



MIAMI-DADE COUNTY
MEDICAL EXAMINER DEPARTMENT
Number One on Bob Hope Road
(1851 N.W. 10th Avenue)
Miami, FL 33136
Phone (305) 545-2400

Attention: Primary or Attending Physicians/Hospital Administrators

Chapter 406.11 of the Florida Statutes (see website: www.flsenate.gov/statutes) requires certain deaths to be brought to the attention of the Medical Examiner. For the most part, these include violent deaths, trauma cases, burns, and deaths occurring suddenly while the patient is in apparent good health. In a hospital setting, however, there is sometimes confusion regarding certain deaths. We have found some categories particularly difficult to assess and offer the following guidelines for both the administrative and medical staff.

PHYSICIAN'S RESPONSIBILITY IN DEATH CERTIFICATION

Primary or attending physicians can certify only non-Medical Examiner, natural death cases.

All deaths in Florida are now recorded and filed online through the Electronic Death Registration System (EDRS) at the Florida Department of Health:

Website: http://www.doh.state.fl.us/Planning_eval/Vital_Statistics/EDRS/index.html

According to Florida Statute 382.008(3), as of July 1, 2013, all records on natural cases must be filed by the decedent's primary or attending physician. This is the physician who treated the decedent through examination, medical advice, or medication during the **12 months** preceding the date of death.

Website: http://www.floridahealth.gov/certificates/certificates/EDRS_documents/DH150-849MD_brochure.pdf

Miami-Dade County will charge an administrative fee of \$770.00 to a primary or attending physician refusing to certify a natural death falling under Florida Statute 382.008(3), thereby requiring the medical examiner to bring the case in for proper certification. A fee of \$220.00 will be charged if the medical examiner must amend a natural death record filed by an attending physician.

The primary or attending physician shall list the cause of death in the following manner:

The Cause of Death is the disease that initiates the lethal chain of events, however brief or prolonged. In law, this is the "proximate cause." For vital statistics ICD-10 coding purposes, the cause of death is what should be coded. The mechanism of death must be considered only as a fatal complication of the underlying disease.

In other words, the **Mechanism of Death** is the physiologic disturbance that is incompatible with life which was the result of the underlying disease. Examples are "bronchopneumonia," "hemorrhage," "embolism," "cardiorespiratory arrest" or "renal failure," etc. It must be due to an underlying cause, **which must be listed on the death certificate.**

If the attending physician has properly completed the certificate online and the cause of death is not of the type to be reported to the Medical Examiner, EDRS will notify the family's funeral director. Otherwise, the Medical Examiner **will be notified**. Additional death certification information can also be found on the National Center for Health Statistics (see website: www.cdc.gov/nchs).

PHYSICIAN RESPONSIBILITY FOR DEATH REPORTING

Deaths falling within the categories outlined in Florida Statute 406.11 **must** be reported to the Medical Examiner at (305) 545-2400. This telephone number is answered 24 hours a day, seven days a week, including holidays. After normal business hours (5:00 p.m.), the telephone number is answered by Miami-Dade police dispatchers who will assist you in contacting our Forensic Evidence Recovery Technicians (FERT). Our FERT can put you in contact with the on-call medical examiner if necessary.

In deciding whether or not a case falls within the categories outlined in Florida Statute 406.11, one must also consider the background (including medical history) of the deceased, the age of the deceased, words to be used in the cause of death, the length of treatment by the doctor, the potential indication of trauma or injury, and finally, what will happen to the remains of the deceased after the funeral, i.e. disposition of the body. In each of these considerations, there may be a reason that requires you to report the death.

Background:

The background of the deceased is important. A person whose death might engender financial, political, or social gain to another should be looked at closely. Any question or suspicion on your part should cause you to report the case.

Age:

A young person's death is unusual unless there is a serious pre-existing natural disease. Oftentimes, young people die from a non-natural cause that requires reporting to the Medical Examiner. These cases should be considered with care.

Words:

The following is a list of words used by doctors which should signal that the death might come under the jurisdiction of the Medical Examiner. Some common mechanisms of death have been capitalized and made bold for emphasis.

1. Asbestosis
2. **ASPIRATION**
3. **CARDIOPULMONARY ARREST**, not specified
4. Cervical or Head Trauma
5. **COMA**, not specified
6. Encephalitis
7. **EPIDURAL**
8. **GANGRENE**
9. **HEMOTHORAX**
10. Intoxication or Overdose
11. Injury, chemical or physical
12. Mesothelioma
13. **PARAPLEGIA/QUADRIPLEGIA**
14. **PERITONITIS**
15. **PULMONARY EMBOLUS**
16. **SEIZURE**
17. **SEPTICEMIA or SEPSIS**, not specified
18. **SHOCK**, not specified
19. Silicosis
20. **SUBDURAL**
21. Sunstroke
22. Tetanus
23. **SUBARACHNOID HEMORRHAGE**
24. **FRACTURE**
25. **INTRACRANIAL HEMORRHAGE**
26. **BRONCHOPNEUMONIA**, not specified
27. **HEPATIC OR RENAL FAILURE**, not specified

Other terms which could raise a suspicion of trauma, accident, exposure to noxious chemicals or fumes, or disease resulting from occupational exposure require that the death be reported to the Medical Examiner.

