAT DIRECTLY CAUSED THE DEATH. <u>DO NOT</u> ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. DO NOT ABBREVIATE. ENTER ONLY ONE CAUSE ON A EACH.		Approximate interval Onset to death
CAUSE OF DEATH  IMMEDIATE CAUSE (Final disease or condition -----> resulting in death)  Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <u>UNDERLYING CAUSE</u> (disease or injury that initiated, the events resulting in death) LAST	a. ACUTE MIXED DRUG INTOXICATION HEROIN, METHADONE AND ALCOHOL Due to (or as a consequence of):	MINUTES
	b. _____ Due to (or as a consequence of):	
	c. _____ Due to (or as a consequence of):	
	d. _____ Due to (or as a consequence of):	
PART 2. ENTER OTHER <u>SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH</u> BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART 1.  SUBSTANCE ABUSE		34. WAS AN AUTOPSY PERFORMED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		35. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**USE OF DEATH: ACUTE MIXED DRUG INTOXICATION (HEROIN, METHADONE AND ETHANOL)**

45

**What Are The Important Words To Include For Data Collection?**

46

# Scenario

47

- Women was found deceased in a lake.
- It was ruled a suicide after interviewing family who said recent events made her say she was going to drown herself in this lake.
- She was also found to have been recently evaluated and released in a mental health faculty after a crisis call.

**S  
U  
I  
C  
I  
D  
E**

48



# How To Give Good Data?

## ○ Cause?

-Drowning

## ○ Manner?

-Suicide

## ○ What can we include about the underlying mental health issues?

-Part II

## ○ Where would we include this?

-Could say: recent mental health intervention or recent mental health crisis call and evaluation

49

- Decedent was in hospice at home after a fall.
- A week later notified of death by a call from the funeral home.
- Hospice doctor won't sign

○ What would you do?

H  
O  
S  
P  
I  
C  
E

This is a sample Text

50

# Scenario

51

## Scenario

Man went into traumatic shock after being hit by a truck while crossing the road and fracturing his ribs, femur, and skull.

52

# ANSWER!

## Scenario

Man went into traumatic shock after being hit by a truck while crossing the road and fracturing his ribs, femur, and skull.

SlideModel

- (a) blunt force trauma
- (b) fracture of ribs, skull and right femur
- (c) pedestrian hit by a truck

53

# Part II Death Certificate

54

CAUSE OF DEATH (See instructions and examples)		Approximate interval: Onset to death
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p>		
<p>IMMEDIATE CAUSE (Final disease or condition resulting in death) -----&gt; a. _____</p> <p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the event in death) <b>LAST</b> resulting in death) d. _____</p>	<p><b>PART II.</b> Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I.</p>	
<p><b>PART II.</b> Enter <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I.</p>		<p>33. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p>34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>35. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown</p>	<p>36. IF FEMALE: <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year</p>	<p>37. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined</p>

55

## “Other Significant Conditions”

- Disease or condition which contributed to the death, but which was not part of the sequence in Part I.
  - Examples:
    - Obese
    - Smoker
    - Alcoholic
    - Anorexia

*This is the correct place for some of the terms from the ‘blue form’*

56

# Order and Duration of Events Death Certificate

57

CAUSE OF DEATH (See instructions and examples)		Approximate interval: Onset to death
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>—diseases, injuries, cardiac arrest, respiratory arrest, or ventricular fibrillation—that finally caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation as etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p> <p><b>IMMEDIATE CAUSE</b> (Final disease or condition resulting in death) -----&gt;</p> <p>a. _____ Due to (or as a consequence of) _____</p> <p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b></p> <p>b. _____ Due to (or as a consequence of) _____</p> <p>c. _____ Due to (or as a consequence of) _____</p> <p>d. _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>PART II.</b> Enter other significant conditions contributing to the death.</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Underlying cause given in PART I.</p>	<p>33. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>35. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown</p>	<p>36. MANNER OF DEATH</p> <p><input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year</p>	<p>37. MANNER OF DEATH</p> <p><input type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined</p>

58

## Interval Between Presumed Onset of the Condition and Time of Death (not the date of diagnosis)

- Reporting the duration or the time interval between the onset of each condition entered on the certificate and the date of death.
- 15 minutes, 5 hours, 4 days, 12 years
- Minutes, hours, days, years
- Unknown, approximately \_\_\_\_

*Example: MVA or cannot be not years for immediate cause of death*

59

# Scenario

60

- A 49 year old male was brought to the ER with an infected wound of the right foot.
- His wife reported that working in the field two week ago, he stepped on a nail. He treated the cut by himself.
- Because of reported convulsions, he was admitted to the hospital.
- The examining doctor made a diagnosis of tetanus.

This is a sample Text.

- The man died of asphyxia (body deprived of oxygen) during convulsions the day after admission.

