



Division 05

Emergency Medical

Chapter 14– Transportation of Deceased Patients

February 2009

POLICY

This General Order defines the Fire/EMS Department’s roles and responsibilities related to the transportation of deceased patients.

DEFINITIONS

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

OCME – Office of the Chief Medical Examiner

Deceased patient - The body and/or remains of a deceased individual

PROCEDURES

1. General Provisions

Fire/EMS Department units may transport deceased patients in certain situations. These include those specifically described within the Maryland Medical Protocols for Emergency Medical Services Providers (the “Protocols”) and requests by law enforcement agencies or the Office of the Chief Medical Examiner (“OCME”).

2. Protocol - Presumed Dead on Arrival

Patients are Presumed Dead on Arrival when the initial assessment described in the Protocols indicates that resuscitation efforts should not be initiated. When resuscitation

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

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

If this protocol is executed after the patient has been removed from the scene to a Fire/EMS Department unit, the patient is to be transported to the hospital where medical consultation was received. This situation must be clearly described to the consulting physician. Patients shall not be returned to a home or scene after they have been removed by Fire/EMS Department personnel unless specifically requested to do so by the family on the scene.

4. Law Enforcement and/or OCME Request

The appropriate law enforcement agency is responsible for the investigation of all deaths and for arranging of transportation of deceased patients to an appropriate facility.

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. Extreme care shall be taken in order not to disturb any evidence, clothing, or other property, which if improperly handled or disturbed, could hinder an investigation.

A law enforcement agency or OCME official may request that the Fire/EMS Department transport a deceased patient. Fire/EMS



Department personnel should cooperate with such a request if the continued presence of the deceased patient'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 Unit to remove the body and remains.

Transport of deceased patients by Fire/EMS Department units, in situations other than those above, must be authorized by the on-duty EMS Shift Commander (EMS801).

A paper copy of the electronic patient care report (ePCR) **must** be left with the receiving facility. Documentation shall include information as to where the deceased patient was transported from, the law enforcement agency involved and the official authorizing the removal of the body (where applicable), name and hospital affiliation of the consulting physician (where applicable), and the circumstances involved with the transport of the deceased patient.

5. Notification

Any transport of a deceased patient requires communication with the receiving healthcare facility through EMRC. It should be noted that some healthcare facilities do not have storage facilities for deceased patients.

Public Safety Communications shall also be notified of the deceased patient transport. PSC will notify the EMS Shift Commander.

6. Transportation

Any transport of a deceased patient will be performed as non-emergency transport by a Basic Life Support unit.

7. Authorization

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

8. 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

- Interagency Interaction
 - Law Enforcement
 - OCME
 - Hospitals/Healthcare Facilities



FORMS/ATTACHMENTS

N/A