Manitoulin-Sudbury District Services Board POLICY & PROCEDURES MANUAL			
Section: G.	Paramedic Services	Effective Date: April 30, 2019	
Topic: 3.	Operations Directives	Replaces: May 30, 2010	
Subject: 25.	Management of VSA/Deceased		
	Persons		
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PURPOSE

To ensure Paramedic Services staff have a sound understanding of operational and Regulatory expectations surrounding the management of vital signs absent and deceased persons.

APPLICATION

Paramedics, Paramedic Superintendents, Senior Managers

PROCEDURE

Management of Sudden Cardiac Arrest Events

In a circumstance of sudden, or unexpected cardiac arrest event, Paramedics shall assume life. Until Termination of Resuscitation (ToR) direction has been issued by a Base Hospital Physician. Paramedics shall immediately upon arrival:

- Initiate resuscitative measures in accordance with established Standards and Directives.
- Exhaust the resuscitation Directives in advance of transportation. Unless the environmental, or clinical conditions warrant immediate transportation.
- Follow Directives as set out by the Base Hospital.

Documentation of resuscitative efforts and findings shall be completed on the ePCR, and each paramedic who arrived scene shall complete an Incident Report.

Paramedics shall complete the transportation to the destination hospital once the patient has been loaded onto the stretcher, or extrication has commenced.

Obvious Death

Legal Death requires physician pronouncement of death; however, Paramedics will be required to manage Obvious Death. The designation of Obvious Death may take place following completion of a thorough physical assessment and an understanding of the event history. Paramedics may presume death where there are obvious signs of death as set out in Regulation. Where such a designation has been made, Paramedics shall:

- Treat the deceased, and family with compassion, respect and dignity;
- Request the CACC ACO notify Police Services/Coroner;

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- Complete documentation, including ePCR and Incident Reports.
- Remain on scene until Police Service/Coroner arrival, or where there is a responsible person on scene, or where directed otherwise by CACC.

Legally or Obviously Dead persons shall not be transported by ambulance except from a public place, or where no body removal service is available. Deceased persons may not be transported at the same time as a living patient, except where death is pronounced while enroute to a hospital. Paramedics shall adhere to the Deceased Patients Standard as set out in the BLSPCS.

Suspected Foul Play

Paramedics shall adhere to the Police Notification Standard for Suspected Foul Play, set out in the BLSPCS. Where foul play is suspected, Paramedics shall:

- Make every effort to leave the scene undisturbed and preserve evidence.
- Contact the Paramedic Superintendent for additional direction.

Valid Do Not Resuscitate Orders

Paramedics shall recognize and honour a Do Not Resuscitate Order, where such an order complies with the current MOHLTC Deceased patient Standard. Paramedics shall obtain a valid DNR Confirmation Form with Confirmation Number.

In the event of respiratory or cardiorespiratory arrest in the presence of a valid DNR with Confirmation Number, Paramedic will adhere to directions as specified in the Legislation. Where death has been determined by the Paramedic, they will contact either the patient's Primary Physician, or the Palliative Care Team. Transport will not be initiated.

A valid DNR Order does not preclude interventions necessary to provide comfort, nor does it preclude transport where required (unrelated to DNR).

Patients who have a valid DNR Confirmation Form may be considered suitable for multiple patient transport if the Paramedic assessment and sending facility team believe that death is not imminent.

Paramedics shall include the Confirmation Number, and other relevant findings on the ePCR. Additionally, Paramedics shall complete an Incident Report.

REFERENCE

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