

The background of the slide is a close-up photograph of a leaf, showing its intricate vein structure. The image has a color gradient, transitioning from a warm red/pink at the top to a cool blue/purple at the bottom. The text is overlaid on this background.

Verification of expected death

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Current situation

- At present, GP's are advised not to enter care homes wherever possible and this may or not be leaving a gap in support for verifying deaths that may occur within your organisations.
- In many of the nursing homes some staff are able to verify deaths and may already do this.
- Where this is the case - we just wanted to offer a refresher on the procedure and listen to any questions or concerns you may have around this.
- If you do not have staff trained and able to do this – DO NOT WORRY – this is not being expected of you and we are here to

Refresher of how to verify a death

- Confirm identification of patient and that they have DNACPR in place.
- **No signs of spontaneous breathing for 1 minute: chest not moving up and down**
- **No breath sounds on listening with a stethoscope for 1 minute**
- **No carotid (neck) or femoral (groin) pulse on palpating (feeling) for 1 minute**
- **No heart sounds on listening with a stethoscope for 1 minute**
- **No response to painful stimulus – sternal rub (knuckles rubbing on chest) or pressure with thumb in upper inner eye socket**
- **Pupils are ‘fixed and dilated’ on checking with a pen torch - meaning they are large and do not become smaller when light is shone into them, as they normally would.**

Note time and date as well as documentation of all 6 of these findings

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- 6 checks to perform
 - If it helps think of it in order as you would for first aid: **check for response, A BC**
 - Sternal rub or pressure to upper eye socket and pupil response
 - Breathing – look first, then listen
 - Circulation – feel first, then listen
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- When these things are all confirmed, the death of the patient can be confirmed

In summary

- We know there are homes where there are no people trained to verify deaths. We would like to understand:
 - how you are getting on at the moment
 - which routes you are using to receive support
 - Any issues you might be having around this area
- Any questions, comments or concerns?
- Please feel free to ask anything – there is no such thing as a stupid question!
- <https://www.youtube.com/watch?v=BZQs89RsggQ>