Medical Certificate of Death and Stillbirths

Preamble
Registrants are expected to be aware of and comply with their legal, professional and ethical obligations and are encouraged to seek the guidance of legal counsel or the Canadian Medical Protective Association (CMPA). Registrants may also contact a member of registrar staff at the College to discuss professional and ethical obligations.

College’s Position
This guidance has been developed to assist physicians with issues involved in the completion of the Medical Certificate of Death (MCOD) and the Medical Certificate of Stillbirth (MCOS). The MCOD is a document provided by the Vital Statistics Agency and the legal requirements around its completion are set out in section 18 of the Vital Statistics Act and the Coroners Act. The MCOS is a document provided by the Vital Statistics Agency and the legal requirements around its completion are set out in section 11 of the Vital Statistics Act. Relevant passages of these acts are found at the end of this guideline.

Medical Certificate of Death
Any physician licensed for independent practice is permitted to complete the Medical Certificate of Death for natural deaths only, whether or not s/he has attended the patient during life.

The Coroners Act describes the types of deaths that must be reported to a coroner:
- deaths that are considered unexpected and not due to natural causes; and
- deaths of children and pregnant women.

Physicians who are unsure whether or not a death constitutes a coroner’s case should consult directly with the coroner.

The Vital Statistics Agency requires that the Medical Certificate of Death be signed and completed within 48 hours of a death. Timely submission of the MCOD is also necessary for burial arrangements, and physicians should be mindful of this to help minimize stress for family members. The Medical Certificate of Death must not be withheld for administrative reasons.

Families receive a Death Certificate from the director of vital statistics, which is a separate document from the Medical Certificate of Death.
The College recognizes that there are times when a physician is called to complete the MCOD for a patient they have never seen. Since the MCOD must be completed in a timely manner, physicians covering for their colleagues are urged to make every effort to complete the form. A chart review is often enough to establish the cause of death with reasonable certainty. In the unusual circumstance where a physician believes that the death is probably due to natural causes but may have some doubt, s/he should complete a Medical Certificate of Death and identify it as an “interim” document. In this situation, the physician should provide a copy of the interim MCOD to another physician more familiar with the patient’s medical care and request that they provide an amended document (identified as “amended”) to Vital Statistics as soon as possible.

If you wish to plan an expected natural home death, please review the forms and information available at the following link:

**Medical Certificate of Stillbirth**

Section 11 of the *Vital Statistics Act* requires that a stillbirth be registered, and that a Medical Certificate of Stillbirth be completed. While the delivery of a stillborn baby is within a registered midwife’s scope of practice, a midwife may only complete the Registration of Stillbirth form. Only a medical practitioner, nurse practitioner or a coroner may complete a Medical Certificate of Stillbirth. (The Medical Certificate of Stillbirth is on the reverse side of the Registration of Stillbirth form.)

A physician does not need to be in attendance of the delivery of the stillborn baby to complete the Medical Certificate of Stillbirth. If a physician has provided a consultation to the registered midwife regarding the stillbirth, he/she has a professional and legal obligation to complete the Medical Certificate of Stillbirth. The completion of the Medical Certificate of Stillbirth can be delegated to an associate or a locum, providing the delegate is able to certify the medical cause of stillbirth with reasonable accuracy.

For the purposes of the *Vital Statistics Act*, “stillbirth” means: the complete expulsion or extraction from its mother after at least 20 weeks pregnancy, or after obtaining a weight of at least 500 grams, of a product of conception in which, after the expulsion or extraction, there is no breathing, beating of the heart, pulsation of the umbilical cord, or unmistakable movement of voluntary muscle.

**Further Information**

Physicians who are uncertain how to complete a MCOD or a MCOS should consult the Handbook for Physicians, Nurse Practitioners and Coroners Medical Certification of Death and Stillbirth on the Vital Statistics website at the following link:
http://www2.gov.bc.ca/gov/DownloadAsset?assetId=3A7A381BE212491BAE97EF22CA5D80D7&filename=vsa051.pdf
The Medical Certificate of Death and Medical Certificate of Stillbirth forms can be ordered by submitting a written request to:

Attn: Stockroom
BC Vital Statistics Agency
Medical Coding Unit
PO Box 9657 Stn Prov Govt
Victoria BC V8W 9P3
Fax: 250-952-9094

References

Coroners Act, SBC [2007] Chapter 15
Deaths that must be reported by anyone

2  (1) A person must immediately report to a coroner or peace officer the facts and circumstances relating to the death of an adult or child who the person has reason to believe has died

