### Medical Examiner (ME) referral from outside UHL: Summary of process

- 1. Death is confirmed by a person who, in the opinion of the relevant GP, is appropriate; preferably a doctor or a nurse.
- 2. A doctor who has attended the deceased within 28 days before death is identified and informed.
- 3. That attending doctor (OR an appropriate member of practice staff in consultation with that doctor) completes the ME referral form.
- 4. The form is emailed to the Medical Examiners Officer (MEO) at LRI using MedicalExaminers@uhl-tr.nhs.uk
  - Please bear in mind data security and confidentiality.
  - Please send from an email address that is appropriate to receive replies from the ME office, OR indicate clearly how replies should be transmitted.
  - Please provide a telephone number that will allow queries to be addressed urgently NOT the publicfacing practice switchboard.
- 5. The contact details of the next of kin will be essential; please inform them that an ME will telephone them and if possible provide an information leaflet about the ME service.
- 6. The referral form will be picked up by the MEO at the start of the next working day (for out of hours support for urgent certification see below). The ME on duty will be informed by the MEO, if not already aware. The ME will access SystmOne and look at the record.
- 7. If the cause of death seems straightforward, the coroner need not be involved, and the attending doctor has not identified any uncertainty, the ME telephones the next of kin and has the usual conversation about the cause of death, quality of care etc. The process will normally be delayed if the next of kin cannot be contacted by the ME office. The next of kin is then advised to expect a call from the Registrar to arrange registration of the death.
- 8. The ME will then telephone the attending doctor **using the name and number(s) on the form.** The process will be delayed if the attending doctor cannot be contacted.
- 9. The ME agrees a cause of death with the attending doctor or agrees coronial referral. If referral to the coroner is needed this will be done by the GP, not the ME, as the coroner may have supplementary questions. If the ME has already had a satisfactory conversation with the next of kin, the referring doctor will then be in a position to issue the MCCD.
- 10. If the ME has not had a satisfactory conversation with the next of kin but referral to the coroner does not seem appropriate, such a conversation should take place. When complete, the ME office contacts the doctor (or practice) to advise on issue of the MCCD or coroner referral.

(Please note that the national model would normally have speaking to the family and to the referring doctor done by the Medical Examiner's Officer (MEO) rather than the ME, unless problems arise. We may move to that in due course, but the ME **must** speak to the certifying doctor in person if the ME is asked to complete an MCCD).

11. The ME office will return a short report to the GP or practice. If appropriate this can be copied to the Registrar and/or the Coroner's Office. This short report will include any comments from the bereaved and possible concerns about care. Primary care does not have a unified system for mortality review so no other route of feedback is planned. In the unlikely event of serious issues being raised the ME will consult the Regional Medical Examiner or the Coroner.

An arrangement for out of hours access to medical examiners is under development (up to 9pm and at weekends and Bank holidays) to facilitate urgent certification for religious and other reasons. This can be accessed by telephoning the main UHL switchboard (0300 303 1573) or the Lead Medical Examiner (Prof. Furness) on 07595691052. These arrangements may change; current information is available during office hours from the Medical Examiner's Office on 0116 204 7846. In some cases the referring doctor may wish to delegate completion of the MCCD and cremation form to the medical examiner, if the relevant regulations pertaining to the Coronavirus Act 2020 are still in force. The process would be:

- a) The ME observes that the additional sections of the referral form have been completed, requesting MCCD and/or cremation form completion.
- b) If the ME is satisfied that the cause of death is natural and correct, the ME completes an MCCD and, if needed, a cremation form, in accordance with the current emergency regulations.
- c) The MCCD is scanned by the ME office and sent by email to the Registry Office, with a copy emailed to the practice concerned.
- d) Staff at that practice ask an appropriate doctor to check the MCCD and alert the Registry Office and Medical Examiners' Office as a matter of urgency if any problem is identified.
- e) The cremation form, if requested, is completed by the ME, scanned and sent by email to the practice, with electronic copies sent to the crematorium (usually <u>cemeteries@leicester.gov.uk</u>) and to the Funeral Director, if known. If not known, the funeral director can obtain a copy on request to the LRI Bereavement Office (<u>Bereavement.services@uhl-tr.nhs.uk</u> or 0116 258 5196).

Cremation form fees will be paid to UHL to support the medical examiner service, not to individual medical examiners.

### Medical Examiner's Referral Form and Report

#### Minimum essential information:

Information regarding the deceased person:							
First name(s):			nily name:				
NHS number:			of death:				
Name of attending / certifying doctor:							
Doctor's mobile phone no.			Date last attended:				
Name of practice:							
Preferred contact as next of kin, partner, relative or representative:							
Name:	Re	elationship:	Phone n	umber(s):	Aware of death (Y/N):		
Other information, including alternative NoK if above not available:							
Suggested cause of death:							
1a							
1b							
1c							
2							
Reasons to refer to the coroner? (if none, please state 'None'):							
Should the ME delay speaking to the relatives until after having spoken to the referring doctor? Yes / No							

#### End of mandatory information section

# *If the Medical Examiner is asked to complete an MCCD and / or cremation form, the following information is also needed: (Leave blank if that service is not needed)*

Attending doctor's GMC number:	Deceased's age:				
Occupation(s) during life (NOT just 'Retired')					
Death confirmed by:	Time of death:				
Place and address where death occurred:					

# *If the Medical Examiner is asked to complete a cremation form the following information is also needed: (Leave blank if cremation form not needed)*

Funeral director / Crematorium(if known)							
Names and contact details of key personnel:							
Role	Name(s)	Phone Number(s)	GMC Number(s)				
Usual GP (If not as above)							
Person(s) involved in		Person(s) present at					
delivery of care:		death:					
Do any of these people have any concerns re. the cause of death?							
Usual residential address of deceased (including postcode) If same as place of death, state 'As above'.							
Any other relevant information?							
e.g. Was any hazardous implant placed in the body (such as a pacemaker, radioactive material or 'Fixion' nail). If 'Yes', has it been removed?							
Did the deceased undergo any surgical operation in the 12 months before death? If so please state operation type; date; surgeon's name; and state whether							
in your opinion the operation could have contributed to or hastened death.							
Is an autopsy planned? Are the results known?							
1							

## Medical Examiner's report:

Deceased name		Deceased DoB:				
ME name:		Date:				
Notes from medic	al record:					
Notes from discus	sion with certifying doctor:					
Notes from speak	ing to relative(c):					
Notes nom speak						
Agreed cause of d	leath:					
1a						
1b						
1c						
2						
Reasons to refer to the coroner? (if none, please state 'None'):						
Suggested action / person(s) to send report to (in addition to GP practice):						