pennsylvania
DEPARTMENT OF HEALTH

Entering *Other* as Place of Death

1 From the Place of Death screen select **Other (specify)** from the **Type of place of death** drop-down list, then complete the rest of the fields as follows:

| Type of place of death | Other (specify) ⌄ | Other Specify | Highway |

If the death occurred on a highway, select **Other (specify)**.
- o   Enter **Highway** in the **Other Specify** field.
- o   Enter as much of the **Street Address** as is available.
- o   The **City**, **County**, **State**, **Country** and **Zip** Code must be entered.
- o   **Do not** enter "scene."

| Type of place of death | Other (specify) ⌄ | Other Specify | Friend's Residence |

If the death occurred in a residence other than the decedent's home, select **Other (specify)**.
- o   Enter a description of the residence in the **Other Specify** field, such as **Friend's Residence**.
- o   Enter the full address including **Street Address**, **City**, **County**, **State**, **Country** and **Zip Code**.

| Type of place of death | Other (specify) ⌄ | Other Specify | Smith Personal Care Home |

If the death occurred in a personal care home, select **Other (specify)**.
- o   Enter the name of the personal care home such as **Smith Personal Care Home** in the **Other Specify** field.
- o   Enter the full address including **Street Address**, **City**, **County**, **State**, **Country** and **Zip Code**.

2 Click the **Save** or **Next** button to continue.   [Save]   OR   [Next]