Loudoun County Emergency Medical Services Advisory Council, Inc.
General Directive # 4

Death Determination

Origin: 09/93
Revision: 03/10

Death Determination

1. ALS and BLS providers may be required to determine "presumptive death" when deciding whether to initiate resuscitative efforts or not. The following circumstances, coupled with the assessed absence of pulse and respirations, will serve as guidelines for determination of death in the field by the ALS/BLS provider:
   A. Decomposition.
   B. Lividity or dependent pooling of blood.
   C. Rigor Mortis.
   D. Drowning victim when it is reasonably determined that submersion has been greater than one hour. (except in cases of hypothermia).
   E. Obvious mortal injury that is inconsistent with life e.g. Decapitation, massive crush injury, or penetrating/blunt injury with evisceration of the heart, lung, or brain.
   F. The patient has a valid Durable Do Not Resuscitate (DNR) order in accordance with Virginia state law.

2. For patients in cardiac arrest lacking any of the above mentioned signs and symptoms, the EMT I/P may determine death if a blunt trauma (not penetrating trauma) patient is found to be pulseless, apneic and without organized EKG activity.

3. For patients in cardiac arrest from any cause who remain pulseless despite 20 minutes of continuous EMS CPR without any return of spontaneous circulation and without any shocks indicated/delivered by the AED/Defibrillator, the EMT I/P shall consult with the appropriate ILH medical control physician to discuss termination of resuscitative efforts.

4. In the following situations, resuscitation efforts should generally be initiated:
   A. Electrocutions
   B. Hypothermia or cold water drowning
   C. Obviously pregnant female patient

5. Once death is determined, Loudoun County Dispatch must be notified and EMS personnel must stay on the scene to preserve potential evidence until relieved by Law Enforcement personnel.

6. If any invasive procedures have been performed, the Medical Control Physician must be contacted prior to termination of efforts and the body shall be transported if possible.

7. Common sense and good judgment shall be used in applying the above guidelines. A complete assessment must be documented on the Loudoun County EMS Incident Report Form. Such documentation shall include detailed documentation of findings and decision-making.

8. The decision to initiate CPR and other resuscitative efforts lies with the presumption that the patient is still viable. The accepted medical standard assumes that when the possibility exists that the patient remains viable, and there are no other compelling medical or legal reasons (such as DNR) to act otherwise, resuscitation should be immediately initiated. If there is ever any question as to whether to resuscitate or not, CPR should be initiated and Medical Control immediately contacted for further orders.

9. Handling the deceased will be in accordance with law enforcement requirements.

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