(a) as a result of violence, accident, negligence, misconduct or malpractice,
(b) as a result of a self-inflicted illness or injury,
(c) suddenly and unexpectedly, when the person was apparently in good health and not under the care of a medical practitioner or nurse practitioner,
(d) from disease, sickness or unknown cause, for which the person was not treated by a medical practitioner or nurse practitioner,
(e) during pregnancy, or following pregnancy in circumstances that might reasonably be attributable to pregnancy,
(f) if the chief coroner reasonably believes it is in the public interest that a class of deaths be reported and issues a notice in accordance with the regulations, in the circumstances set out in the notice, or
(g) in any prescribed circumstances.

(2) If a child died in circumstances other than those described in subsection (1), a person who, by regulation, must report child deaths, must immediately report to the chief coroner, in the form required by the chief coroner,

(a) the facts and circumstances relating to the child's death, and
(b) any other information required by the chief coroner.

Stillbirths

11  (1) A stillbirth in British Columbia must be registered as provided in this Act.

(2) Within 48 hours after a stillbirth in British Columbia, a statement, in the form required by the registrar general respecting the stillbirth must be completed and delivered to a funeral director or a vital statistics registrar by
(a) a parent of the stillborn child, or
(b) an adult person, including the funeral director, having knowledge of the facts relevant to the stillbirth.

(3) Every medical practitioner in attendance at a stillbirth, or, if there is no medical practitioner in attendance, a medical practitioner, a nurse practitioner or a coroner, must

(a) complete the medical certificate, included in the form referred to in subsection (2), showing the cause of the stillbirth, and

(b) deliver the medical certificate to the funeral director or a vital statistics registrar

(4) On receipt of the statement, the funeral director must

(a) complete the statement, setting out the proposed date and place of burial or other disposition of the body, and

(b) deliver or cause to be delivered the statement to a vital statistics registrar.

(5) On receipt of the statement, the vital statistics registrar must register the stillbirth if satisfied as to the truth and sufficiency of the statement.

(6) On the registration of a stillbirth, a vital statistics registrar must promptly prepare a disposition permit and deliver it to the person requiring it for the purpose of the burial or other disposition of the body of the stillborn child.

(7) Subject to this section, sections 2, 6, 7 and 17 to 24 apply to stillbirths.

Medical Certificate of Death

18 (1) A medical certificate must be prepared in accordance with subsection (2) in any of the following circumstances:

(a) if a medical practitioner or nurse practitioner

(i) attended the deceased during the deceased's last illness,

(ii) is able to certify the medical cause of death with reasonable accuracy, and

(iii) has no reason to believe that the deceased died under circumstances which require an investigation or inquest under the Coroners Act;

(b) if the death was natural and a medical practitioner or nurse practitioner

(i) is able to certify the medical cause of death with reasonable accuracy, and

(ii) has received the consent of a coroner to complete and sign the medical certificate;

(c) if a coroner conducts an investigation or inquest into the death under the Coroners Act.

(2) Within 48 hours after the death, the medical practitioner, nurse practitioner or coroner, as applicable, must
(a) complete and sign a medical certificate in the form required by the registrar general stating in it the cause of death according to the international classification, and

(b) make the certificate available to the funeral director.

(3) A funeral director, medical practitioner, or nurse practitioner must promptly notify the coroner if either of the following circumstances occurs:

(a) a death occurred without the attendance of a medical practitioner or nurse practitioner during the last illness of the deceased;

(b) the medical practitioner or nurse practitioner who attended the deceased is for any reason unable to complete the medical certificate within 48 hours after the death.

(4) If a cause of death cannot be determined within 48 hours after the death and

(a) an autopsy is performed, or

(b) an investigation or inquest is commenced under the Coroners Act,

and the medical practitioner who performs the autopsy or the coroner who commences an investigation or inquest under the Coroners Act, as the case may be, considers that the body is no longer required for the purposes of the autopsy, investigation or inquest, the medical practitioner or the coroner, as the case may be, may, despite subsection (1), issue and must make available to the funeral director an interim medical certificate in the form required by the registrar general.

(5) After the conclusion of the autopsy, investigation or inquest referred to in subsection (4),

(a) the medical practitioner who performed the autopsy, or the coroner, must complete and sign the medical certificate referred to in subsection (2) and deliver it to the Registrar General, and

(b) the coroner must deliver a copy of any report prepared under section 13 (3) or 16 of the Coroners Act to the registrar general.

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