



PRINCE GEORGE'S COUNTY, MARYLAND
FIRE/EMERGENCY MEDICAL SERVICES DEPARTMENT GENERAL ORDER

General Order Number: 05-14	Effective Date: January 2010
Division: Emergency Medical	
Chapter: Transportation and Disposition of Deceased Persons	
By Order of the Fire Chief: Marc S. Bashoor	Revision Date: N/A

POLICY

This General Order defines the Fire/EMS Department's roles and responsibilities related to the transportation and disposition of deceased persons.

Deceased persons create the necessity for interagency cooperation, interaction, and communication. Fire/EMS Department personnel are frequently the first public safety units on the scene of a death, and therefore have the responsibility to pass along vital information to, and communicate with, partner agencies.

There is an expectation, from the community and partner agencies, that Fire/EMS Department units will respond to the scene of a deceased person to ensure that the person in fact does not require any emergency services, resuscitation, or transportation.

Fire/EMS Department personnel have the responsibility to gather and document medical and historical information pertaining to the deceased person, follow applicable Maryland Medical Protocols for Emergency Medical Services Providers (the "Protocols") and directives from the Jurisdictional Medical Director, and complete an ePCR to properly document this information, findings, and events of the call for service.

For suspicious deaths and crime scenes, Fire/EMS Department personnel have the responsibility to be mindful of the need to preserve and avoid disturbance of potential evidence.

It is the policy of the Department that Fire/EMS personnel will make proper notification of a deceased person, note the time that death was determined, and remain at the scene until the arrival of a law enforcement or Office of the Chief Medical Examiner (OCME) official.

Personnel are reminded that protected and private health information shall be released to law enforcement and medical examiner officials, pursuant to their lawful authority to investigate the cause and manner of deaths.

Fire/EMS Department units may transport deceased persons in certain situations. These include those specifically described within the Protocols in conjunction with requests by law enforcement agencies or officials from the Office of the Chief Medical Examiner (OCME).

DEFINITIONS

Deceased Person – Refers to the body and/or remains of the deceased individual. The individual is no longer a patient because emergency medical care and treatment is no longer required or warranted.



EMRC – Emergency Medical Resource Center – The EMRC medical radio communications system linking EMS providers in the field with hospital-based physician medical consultation.

ePCR – Electronic Patient Care Report – The jurisdictionally-approved reporting tool for documenting the EMS call and patient information and treatment, in accordance with the Code of Maryland Regulations (COMAR) and the Protocols.

PSC – Public Safety Communications -Prince George's County Public Safety Communications Center (PSC) is the Public Safety Answering Point (PSAP) for Prince Georges County. All 911 calls in Prince Georges County are routed to the center for dispatching of proper emergency personnel for Police, Fire and EMS.

OCME – Office of the Chief Medical Examiner – The State Agency vested by Maryland Code with the authority to investigate and determine the cause and manner of human deaths in the State.

PROCEDURES / RESPONSIBILITIES

1. Protocol: Presumed Dead on Arrival

Persons are Presumed Dead on Arrival when the initial assessment described in the Protocols indicates that resuscitation efforts should not be initiated (please consult the Protocols for a detailed explanation of this determination). The following procedures should be followed by Fire/EMS Department personnel in these circumstances:

- Generally, the deceased person should not be moved or disturbed, except as minimally necessary to **conduct an assessment**, make a determination, and perform the necessary actions in accordance with the Protocols. For example, the Maryland Medical Protocols direct that all resuscitative efforts should be made for infant patients and they should be transported to a healthcare facility even when prognosis is poor. Extreme care shall be taken in order not to unnecessarily disturb any evidence at the scene, which if improperly handled or disturbed, could hinder an investigation. For example, clothing and other property shall remain undisturbed. If a crime scene is involved, the decision to allow personnel to enter the established crime scene after patient care has concluded, or after death is determined, rests with the law enforcement incident commander. Only in rare circumstances, such as to protect the body of the deceased person from an unsafe scene, should the deceased person be moved from the immediate scene.
- Make immediate **notification** to PSC, advising a “Priority 4.” The time of this notification shall be recorded within the ePCR, and will be used by law enforcement and OCME officials as the time that death was ascertained and determined.
- Request the response of the appropriate **law enforcement agency**.



- **Gather necessary information** from persons at the scene, including history and data regarding the deceased person, for the purposes of completing an **ePCR** and to provide a full report to the responding law enforcement agency representative.
- **Remain at the scene** until the arrival of the appropriate law enforcement agency representative to provide details such as: the time death was determined, information obtained from persons at the scene, conditions and circumstances noted by personnel upon arrival, and the personnel's Unit and ID numbers.

