Completing the death certificate is one of the last things the physician can do for the patient

Why is the death certificate so important?

Families
Families cannot proceed with business without a completed death certificate. It is needed for:

- Probating estates
- Insurance Claims
- Social Security
- Veterans’ benefits
- Retirement benefits

Public Health

- Monitor the leading Causes of Death
- Unintentional Injury, suicide and homicide related deaths
- Infant deaths
- Occupation-related deaths

Who should sign the certificate?

Was this your patient, were you the attending physician, were you prescribing medication for an ongoing illness or condition, were you covering for an out of town colleague? If so, you are the best person to complete the medical certification of death.

(KRS 213.076) Kentucky Statute states that the medical certification shall be completed, signed, and returned to the funeral director within five working days after presentation to the physician, dentist, or chiropractor in charge of the patient’s care for the illness or condition which resulted in death, except when inquiry is required by KRS 72.400 to 72.475. In such cases, the coroner shall complete and sign the certificate within five days after receiving results of the inquiry as required by KRS 72.400 to 72.475. If a certificate is incomplete, the local registrar shall immediately notify the responsible person and require that person to supply the missing items, if that information can be obtained.

What if I’m not sure about the final cause of death?

Cause of death should be recorded based on your best medical opinion. Terms such as “probable”, “possible”, etc. can be used when the certifier is not comfortable with an exact diagnosis. All significant conditions can then be listed as necessary.

Who signs the certificate when the patient dies at home?

The Coroner, unless he determines that the attending physician has sufficient information to state cause of death.

(KRS 72.465) The coroner shall in his sound discretion determine the extent of inquiry to be made into any death occurring under natural circumstances and falling within the provisions of KRS 72.410 to 72.470, and if inquiry reveals that the physician of record has sufficient knowledge to reasonably state the cause of death occurring under natural circumstances, the coroner may authorize that physician to sign the certificate of death. In all other instances, the coroner shall sign the death certificate in coroner’s cases.

Certifiers should complete items 23a. – 30f.

The Office of Vital Statistics can no longer register a Certificate of Death if Items 23a.-29. are not answered. Items 30a.-30f. must only be answered if applicable, if death was due to any type of injury (accident, suicide, homicide, etc. anything other than natural).

KRS 213.041 National uniformity of documents

(1) In order to promote and maintain nationwide uniformity in the system of vital statistics, the forms of certificates and reports required by this chapter, or by administrative regulations adopted hereunder, shall include, as a minimum, the items recommended by the federal agency responsible for national vital statistics.

(2) Each certificate, report, and other documents required by this chapter shall be on a form or in a format prescribed by the cabinet with due consideration for national uniformity.

(KRS 213.076) states, “The medical certification shall be completed, signed, and returned to the funeral director within five working days after presentation to the physician, dentist, or chiropractor in charge of the patient’s care for the illness or condition which resulted in death, except when inquiry is required by KRS 72.400 to 72.475.” In such cases, and if the cause of death is unknown or under investigation, the cause of death shall be shown as such on the certificate. A supplemental report providing the medical information omitted from the original certificate shall be filed by the certifier with the state registrar within five days after receiving results of the inquiry as required by KRS 72.400 to 72.475. The supplemental report shall be made a part of the existing death certificate. This report shall be considered an amendment, and the death certificate shall be marked “Amended.”

What must be reported to the Coroner?

Homicide
Suicide
Presence of drugs or poisons
Motor vehicle accidents
Deaths in police custody, mental institutions or penal institutions
Death from fire or explosion
Finding human remains/skeletons
Drowning
Sudden Infant Deaths
Death of person under age 40 with no past medical history to explain the death
When body is to be cremated and no past medical history to explain the death
Sudden and unexplained deaths
Death occurs more than 36 hours after the decedent was last treated or attended by a physician, dentist, or chiropractor

Responsibility for medical information
In order for a record to be accepted for filing, certain medical items must be completed. The physician’s signature on the record indicates concurrence that all medically related information provided is accurate and true, to the best of his or her knowledge. The physician and funeral director must work together to ensure a complete record is filed.
INSTRUCTIONS FOR COMPLETING THE KENTUCKY CERTIFICATE OF DEATH

Items 23a., 23b., & 24. Signature and Title of person certifying the certificate of death (Physician, Dentist, Chiropractor or Coroner), date certificate is signed and name and address of person (certifier) who completed cause of death.

23a. To the best of my knowledge, death occurred at the time, date, place and due to the cause stated

[Signature and Title]

23b. DATE SIGNED

[Day, Month, Year]

24. NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 23)

Items 25., 26., & 27. Time death occurred, Date death occurred and Was case referred to medical examiner?

25. TIME DEATH OCCURRED

[Day, Month, Year]

26. DATE PERSON DIED

[Day, Month, Year]

27. WAS CASE REFERRED TO MEDICAL EXAMINER/MORTUARY?

Yes  No

Items 28. Part I, a, b, c, & d. Line a should have the Immediate cause: final disease or condition resulting in death. If the condition on Line a resulted from an underlying condition, put the underlying condition on Line b, and so on, until the full sequence is reported. Always enter the underlying cause of death on the lowest used line in Part 1. Enter best estimate of the interval between presumed onset and the date of death. General terms such as minutes, hours or days are acceptable; terms such as “unknown” or “approximately” may be used.

28. PART I

Immediate cause of death

Appoximate interval between onset and death

28a. 28b. 28c.

Items 28, Part II. 28a., 28b., & 28c., (self explanatory) If decedent was a male do not answer 28a.

Items 29. (self explanatory)

Item 29a.-30f. Must only be completed if manner of death is other than Natural.

For more information:
State Office of Vital Statistics
Cabinet for Health and Family Services
275 E. Main St. 1 E-A
Frankfort, KY. 40621
(502) 564-4212 ext. 3980 & ext. 4425
http://chfs.ky.gov/dph/vital/

WHAT EVERY PHYSICIAN SHOULD KNOW ABOUT CERTIFYING THE DEATH CERTIFICATE