61

# ANSWER!

Part I

- (a) Convulsions
- (b) Tetanus infection
- (c) Infected puncture wound of right foot

Part II

Stepped on nail while working in field

- A 49 year old male was brought to the ER with an infected wound of the right foot.
- His wife reported that working in the field two week ago, he stepped on a nail. He treated the cut by himself.
- Because of reported convulsions, he was admitted to the hospital.
- The examining doctor made a diagnosis of tetanus.
- The man died of asphyxia (body deprived of oxygen) during convulsions the day after admission.

62

# Disaster Related Deaths

63

## What Is A Disaster?

- “An occurrence that has resulted in property damage, deaths, and/or injuries that overwhelms the community resources”  
This is a sample text.

– Federal Emergency Management Association

*Examples*

Wildfires

Flooding

Hurricanes

64



## Why Include Disasters in a Death Certificate?

- Like other data pulled nationally or statewide, can help with funding
- Can help with other issues, like road repair
- No harm in including – but could end up helping

65

## Where To Report Disaster?

- **Part I or Part II** of the cause of death can contain Disaster type and name
  - Can include in **Part I** if it was part of the causal chains of events directly leading to death
  - Can include in **Part II** if it contributed to death, but was not part of causal chain of events listed in Part I
- **“Describe How Injury Occurred”** field can contain a clear, brief statement referencing the disaster and circumstances surrounding the death.

66

# Examples of Death Certificate Including Disaster

67

CAUSE OF DEATH (See instructions and examples)	
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p>	
<p>IMMEDIATE CAUSE (Final disease or condition resulting in death)</p>	<p>a. <b>Asphyxia</b></p> <p style="text-align: center;"><small>Due to (or as a consequence of):</small></p>
<p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b></p>	<p>b. <b>Smoke inhalation from Bastrop Wildfire</b></p> <p style="text-align: center;"><small>Due to (or as a consequence of):</small></p>
	<p>c. _____</p> <p style="text-align: center;"><small>Due to (or as a consequence of):</small></p>
	<p>d. _____</p>
<p><b>PART II.</b> Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in Part I.</p> <p><b>Asthma</b></p>	<p>WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>WERE AUTOPSY FINDINGS COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

68

CAUSE OF DEATH (See instructions and examples)		Approximate interval Onset to death
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p>		
<p>IMMEDIATE CAUSE (Final disease or condition resulting in death) -----&gt;</p>	<p>a. <b>Acute or exacerbated chronic kidney failure</b> Due to (or as a consequence of):</p>	.....
<p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b></p>	<p>b. <b>Type II Diabetes</b> Due to (or as a consequence of):</p>	.....
	<p>c. _____ Due to (or as a consequence of):</p>	.....
	<p>d. _____ Due to (or as a consequence of):</p>	.....
<p><b>PART II.</b> Enter other <u>significant conditions</u> contributing to death but not resulting in the underlying cause given in PART I</p>		<p>TEST PERFORMED? <input type="checkbox"/> No</p> <p>BY FINDINGS AVAILABLE TO CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Unable to receive dialysis for 6 days due to Hurricane Maria related power outage at local treatment center.</b></p>		
<p><input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Unknown</p> <p><input type="checkbox"/> Not pregnant within _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____</p>		<p>37. <b>MANNER OF DEATH</b></p> <p><input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide</p> <p><input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation</p> <p><input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined</p>

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CAUSE OF DEATH (See instructions and examples)		Approximate interval Onset to death
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p>		
<p>IMMEDIATE CAUSE (Final disease or condition resulting in death) -----&gt;</p>	<p>a. <b>Strangulation due to hanging</b> Due to (or as a consequence of):</p>	.....
<p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b></p>	<p>b. _____ Due to (or as a consequence of):</p>	.....
	<p>c. _____ Due to (or as a consequence of):</p>	.....
	<p>d. _____ Due to (or as a consequence of):</p>	.....
<p><b>PART II.</b> Enter other <u>significant conditions</u> contributing to death but not resulting in the underlying cause given in PART I</p>		<p>TEST PERFORMED? <input type="checkbox"/> No</p> <p>BY FINDINGS AVAILABLE TO CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Unable to obtain antipsychotic medication after evacuating for Hurricane Katrina</b></p>		
<p><input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Unknown</p> <p><input type="checkbox"/> Not pregnant within _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____</p>		<p>37. <b>MANNER OF DEATH</b></p> <p><input type="checkbox"/> Natural <input type="checkbox"/> Homicide</p> <p><input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation</p> <p><input checked="" type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined</p>

