

NSW

GOVERNMENT

Registry of Births Deaths & Marriages
Department of Justice

Facility:

MEDICAL CERTIFICATE OF CAUSE OF DEATH

FAMILY NAME

MRN

GIVEN NAME

☐ MALE ☐ FEMALE

D.O.B. / /

M.O.

ADDRESS

LOCATION / WARD

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

New South Wales

Births, Deaths and Marriages Registration Act, 1995

Medical Certificate of Cause of Death

General Information:

This form is required under Section 39 of the *Births Deaths and Marriages Registration Act 1995* and forms the basis for the registration of a death and the issue of a Medical Certificate of Cause of Death (MCCD). A penalty may apply if a death is not reported within 48 hours of death.

The purpose of this form is to notify the Registrar, Registry of Births Deaths & Marriages (‘the Registry’) of a death and the cause of that death. This form must be

- completed by a registered medical practitioner
- submitted to the Registry within 48 hours of the death
- used in relation to a death of a person
- used in relation to a death that is not reviewable or reportable to a coroner, as specified in Sections 6 and 38 of the *Coroners Act 2009*. Statutory requirements can be found on page 4 of this form.

If you need assistance or are unsure whether you are required to report this death to the Coroner contact the NSW State Coroners Court during business hours on 8584 7777. Otherwise contact the Sydney Department of Forensic Medicine on 8584 7800, or the Newcastle Department of Forensic Medicine 4922 3700 to speak with a Duty Pathologist. You can also refer to the Coroners website at http://www.coroners.lawlink.nsw.gov.au/coroners/for_health_professionals.html

If under section 39 (1)(b) of the BD&M Act, the issue of a MCCD must be deferred, a notice of intention to sign such a certificate must be advised to the Registry by emailing BDM-Deathcertificate@agd.nsw.gov.au. The email must contain the name of the deceased in the subject line. The body of the email must contain the date of death, place of death, any notifiable diseases, the cause of death together with the full name, address and AHPRA number of the doctor.

The importance of the Cause of Death

The cause of death is the basis on which statistics of cause of death are compiled. It is defined as the disease or injury which initiated the chain of events leading directly to death.

Was the deceased of Aboriginal or Torres Strait Island origin?

Please ensure that question 20 is completed as accurately as possible. Accurate identification and reporting of deaths of Aboriginal and Torres Strait Islander people is crucial to accurate ongoing measuring of the prime causes of mortality and morbidity for this population and measuring the impact of strategies to improve their health outcomes.

Correct procedure for reporting the Cause of Death – Part Three

Where a chain of events is in evidence, certification is made by listing the disease or condition leading directly to the death in line (a) of Part Three of the certificate, followed by, on lines (b) (c) (d), the antecedent causes. If a certificate is completed correctly, the underlying causes should appear alone on the lowest used line of Part Three, and the conditions, if any, which arose as a consequence of this underlying condition, should appear above it, one condition on each line, in ascending order of causal sequence.

Other significant conditions are to be stated. These should not directly be part of the chain of diseases or conditions which have caused death but have unfavourably influenced the course of the morbid process. In the case of an accident which led to the condition(s) recorded in (a) to (d), the circumstances of the accident should be stated here.

Section 38(2) - Deaths over 72 years of age - Part one

Notwithstanding that the death may be reportable to the Coroner, if the person was aged 72 years or older and death resulted, directly or indirectly, from an accident resulting in complications such as a fractured neck of femur or subdural haemorrhage, you may certify the cause of death if you are comfortably satisfied that the fall was attributable to the person’s age (unless relatives object). See Section 38(2) of the *Coroner’s Act 2009*.

Privacy and disclosure of information

Information collected in this form and held in the Register may be used for statistical purposes. See the Registry’s website for more information. www.bdm.nsw.gov.au

MEDICAL CERTIFICATE OF CAUSE OF DEATH

SMR010.509

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STATUTORY REQUIREMENTS

BIRTHS DEATHS AND MARRIAGES REGISTRATION ACT 1995

Section 39 Notification of deaths by doctors

(1)

A doctor who was responsible for a person’s medical care immediately before death, or who examines the body of a deceased person after death, must, within 48 hours after the death:

(a) give the Registrar notice of the death and of the cause of death in a form and manner required by the Registrar, or

(b) if the doctor is of the opinion that it is impracticable or undesirable to give notice of the cause of death of the person within that time, give the Registrar notice of the death, and of the doctor’s intention to give notice of the cause of death, in a form and manner required by the Registrar.

Maximum penalty: 5 penalty units.

(2)

However, a doctor need not give a notice under this section if:

(a) another doctor has given the required notice, or

(b) the death has been reported to a coroner under the *Coroners Act 2009*.

(3)

A doctor must not give a notice under this section if the doctor is prevented from giving a certificate as to the cause of death of the person by section 38 of the *Coroners Act 2009*.

