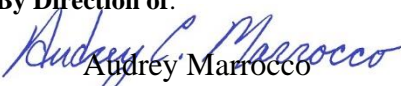


STATE REGISTRAR NOTICE

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|---|--|--|
| Subject: <i>Guidance for Medical Professionals: Reporting of Deaths Attributed to COVID-19</i> | Type: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Transitory | Number: <p style="text-align: center;">2020-01</p> |
| Date Issued: <p style="text-align: center;">March 6, 2020</p> Date Revised: <p style="text-align: center;">April 16, 2020</p> | Audience: <p style="text-align: center;">Medical Professionals</p> | By Direction of:  Audrey Marrocco State Registrar |

The Bureau of Health Statistics and Registries (BHSR) is awaiting formal and detailed guidance from CDC’s National Center for Health Statistics on the reporting of deaths where Coronavirus Disease 2019 or COVID-19 has caused or is assumed to have caused or contributed to the death of a decedent. Below is an interim guidance has been developed for medical professionals¹ to be followed in reporting these deaths until further information is available.

Mandatory Electronic Reporting of Deaths

All deaths attributed to COVID-19 are required to be reported electronically to BHSR through Pennsylvania’s Electronic Death Registration System (EDRS) which is available online at <https://www.dohdave.pa.gov>. The paper “Certificate of Death” (form H105.143) or the Medical Certification Worksheet (form HD02036F) may not be used to report these deaths since there is a significant time lapse from the date of death until notification is received by BHSR. Due to the criticality of timely reporting at the state and national levels, EDRS must be used to report these deaths.

Medical professionals are encouraged to submit the report of death through EDRS prior to release of the body to a funeral home so that funeral home workers are aware of the decedent’s cause of death. The release of the body to the funeral home should follow standard timeframes and not be delayed due to reporting requirements.

In accordance with the Vital Statistics Law of 1953² (Vital Statistics Law), all deaths must be fully reported to BHSR within 4 days of the death occurring. Full reporting of the death includes both a medical section (completed by a medical professional) and a personal and demographic section (completed by the funeral director). Therefore, medical professionals should strive to report the death within the first 24 hours following the time of death.

Licensed healthcare facilities that have not yet adopted EDRS are encouraged to immediately identify a facility administrator to coordinate the implementation of EDRS at your facility. To learn more about EDRS, visit the EDRS webpage at www.doh.pa.gov/edrs and then view the “Medical Facility” information. It only takes few minutes to set-up an account.

¹ A medical professional is defined as a physician, certified registered nurse practitioner, physician assistant, or dentist.

² 35 P.S. §§ 450.101 - 450.1003.

Reporting the Cause of Death

For public health surveillance purposes, it is important to emphasize that **COVID-19** must be reported as the cause of death where Coronavirus Disease 2019 caused or is assumed to have caused or contributed to the death. This is consistent with terminology used by the World Health Organization (WHO).

Proper specification and detail of the chain of events leading to death in Part I of the report of death is also important. For example, in cases where COVID-19 causes pneumonia and fatal respiratory distress, both pneumonia and respiratory distress should be included along with COVID-19 in Part I as shown below.

Cause of Death

NCHS Recommendations for Entry of Cause of Death

Enter the chain of events- diseases, injuries, or complications- that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. DO NOT ENTER OLD AGE. Enter only one cause on a line. Add additional lines if necessary.

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.

| Cause of Death | Approximate Interval | Onset to Death |
|--|----------------------|----------------|
| Immediate Cause (Final disease or condition resulting in death) PART I Line a Acute respiratory distress syndrome | 2 days | |
| Due to or as a consequence of Line b Pneumonia | 10 days | |
| Due to or as a consequence of Line c COVID-19 | 10 days | |
| Due to or as a consequence of Line d | | |
| PART II Other significant conditions | | |

Medical professionals should include as much detail as possible based on their knowledge of the case, review of the medical records, laboratory testing results, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions must be reported in Part II.

If another strain of coronavirus caused the death, the medical professional must record the strain of coronavirus (such as Human coronavirus OC43, Middle East respiratory syndrome coronavirus, etc.) in Part I.

Reporting the Manner of Death

The manner of death shall be reported as “Natural” unless circumstances surrounding the death suggest that the death was sudden, violent, suspicious in nature, or was the result of other than natural causes. In cases of non-natural deaths³, the cases must be referred the county coroner or medical examiner for investigation.⁴

Other Factors

| | | |
|---|----------------|---|
| Autopsy Performed | No | ▼ |
| Autopsy findings available to complete cause of death | | ▼ |
| If decedent was female, was decedent pregnant within the last year? | Not Applicable | |
| Did tobacco use contribute to death | No | ▼ |
| Manner of Death | Natural | |
| Was Medical Examiner or Coroner contacted? | No | ▼ |
| ME Case Number | | |

Medical Certifiers

In accordance with the Vital Statistics Law, the medical certification of all reports of death shall be completed by a medical professional who attended the deceased during the last illness. If the decedent is a family member of the medical professional or the medical professional is physically unable to certify the case, then the case shall be referred to another medical professional at that facility. If another medical professional is unavailable or unwilling to medically certify the death, the case shall be referred to the county coroner or medical examiner⁵.

Collection and Submission of Postmortem Specimens from a Decedent Under Investigation (PUI)

The Centers for Disease Control and Prevention has released “Interim Guidance for Collection and Submission of Postmortem Specimens from Deceased Persons Under Investigation (PUI) for Covid-19”. This guidance is available online at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html>. Medical professionals should follow this guidance in determining if an autopsy should be performed on the decedent and the protocol in place in collecting and submitting postmortem specimens.

³ A non-natural death is defined as a death where the circumstances surrounding the death suggest that the death was sudden, violent, suspicious in nature, or was the result of other than natural causes.

⁴ 35 P.S. § 450.503.

⁵ Id.

General Guidance and Training

For general guidance and training on cause-of-death reporting, medical professionals can download the CDC's Cause of Death mobile app available through <https://www.cdc.gov/nchs/nvss/mobile-app.htm>. In addition, the CDC is offering an online training module titled "Improving Cause of Death Reporting" which can be found at https://www.cdc.gov/nchs/nvss/improving_cause_of_death_reporting.htm. Continuing Medical Education (CME) and Continuing Nursing Education (CNE) credits are available to medical professionals that successfully complete this course.

For more information on EDRS including training materials and upcoming training webinars, visit the EDRS website at www.doh.pa.gov/edrs.

Benefits of EDRS

In 2019, almost 92,000 or 70% of all deaths were reported through EDRS. EDRS improves the quality and timeliness of death data reporting which is highly critical for public health surveillance, outbreak detection, and public health emergency response.

Contact Information for EDRS User Support and the Death Registry Unit:

By Phone: Vital Events Stakeholder Hotline at 800-323-9613

By Email: EDRS User Account Creation: RA-DHEDRSUSERACCT@pa.gov
EDRS Support: RA-DHEDRS@pa.gov
Death Registration: RA-DHDEATHREG@pa.gov