



Determination Of Death

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Effective: 04/01/2026

Approval: John Poland – Executive Director

Next Review: 01/2029

General Procedures/Considerations:

- Resuscitation need not be initiated and may be terminated for pts who meet Obvious Death or Probable Death criteria as contained in this protocol, at the time of initial assessment.
- A valid Do Not Resuscitate (DNR) should be honored for any pt with absent respirations, pulses and neurological response, regardless of the cause of death (e.g. terminal illness, trauma).
- Hypothermia, drug and/or alcohol overdose can mask neurological reflexes. If any doubt exists about contributing environmental factors (e.g. cold water submersion) and no valid DNR exists, initiate resuscitation and treat according to applicable S-SV EMS protocol.
- In the event of a declared MCI, death may be determined in accordance with START/JUMP START criteria.
- For all pts treated under this protocol, the following must be assessed/confirmed (as possible):
 - Absent respirations: look, listen (auscultate), and feel for respirations for a minimum of 30 secs.
 - Absent pulses: palpate both the carotid and apical pulses for a minimum of 30 secs.
 - Absent neurological response: check pupil response with a light and check for response to painful stimuli.
- If the base/modified base hospital physician directs EMS personnel to terminate resuscitation efforts once transport has begun, the ambulance shall discontinue lights and siren and continue transport to the original destination hospital. In such situations, EMS personnel shall transport the pt to the emergency department (ED) where turnover will be given to ED staff for legal determination/pronouncement of death.
- If termination of resuscitation occurs at rendezvous location with HEMS aircraft, the body shall not be moved from the ambulance. Follow instruction for EMS Personnel Upon Determination of Death (below).
- If there is any objection/disagreement by family members or EMS personnel to terminating or withholding resuscitation for pts who have a valid DNR or meet probable death criteria, BLS measures (including defibrillation) shall continue or begin immediately and EMS personnel shall contact the base/modified base hospital for further direction.

Instructions for EMS Personnel Upon Determination of Death:

- If not already on scene, request law enforcement.
- Minimize contact with the body and scene to protect potential crime scene evidence.
- Appropriate EMS personnel shall remain on scene until released by law enforcement.
- Provide law enforcement with the following minimum information:
 - Unit ID.
 - Name and certification/license # of EMS provider determining death.
 - Patient demographics and known, pertinent medical history.
 - Determination of death date and time.
- At a minimum, the PCR must include the following:
 - Time of determination of death/termination of resuscitation.
 - Six-second cardiac monitor strip of two (2) leads for pts meeting probable death criteria (**AEMT II**).

See page 2 for Determination of Death Assessment Criteria



Determination Of Death

Determination of Death Assessment Criteria
(all pts must have absent respirations, pulses & neurological response)

BLS

- Assess for the presence of one (1) or more of the following **Obvious Death Criteria**:
 - Decapitation
 - Decomposition
 - Incineration of torso and/or head
 - Exposure, destruction and/or separation of the brain or heart from the body
 - Rigor mortis – if determination of death is based on rigor mortis, EMS personnel must 1) confirm muscle rigidity of the jaw by attempting to open the mouth & 2) confirm muscle rigidity of one arm by attempting to move the extremity
 - A valid & applicable DNR, POLST, or advanced directive

EMS personnel may determine death*

Does pt meet Obvious Death Criteria?

← YES

NO

Are LALS personnel on scene?

NO →

Initiate resuscitation & treat per applicable S-SV EMS protocol(s)

YES

LALS (AEMT II)

- Assess for the presence of one (1) or more of the following **Probable Death Criteria**:
 - Lividity or Livor Mortis & cardiac monitor showing asystole in two (2) leads
 - Blunt or penetrating trauma & cardiac monitor showing asystole in two (2) leads
 - Blunt trauma & cardiac monitor showing PEA at a rate ≤ 40 /min

EMS personnel may determine death*

Does pt meet Probable Death Criteria?

← YES

NO →

Initiate resuscitation & treat per applicable S-SV EMS protocol(s)

*Once EMS personnel have determined death, they shall follow the 'Instructions for EMS Personnel Upon Determination of Death' contained on page 1 of this protocol