



Homecare & Hospice Association of Utah

Senate Bill 70

Current Utah law permits only a physician or coroner to pronounce or certify death. SB70 would continue to require a death certificate to be completed and signed by a physician within 24 hours of the death being pronounced; however, it would expand the ability to pronounce death to include a nurse under defined circumstances, including a patient prognosis of 180 days or less (mirroring eligibility criteria for hospice).

When death occurs and a physician is not present, existing practice is for the nurse in attendance to call the physician and describe the signs of death over the phone. Ideally, the doctor is able to answer the call and pronounce death in response to the nurse's report. However, when an attending physician cannot be reached immediately, it often leads to one or more complications. We ask for your support of terminally ill patients and the healthcare providers who care for them by voting 'yes' for SB70.

- Many states have a distinction between declaring death, pronouncing death and certifying death. EMS and Police Officers are usually permitted to declare, but not officially pronounce death. **Nurses are permitted to pronounce death in at least 37 states**, including: Alabama, Alaska, Arizona, Arkansas, California, Connecticut, Delaware, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oregon, Pennsylvania, Tennessee, Texas, Vermont, Virginia, Wisconsin (RN's working in Hospice only).
- The following states have language that is more ambiguous and may only have formal rules about certifying, not pronouncing, death: Maryland, North Dakota, Rhode Island, South Dakota, West Virginia, Wyoming.
- Justification used for states changing legislation to permit RN's to pronounce death:
 - Reduction in delay. The time on the death certificate is the time that a person is pronounced (not declared) dead. There are many cases of a physician not being able to pronounce death for hours to days after the fact, which can have an impact on official medical examiner reports, inheritance, life insurance, and the study of cause of death.
 - Undue grief caused to family and loved ones who must wait for a physician to perform a pronouncement of death.
 - Increased burden to physicians who are often woken in the middle of the night (sometimes several times during the night in the case of Hospice Directors), to listen to the nurse's report - without actually examining the patient themselves- in order to pronounce death. Nurses are competently training and prepared to pronounce death themselves.