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CAUSE OF DEATH (See instructions and examples)		Approximate interval: Onset to death
<p>32. <b>PART I.</b> Enter the <u>chain of events</u>—diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.</p>		
<p>IMMEDIATE CAUSE (Final disease or condition resulting in death) -----&gt;</p>	<p>a. <b>Myocardial Infarction</b> Due to (or as a consequence of):</p>	.....
<p>Sequentially list conditions, if any, leading to the cause listed on line a. Enter the <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b></p>	<p>b. <b>Atherosclerosis</b> Due to (or as a consequence of):</p>	.....
	<p>c. _____ Due to (or as a consequence of):</p>	.....
	<p>d. _____ Due to (or as a consequence of):</p>	.....
<p><b>PART II.</b> Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I</p>		<p>Not resuscitated? <input type="checkbox"/> No</p>
<p><b>EMS unable to respond to 911 call due to flooded roads after Hurricane Matthew</b></p>		<p>BY FINDINGS AVAILABLE TO CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p><b>37. MANNER OF DEATH</b></p>
<p><input type="checkbox"/> Not pregnant within</p>		<p><input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide</p>
<p><input type="checkbox"/> Not pregnant within</p>		<p><input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation</p>
<p><input type="checkbox"/> Not pregnant within</p>		<p><input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined</p>

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# Scenario

A 28-year old male died when a tree fell on him during Hurricane Sandy. He suffered multiple trauma, including a fractured skull causing cerebral contusion. Emergency medical service and police reports indicated he thought the hurricane had passed and was walking his dogs.

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# ANSWER!

- (a) Cerebral contusion (bleeding in the brain)
  - (b) Fractured Skull
  - (c) Blunt impact to head
- 
- Other significant conditions: N/A
  - Injury Info: Decedent was struck by a falling tree during Hurricane Sandy

## Scenario

A 28-year old male died when a tree fell on him during Hurricane Sandy. He suffered multiple trauma, including a fractured skull causing cerebral contusion. Emergency medical service and police reports indicated he thought the hurricane had passed and was walking his dogs.

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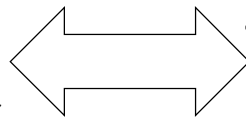
**Let's Look At Another Example  
of Disaster Reporting**

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# Example: Flood

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On Memorial Day 2015, a 24-year-old male drowned when attempting to walk across a bridge to get to his house.




- Part I (a) Drowning
- Part II: Decedent drowned in a river when attempting to cross a bridge during the Memorial Day Floods

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COVID-19  
CDC webinar information

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## Identifying Deaths Due to COVID-19

- If COVID-19 is determined to be a cause of death, it should be reported on the death certificate, likely as the underlying cause of death.
  - Testing should be conducted, if possible.
  - If a definitive diagnosis cannot be made, but it is suspected or likely, it can be reported as “probable” or “presumed.”
- Generally, it is best to avoid abbreviations and acronyms, but COVID-19 is unambiguous, so it is OK to report it.
- Pre-existing conditions that may increase susceptibility to infection or exacerbate the disease, such as COPD or asthma, should be reported in Part II.




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## General Guidelines

- Use any information available to you, such as:
  - Medical history,
  - Medical records,
  - Laboratory tests,
  - Autopsy report, and
  - Other relevant sources of information.
- Use your **best medical opinion** regarding the causes and circumstances of death.



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# Resources

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The screenshot shows the Texas Department of State Health Services website. At the top, three navigation arrows point right, labeled "Home", "Vital Statistics", and "Medical Certifier Resources". Below the arrows is the website header with the logo and navigation menu. The main content area is titled "Medical Certifier Resources" and features a photo of three medical certifiers. Below the photo, there are two main sections: "HANDBOOKS" and "STATUTES AND CODES". Under "HANDBOOKS", there are three buttons: "Physicians (NCHS)", "Mys/Coroners (NCHS)", and "Handbook on Fetal Death Registration". Under "STATUTES AND CODES", there is one button: "Death Registration". A white arrow points to the "Death Registration" button. To the right of the main content area, the text "ATH" is visible. In the bottom right corner, there is a rounded rectangle containing the text "Vital Statistics Handbook".


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**CDC Resources**

- **COVID-19**  
<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- **COVID-19 Testing Guidance**  
<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>  
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html>
- **NVSS COVID-19 Alerts and Information**  
<https://www.cdc.gov/nchs/nvss/covid-19.htm>
- **Provisional Death Counts for COVID-19**  
<https://www.cdc.gov/nchs/nvss/vsrr/COVID19/>
- **FluView**  
<https://www.cdc.gov/flu/weekly/index.htm>
- **Cause of Death Mobile App**  
<https://itunes.apple.com/us/app/cause-of-death-reference-guide/id1363232296?mt=8>  
<https://play.google.com/store/apps/details?id=gov.cdc.iu.anubis>
- **Improving Cause of Death Reporting Online Training Module (Free CMEs and CNEs)**  
[https://www.cdc.gov/nchs/nvss/improving\\_cause\\_of\\_death\\_reporting.htm](https://www.cdc.gov/nchs/nvss/improving_cause_of_death_reporting.htm)



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Thank you!

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