CREMATION CLEARANCE

The New York City Office of Chief Medical Examiner (OCME) only approves cremations for deaths due to natural causes. **If the clinician doesn’t provide enough information about the cause of death during death registration, OCME staff will need to speak with the clinician to learn more about the case before approving cremation.** This creates a burden for everyone involved, including family members who may wait longer than necessary for a document they need. **Follow these tips for faster cremation clearance.**

HELPFUL TIPS

✓ Include the condition that began chain of events leading to death and that was not due to another event or medical condition. This condition is called the **underlying cause.**

The following conditions are **not** underlying causes. Also report the cause(s) of such conditions.

<table>
<thead>
<tr>
<th>Cardiac arrhythmia</th>
<th>Deep vein thrombosis</th>
<th>Multi-organ failure</th>
<th>Pneumonia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cerebral infarct</td>
<td>Dementia</td>
<td>Myocardial infarct</td>
<td>Pulmonary embolism</td>
</tr>
<tr>
<td>Cirrhosis</td>
<td>End stage organ diseases</td>
<td>Paraplegia/quadruplegia</td>
<td>Spontaneous hemorrhage</td>
</tr>
<tr>
<td>Congestive heart failure</td>
<td>Gastrointestinal hemorrhage</td>
<td>Pulmonary fibrosis</td>
<td>Sepsis</td>
</tr>
</tbody>
</table>

Example: A patient with liver cirrhosis from chronic alcohol abuse dies of an upper gastrointestinal bleed.

- Do not put only gastrointestinal hemorrhage as cause of death.
- Put: Line 1A: Upper gastrointestinal bleed, 1B: Ruptured esophageal varices, 1C: Liver cirrhosis, 1D: Chronic alcohol abuse

✓ Report the cause that makes it clear whether the death was natural.

These conditions have natural and non-natural causes. Also report the cause(s) of such conditions.

<table>
<thead>
<tr>
<th>Sepsis</th>
<th>Natural cause example</th>
<th>Non-natural cause example</th>
</tr>
</thead>
<tbody>
<tr>
<td>gangrene due to peripheral vascular disease due to diabetes mellitus</td>
<td>sacral decubitus ulcer due to quadruplegia due to a motor vehicle crash</td>
<td></td>
</tr>
<tr>
<td>Cerebral Vascular Accident*</td>
<td>poorly controlled hypertension; infective endocarditis due to intravenous drug abuse</td>
<td>traumatic brain injury due to a fall</td>
</tr>
<tr>
<td>Paraplegia, Quadriplegia</td>
<td>spinal cord neoplasms</td>
<td>diving accident</td>
</tr>
<tr>
<td>Deep vein thrombosis</td>
<td>metastatic adenocarcinoma of the breast</td>
<td>therapeutic complication of knee replacement surgery</td>
</tr>
</tbody>
</table>

*The term “Cerebral vascular accident” can indicate a non-natural disease process, specifically cerebral hemorrhage, thus requires additional description. The terms “Cerebral infarct”, “Cerebellar infarct”, “Brainstem infarct”, and “Spontaneous hemorrhage” are preferable to “Cerebrovascular accident”.

✓ Report the infection source so the OCME can tell whether the death was due to a medical procedure. At a minimum, indicate that the infection is not known to be due to a medical procedure, for example “HIV no known medical procedure source”, “HIV infection sexually-acquired”, or “Hepatitis C infection due to remote intravenous drug abuse”.

For more information on cause of death reporting contact the QI Unit at 646-632-6730 or VitalQI@health.nyc.gov. For cremation clearance questions contact the OCME at 212-447-2030.
REVIEW: REPORTING CAUSE OF DEATH

Part I: Report the chain of events directly leading to the death beginning with the immediate cause, followed by the intermediate causes, and ending with the underlying cause.

Immediate Cause of Death
The immediate cause of death is the disease, condition, or event that immediately preceded the patient’s death. Usually the immediate cause of death does not appear alone on the death certificate. For example, sepsis, pneumonia, gastrointestinal hemorrhage, multiorgan failure, and arrhythmia are frequent reasons that a person dies, but none of these occur without a preceding event or conditions.

Underlying Cause of Death
The underlying cause of death is the disease or condition that started the chain of events leading to death. An underlying cause is the condition without which the death might not have occurred in the same time and the same manner. Often this is the condition or disease that public health programs try to prevent. Underlying causes of death are often chronic medical conditions and may have occurred years ago.

Intermediate Cause of Death
Intermediate causes of death are significant conditions that result from the underlying cause of death and ultimately give rise to the immediate cause of death.

Part II: Report Other Significant Conditions that contributed to or hastened the death.

Other significant conditions include additional diseases or conditions outside of the primary causal sequence of events in Part I that contributed or may have contributed to the death.

Approximate Interval Onset to Death
The precise time intervals between immediate, intermediate, and underlying causes may not be known to the certifying physician. Approximations are more informative than entering “unknown”. Estimations such as “3–5 years”, “Less than 5 years”, and even “years” are also acceptable. Avoid reporting “unknown.”

***

More cause of death information is online at http://www1.nyc.gov/site/doh/data/data-sets/cause-of-death-quality.page