The 24-Hour Rule: No such rule exists in the State of Florida. A person who dies from known heart disease within 24 hours of their hospital admission is generally not a Medical Examiner case. Conversely, if a **trauma patient** survives more than 24 hours in a hospital, it is a Medical Examiner case and **must be reported**. A death occurring after prolonged hospitalization will continue to be a Medical Examiner case if the initial admission was due to injury, criminal action, accident, drug overdose, drowning, or other unnatural processes.

Fracture Cases: Falls resulting in ultimately fatal hip fractures **must** be reported to the Medical Examiner. Since the vast majority of these cases have underlying disease processes which precipitate a fracture of an osteoporotic hip, Medical Examiner involvement is generally one of recording the appropriate data. Fractures at other sites which may have contributed to the death of an individual require more direct investigation by the Medical Examiner Department in order to assess civil or criminal culpability.

Occupation-Related Deaths: Besides injuries, deaths resulting from industrial hazards must be reported. These would include such things as benzene or radiation-induced leukemia, pneumoconiosis (**asbestosis**), and solvent-induced hepatic failure.

Public Health Interest: Any death in which there may be a threat to public health comes under Medical Examiner jurisdiction. This is generally restricted to deaths where an infectious disease of a highly contagious nature is suspected but NOT YET confirmed. In general, if the Miami-Dade County Health Department is concerned about the case, so is the Medical Examiner Department. An A.I.D.S. case may or may not be accepted by the Medical Examiner depending upon the level of documentation of the disease and circumstances of the death.

Child Abuse or Abuse of the Elderly: The State Attorney, the Department of Children and Families, and the Medical Examiner are concerned about alleged child and elder abuse. Such deaths must be reported to the Medical Examiner.

Inmate Deaths: **All** inmate deaths **must** be reported to and investigated by the Medical Examiner by State Statute, regardless of the suspected cause of death.

DOA and Emergency Room Deaths: If the patient has a medically treated, well-documented disease process, and the death appears to be the consequence of that disease, there is no need to notify the Medical Examiner or the police. The attending private physician may sign the death certificate, and occasionally the **emergency room physician**. The body may be stored at the hospital morgue until arrangements for final disposition are made by the next of kin. If the next of kin cannot be located or the deceased has no family, final disposition can be made through the Miami-Dade County Indigent Cremation Services at (305) 545-2422, Ms. Sandra Witty-Fortunato, Supervisor. If there is no documented history of disease, or a reasonable diagnosis cannot be established, the police should be notified. The police in turn will notify the Medical Examiner. Deaths On Arrival (DOA) should be referred to the Medical Examiner.

O.R., Anesthesia, and Medical Therapy-related Deaths: The determinant of this circumstance is whether the death was sudden and unexpected, coupled with the degree of risk of the procedure or treatment. Thus, a woman who dies during the course of a D&C should be reported. Deaths occurring during non-elective, high-risk open heart surgery would probably not have to be reported if the death was due to the reasonable and foreseeable consequence of the disease. On the other hand, a case of the wrong transfusion, surgery upon the wrong patient, and so forth, is not reasonable and foreseeable and should be reported. When in doubt, consult with the Medical Examiner.

Autopsy Permission: **DO NOT** request permission from the next-of-kin for an autopsy when a case is to be referred to the Medical Examiner. Also, do not assume that a case referred to the Medical Examiner will necessarily be autopsied. This decision is left to the discretion of the Medical Examiner and is based on the circumstances of a particular case. If the attending physician has an interest in a specific autopsy result, that interest should be communicated to the Medical Examiner without delay prior to the autopsy. If the death occurs in the evening, the examination will usually be performed the following morning. The Medical Examiner Department routinely sends a copy of the autopsy protocol to the medical records office of the referring institution.

Preparation for Transport: The Medical Examiner Department requests that hospitals and paramedics leave in place all medical interventions. Please do not remove any bandages, chest tubes, catheters, artificial airways, or any other therapeutic devices or medications.

WHEN IN DOUBT: When in doubt, please call the Medical Examiner Department (305) 545-2400. All inquiries should first be referred to the Investigation Section or the FERT and they, in turn, will contact the on-call Medical Examiner. The office is staffed from 7:00 A.M. to 5:00 P.M., seven days a week, including holidays.

URGENT OR UNUSUAL CIRCUMSTANCES OR CONCERNS: If there are urgent or unusual circumstances or concerns not covered in the preceding pages, please notify Dr. Kenneth Hutchins (Chief Medical Examiner), Sandra Boyd (Director of Operations), or Sandra Witty (Interim Investigations Supervisor) at (305) 545-2400.

YOUR LEGAL DUTY: Florida Statutes mandate that medical personnel must not willingly violate the law. It is a misdemeanor of the first degree to knowingly fail or refuse to report such death and circumstances or to refuse to make available prior medical or other information pertinent to the death investigation. In addition, bodies that have been prematurely released to families/funeral homes may have to be disinterred if the cause of death comes under Medical Examiner jurisdiction. In such cases, **the legal and other related expenses may be passed on to the hospital, nursing home, or physician for payment.** A very careful review of the medical record and the cause of death is the first step to avoiding such problems.

Physicians must also be aware that violations of Chapter 406 of the Florida Statutes may result in disciplinary action by the Board of Medicine of the Department of Business and Professional Regulation.

REVISED: 3/22/2023
U:Hosp. Admin