CORONERS ACT 2009

Section 6 Meaning of “reportable death”

(1)

For the purposes of this Act, a person’s death is a **reportable death** if the death occurs in any of the following circumstances:

(a) the person died a violent or unnatural death,

(b) the person died a sudden death the cause of which is unknown,

(c) the person died under suspicious or unusual circumstances,

(d) the person died in circumstances where the person had not been attended by a medical practitioner during the period of 6 months immediately before the person’s death,

(e) the person died in circumstances where the person’s death was not the reasonably expected outcome of a health-related procedure carried out in relation to the person,

(f) the person died while in or temporarily absent from a declared mental health facility within the meaning of the *Mental Health Act 2007* and while the person was a patient at the facility for the purpose of receiving care, treatment or assistance under the *Mental Health Act 2007* or *Mental Health (Forensic Provisions) Act 1990*.

(2)

A reference to a medical practitioner in subsection (1) includes a reference to a person authorised to practise as a medical practitioner under a law of another State or a Territory.

(3)

In this section:

health-related procedure means a medical, surgical, dental or other health-related procedure (including the administration of an anaesthetic, sedative or other drug), but does not include any procedure of a kind prescribed by the regulations as being an excluded procedure.

Section 23 Jurisdiction concerning deaths in custody or as a result of police operations

A senior coroner has jurisdiction to hold an inquest concerning the death or suspected death of a person if it appears to the coroner that the person has died (or that there is reasonable cause to suspect that the person has died):

(a) while in the custody of a police officer or in other lawful custody, or

(b) while escaping, or attempting to escape, from the custody of a police officer or other lawful custody, or

(c) as a result of, or in the course of, police operations, or

(d) while in, or temporarily absent from, any of the following institutions or places of which the person was an inmate:

(i) a detention centre within the meaning of the *Children (Detention Centres) Act 1987*,

(ii) a correctional centre within the meaning of the *Crimes (Administration of Sentences) Act 1999*,

(iii) a lock-up, or

(e) while proceeding to an institution or place referred to in paragraph (d), for the purpose of being admitted as an inmate of the institution or place and while in the company of a police officer or other official charged with the person’s care or custody.

Section 24 Jurisdiction concerning deaths of children and disabled persons

(1)

A senior coroner has jurisdiction to hold an inquest concerning the death or suspected death of a person if it appears to the coroner that the person was (or that there is reasonable cause to suspect that the person was):

(a) a child in care, or

(b) a child in respect of whom a report was made under Part 2 of Chapter 3 of the *Children and Young Persons (Care and Protection) Act 1998* within the period of 3 years immediately preceding the child’s death, or

(c) a child who is a sibling of a child in respect of whom a report was made under Part 2 of Chapter 3 of the *Children and Young Persons (Care and Protection) Act 1998* within the period of 3 years immediately preceding the child’s death, or

(d) a child whose death is or may be due to abuse or neglect or that occurs in suspicious circumstances, or

(e) a person (whether or not a child) who, at the time of the person’s death, was living in, or was temporarily absent from, residential care provided by a service provider and authorised or funded under the *Disability Services Act 1993* or an assisted boarding house, or

(f) a person (other than a child in care) who is in a target group within the meaning of the *Disability Services Act 1993* who receives from a service provider assistance (of a kind prescribed by the regulations) to enable the person to live independently in the community.

Section 38 Medical practitioner must not certify cause of death if death is reportable

(1)

A medical practitioner must not give a certificate as to the cause of death of a person for the purposes of notification of the cause of death under the *Births, Deaths and Marriages Registration Act 1995* if the medical practitioner is of the opinion that:

(a) the person’s death is a reportable death, or

(b) the person died in circumstances that would be examinable under Division 2 of Part 3.2.

(2)

Despite subsection (1), a medical practitioner may give a certificate as to the cause of death of a person if the medical practitioner is of the opinion that the person:

(a) was aged 72 years old or older, and

(b) died in circumstances other than in any of the circumstances referred to in paragraphs (b)–(f) of the definition of **reportable death** in section 6 (1) or in section 23 or 24 (1), and

(c) died after sustaining an injury from an accident, being an accident that was attributable to the age of that person, contributed substantially to the death of the person and was not caused by an act or omission by any other person.

(3)

A medical practitioner may not certify the cause of death of a person in accordance with subsection (2) if, before the certificate is given, a relative of the deceased person indicates to the medical practitioner that he or she objects to the giving of the certificate.

(4)

If a medical practitioner certifies the cause of death of a person in accordance with subsection (2), the certificate must state that it is given in pursuance of that subsection.

(5)

A medical practitioner who is prevented from certifying the cause of death of a person because of this section must, as soon as practicable after the death, report that death to a police officer.

(6)

A police officer to whom a death is reported under this section is required to report the death to a coroner or assistant coroner as soon as possible after the report is made.

(7)

An assistant coroner to whom a death is reported under this section is required to report the death to a coroner as soon as possible after the report is made.

Holes punched as per AS2828.1:2012
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Holes punched as per AS2828.1:2012
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PART ONE – ELIGIBILITY AND SCREENING

This form must be completed by a doctor who is required, under Section 39 of the *Births Deaths and Marriages Act (1995)*, to notify the Registrar of Births, Deaths and Marriages of a death (see Statutory Requirements on p4 of this form). This form is not to be used in the case of a perinatal death (person up to 28 days of age). Use Medical Certificate of Cause of Perinatal Death.

