

	CLEARFIELD COUNTY EMERGENCY MANAGEMENT / 9-1-1 Standard Operating Procedures	Initial: 6/2006
	SOP #: EMS 6-25	
	Subject: Obvious Expected Death	Revised:

MEDICAL PRIORITY DISPATCH OBVIOUS/EXPECTED DEATH

EMDs will handle obvious death and expected death cases by following the MPDS protocol and local procedures approved by the system Medical Director.

- **OBVIOUS DEATH DEFINITION**

- For dispatch purposes 'Obvious Death' is defined as a patient's condition that can be identified as incompatible with life, after all information has been obtained on the Case Entry protocol, and protocol 9 (Cardiac or Respiratory Arrest/Death). Resuscitative measures including PAIs for breaths and chest compressions will not be provided in any 'Obvious Death' and 'Expected Death' situation.
- Once the EMD determines the patient to be *not conscious* and *not breathing*, through proper application of the MPDS, the following conditions may be considered by the dispatcher to constitute 'Obvious Death':
 - 1) Cold and Stiff in a warm environment
 - 2) Decapitation
 - 3) Explosive gunshot wound to the head
 - 4) Decomposition
 - 5) Non-recent death (*confirmed* as being greater than six hours)
 - 6) Severe injuries obviously incompatible with life
 - 7) Incineration
 - 8) Submersion (*confirmed* as being greater than 24 hours)

The dispatcher must be sure that the presence of at least one of the above conditions is unquestionable. The EMD must get specific answers to all applicable questions on protocol card 9 to arrive at an 'obvious death' determination.

- Once the EMD determines the patient to be *not conscious* and *not breathing*, through proper application of the MPDS, the following conditions may be considered by the dispatcher to constitute 'Expected Death':
 - 1) Terminal Illness
 - 2) DNR Order

The EMD must get specific answers to all applicable questions on protocol card 9 to arrive at an 'expected death' determination.

- EMD Actions in the Event of Identification of Unquestionable Obvious Death or Expected death

- Code all obvious death cases as 9-B-1, and inform responders of specific obvious death condition determined.
- Code all expected death cases as 9-Omega-1.
- Do not provide PAIs.
- If possible, keep the caller on the line and provide emotional support.

- CASES REQUIRING PRE-ARRIVAL INSTRUCTIONS
 - EMDs shall attempt pre-arrival instructions on all cardiac/respiratory arrest cases where the obvious death and expected death determinants (9-B-1 and 9-Omega-1) are not applied.
 - When pre-arrival instructions are required (as defined above), EMDs are not to ask permission to give PAIs. *Do not say “Would you like me to tell you how to do CPR?”*
 - If the caller refuses to follow PAIs, say, **“The ambulance is on its way, but this is important to give the patient the best possible chance until it arrives.”** *Repeat as necessary.*
 - If the caller stills refuses to administer aid, ask if there is someone else you can speak to.
 - If no one else is available attempt to keep the caller on the line and provide emotional support. Make it clear that if they change their mind about providing patient care you will tell them exactly what to do.
 - Remain polite and courteous at all times.

Medical Director Approval:

Dr. Tabitha Jeffers MD Medical Director

Date