When resuscitation efforts have been initiated by any layperson or other EMS provider, they shall not be terminated in the field without executing the appropriate protocol described below and in the Protocols.

2. Protocol: Physician-Directed Termination of Unsuccessful, Non-Traumatic Field Resuscitation

If this Protocol is executed when the patient has **not** been moved from the scene to a Fire/EMS Department unit, personnel should:

- Make immediate **notification** to PSC, advising a "Priority 4." The time of this notification shall be recorded in the ePCR, as it will be used by law enforcement and OCME officials as the time that death was ascertained and determined.
- Request the response of the appropriate **law enforcement agency**.

Note: Extreme care shall be taken in order not to disturb any evidence, which if improperly handled or disturbed, could hinder an investigation. If a crime scene is involved, the decision to enter the established crime scene after patient care has concluded lies with the law enforcement incident commander. For these situations, clothing and other property shall remain undisturbed.

- **Remain at the scene** until the arrival of the appropriate law enforcement agency representative to provide details such as: the time death was determined, information obtained from persons at the scene, and conditions and circumstances noted by personnel upon their arrival.

If this protocol is executed **after the patient has been removed from the scene** to a Fire/EMS Department unit, the deceased person **is to be transported to the hospital where medical consultation was received** (the base station facility where the physician ordered the termination of resuscitative efforts). This situation must be clearly described to the consulting physician, who after giving the order to terminate the resuscitation, should be told that the deceased person will be transported to **their facility** in accordance with this Order. Generally, the deceased person should not be placed back into a home or scene after they have been removed by Fire/EMS Department personnel; this should only occur in rare circumstances and described thoroughly in the ePCR.



Also, the deceased person should be transported with care to avoid further disturbance of any evidence.

3. Inter-Agency Assistance and Cooperation

Inquiries by the appropriate law enforcement agency and officials from OCME are authorized investigations and therefore personnel should provide any needed information and disclosures regarding the incident and the patient to assist them with their duties. Additionally, personnel should make every reasonable effort to assist these other agencies on the scene upon request, for example, with removal of the body, extrication, etc.

The appropriate law enforcement agency and OCME are responsible for the investigation of all deaths and for arranging of transportation of deceased patients to an appropriate destination (such as a funeral home, Anatomy Board, or the Office of OCME). See below when these agencies request transportation by the Fire/EMS Unit.

4. Transportation of Deceased Persons upon Law Enforcement and/or OCME Request

A law enforcement agency or OCME official may request that the Fire/EMS Department transport a deceased person. Fire/EMS Department personnel should cooperate with such a request if the continued presence of the deceased person's body or remains:

- Creates further harm to the public by its graphic or gruesome nature, or
- Continues to jeopardize public safety, such as creating a traffic hazard), and
- No other timely alternative exists.

These circumstances justify the use of a BLS transport unit to remove the body and remains.

Transport of deceased persons by Fire/EMS Department units, in situations other than those above, must be authorized by the EMS Duty Officer (EMS801).

5. General Guidelines for Transportation of Deceased Persons

In all cases where Fire/EMS personnel transport a deceased person, extreme care shall be taken in order not to disturb any evidence, which if improperly handled or disturbed, could hinder an investigation. For example, clothing and other property shall remain undisturbed. If death has already been determined pursuant to the Protocols, no patient care is warranted, and transportation of the deceased person is likely only for the purposes of assisting law enforcement and/or OCME officials.

Notification

Any transport of a deceased person requires communication with the receiving healthcare facility through EMRC.



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Public Safety Communications shall also be notified of the deceased person's transport. PSC will notify the EMS Duty Officer (EMS801).

Transportation

Any transport of a deceased person will be a non-emergency transport by a BLS transport unit.

Authorization

Fire/EMS Department personnel shall remove deceased persons only when authorized to do so by the law enforcement incident commander on the scene and/or by an OCME official. If a law enforcement officer and/or OCME official is not on the scene, Fire/EMS Department personnel shall request one and await their arrival. Authorization by law enforcement must be made in a timely manner, or the Fire/EMS Department unit shall return to service.

Transfer of Care/Custody

The patient will be transferred to the receiving facility:

- The deceased patient remains in the unit upon arrival at the healthcare facility until transfer arrangements are made with the charge nurse in the Emergency Department.
- The patient will be registered through the Emergency Department
- Fire/EMS personnel will transfer the patient with ED Staff directly to the morgue.

Documentation

A complete electronic patient care report (ePCR) will be completed for the patient and a paper copy left with the emergency department personnel / receiving facility.

REFERENCES

Maryland Medical Protocols for EMS Providers

Interagency Interaction

Law Enforcement

OCME

Hospitals/Healthcare Facilities

FORMS / ATTACHMENTS

N/A