

Office of Vital Records

DEATH FILING INSPECTION GUIDELINES

FOR: Inspector of Initial Submission of Death Certificate

**ALL DEATH FILINGS ARE FOR DECEDENT PRONOUNCED IN DEKALB COUNTY. All others must be returned to the Requestor for filing in the county of death pronouncement.**

Death filing requests will be inspected and accepted according to the following guidelines. All edits, changes or exceptions are to be completed by the requestor.

|  |  |  |  |
| --- | --- | --- | --- |
| **SECTION** | **REQUIRED** | **EXCEPTIONS** | **COMMON ERRORS** |
| Decedent’s Information | * ALL fields must have a value. * “Unknown” is a value. | * Middle name not required * County is not required in 14c (mailing address) | * Reside in city limits” (7g) * Member of armed forces? (8) * Mother’s name prior to marriage(12) |
| Disposition | * All fields must have a value. * “Unknown” is NOT an acceptable value. | * Certified initials are not required (24a) * Funeral home county is not required (25a) |  |
| Pronouncer | * **Only** MDs and PAs can pronounce at hospital * RNs may pronounce at all other locations | | |
| Cause of Death | * All fields must have a value. * “Unknown” is NOT an acceptable value. * Abbreviations are NOT acceptable. * SEE NOTES regarding coroner/ME notification and cause of death (reverse side) | * “Unknown” is acceptable for the intervals * Part II is not required * 36 is not required if male * 38-44: not required if no injury noted (33a) * SEE NOTES regarding coroner/ME notification and cause of death (reverse side) | * Autopsy findings left blank * Accidental injury as cause of death not accurately checked in Manner of Death (37) (See NOTES on reverse side) * Coroner not notified (34) (See NOTES on reverse side) |
| Certification | * All fields must have a value. * “Unknown” is NOT an acceptable value. | * If *not* M.E. case, then 45-45b are completed; then 46-46b are not required * Printed name not required |  |

Reference

Data located in “Cause of Death” 31, Part 1. Enter the Chain of Events

34. Was Case Referred to Medical Examiner or Coroner

37. Manner of Death

**REQUIRED: Coroner/ME Notification**

Key Words or Phrases

This list is not exhaustive. If these key words/phrases are listed in 31, Part 1, then No. 34 must be noted as “Yes” and No. 37 must NOT be listed as “Natural” or “Could not be determined.” If there is any discrepancy, the funeral home must reconcile with the coroner/ME.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Accident | Drug Intoxication | Heat Exhaustion | Laceration(s) | Traumatic |
| Alcoholic toxicity | Exposure | Heat Stroke | Overdose |  |
| Aspiration | Fracture | Hematoma | Poisoning |
| Brain Injury | Frostbite | Homicide | Suicide |
| Choking | Gunshot | Hypothermia | Toxicity |

**Key Words Indicating Injury Due To Accident**

If present in 31, Part 1, then Manner of Death (37) must be marked as “Accident.” If not, the funeral director must reconcile the discrepancy.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Abrasion(s) | Burn(s) | Crush | Hematoma | Laceration(s) |
| Adverse Reaction | Child Abuse | Dislocation | Hip fracture | Poisoning |
| Amputated | Concussion | Foreign body in ear, nose, etc. | Hemorrhage following injury or accident | Sprain |
| Avulsion | Contusion(s) | Fracture (not pathologic) | Injury (accident) such as fall; NOT due to disease | Wound (injury NOT due to disease) |

If there is only one condition such as “cerebral hematoma” shown on the death certificate, the underlying cause of “hematoma” must also be indicated.

**NOT REQUIRED: Coroner/Me Notification**

Key words or phrases

|  |  |  |
| --- | --- | --- |
| Alcoholic Intoxication | Anoxia Brain Injury (if explained why) | Drug Abuse |

*Registrar: If the cause of death indicated a coroner/ME should be notified and the coroner/ME was notified and refused jurisdiction, enter on the reverse of the certificate “coroner/ME notified and refused jurisdiction.”*

If you have any questions regarding when a coroner/ME should be notified, speak with the local registrar or the State Office of Vital Records.