1. Did this death occur under or as a result of, or did it occur within 24 hours of the administration of an anaesthetic or sedative drug administered in the course of a medical, surgical or dental operation or procedure or other health related procedure?

Yes - this death must be reported to SCIDUA on form SMR010.511 Report of Death Associated with Anaesthesia/Sedation (Form B). Go to question 2

2. For all public and private hospital inpatients you must complete the NSW Coronial Checklist (SMR010.513). Have you completed this checklist?

Yes No

3. Is this death a reportable death in accordance with Sections 6, 23, 24 or 38 of the Coroners Act (2009)? Note: definitions of reportable deaths are included on page 4 under the 'Statutory Requirements'.

Yes - report this death to the Coroner on form SMR010.510 "Report of Death to the Coroner Form A. Do not complete this Medical Certificate of Cause of Death

4. Did the person die in circumstances where death was not the reasonably expected outcome of a health related procedure carried out in relation to that person? Refer to Section 6(3) of the Coroners Act (2009) for the definition of a 'health related procedure'.

Yes - report this death to the Coroner on form SMR010.510 'Report of a Patient Death to the Coroner (Form A)'. Do not complete this Medical Certificate of Cause of Death

5. Was the deceased pregnant within six weeks of the death?

Yes - go to question 7 No - go to question 6

6. Was the deceased pregnant between six weeks and 12 months of the death?

Yes - go to question 7 No - go to question 7

7. Please advise how you can accurately state the cause of this death?

I cared for the patient in the six months before death. Specify the date last seen alive by you

I have not cared for this patient in the six months before death. I have referenced the cause of death with the health care record of the deceased and I have examined the body of the deceased on

Note: if you have not cared for the patient in the six months before death and you have not viewed the body of the deceased and you have not referenced the health care record and there is no other doctor available who has, you must NOT complete this Medical Certificate of Cause of Death. You must refer this death to the Coroner. If you complete this certificate you may be in breach of Section 38 of the Coroners Act (2009). Refer to page 4.

8. Is this certificate issued pursuant to Section 38(2) of the Coroners Act (2009)? Refer to page 1.

Are you a relative of the deceased?

Yes - you may only complete this certificate if you are the only doctor in a remote area No

PART TWO – DETAILS OF DECEASED USE BLOCK LETTERS ONLY

10. Family name

11. First given name

12. Other given names

13. Date of death

14. Date of birth 15. Age of deceased 16. Sex of deceased 17. Country of Birth

18. Place of death

Name of place/institution (if applicable)

Street no. and name

Suburb/Town State Country Postcode

19. Address of usual residence of deceased as above

Name of place/institution (if applicable)

Street no. and name

Suburb/Town State Country Postcode

If this person was a resident of, or died in a correctional facility, police station, detention centre, mental health facility or a disability care facility the death is reportable – refer to page 4.

20. Was the deceased of Aboriginal or Torres Strait Islander origin?

Aboriginal Torres Strait Islander Both Neither Not known

PART THREE – CAUSE OF DEATH USE BLOCK LETTERS ONLY

PLEASE PRINT CLEARLY, DO NOT ABBREVIATE

21.1	Description of disease or condition	Approximate duration between onset & death
Disease or condition directly leading to death. Do not only state the mode of dying such as cardiac or respiratory failure without also stating antecedent causes.	a)	Due to
Antecedent causes Note. If the direct cause of death as described in line a) was due to, or arose as a consequence of another disease, injury or condition, this should be reported in line b). Similarly, if the condition on line b) was due to another condition, report this on line c) and so forth.	b)	Due to
	c)	Due to
	d)	
21.2	Description of disease or condition	Approximate duration between onset & death
Other significant conditions contributing to the death but not related to the disease, injury or condition causing it.		

PART FOUR – DOCTOR'S DETAILS AND DECLARATION USE BLOCK LETTERS ONLY

22. Family name

23. Given name(s)

24. Business address

Business Name

Street no. and name

Suburb/Town State Postcode

25. Daytime telephone number 26. Mobile telephone number

27. Email address

28. What is your Australian Health Practitioner Regulation Agency (AHPRA) Registration Number?

M E D 0 0 0

29. Did you acquire or do you anticipate acquiring any property, pecuniary or other benefit(s) by reason of this death?

Yes No

30. Have you notified the AMO and discussed the cause of death?

Yes No N/A

31. I hereby certify that:

a) I am a currently registered medical practitioner,
b) I believe this individual is deceased and the death is not reportable to the Coroner and I am satisfied the identity of the deceased is as indicated in part two,
c) I was responsible for providing medical care to the deceased immediately before death or if not, I have examined the deceased after death and I have referenced the medical record,
d) The particulars and cause(s) of death recorded in this certificate are true to the best of my knowledge and belief,
e) I am not related to the deceased or, if so, I am the only doctor in a remote area.

Doctor's signature Designation Date

PART FIVE – LODGEMENT

Original white copy to be sent within 48 hours of the death to the NSW Registry of Births Deaths & Marriages

Duplicate white copy for the health care record

Triplicate yellow copy to be provided to the funeral director or person arranging disposal of the body